OPERATING PERMIT APPLICATION

Coastal Bend Groundwater Conservation District 109 East Milam Rd PO Box 341, Wharton, TX 77488

(979) 531-1412 Fax: (979) 531-1002 Email:

thedistrict@cbgcd.com

This form may be faxed, emailed or mailed

| <u>District Use Only</u> |
|--------------------------|
| Permit No |
| Registration No |
| TWDB Grid No |

<u>Part I – Well Owner Information:</u>

| Well Owner: (if multiple Owners, attach landdress: | | | | 7in: |
|--|---|--|-------------------|------------------------------------|
| Phone: Fax: | | | | |
| Registrant: (if other than owner)* | | | | |
| Address: | | | | |
| Fax:Email: | | | State | Zip |
| * If Registrant is other than the owner of th | | | hing the applicat | ble authority to register the well |
| | e property, the registratic should | provide documentation establis | пту те арриса | ne dumorny to register the wen. |
| Part II – Well Location: | | | | |
| Wall Cita Dhysical Adduses on Description | (av. Caman of CD 215 % 219). | | | |
| Well Site Physical Address or Description City:S | | | | - |
| Latitude: (deg) (min) (sec | _ | | nlagga attach mar | showing location) |
| Latitude:(deg)(min)(sec) | | | | showing location.) |
| Will the groundwater produced be transpor | | | (decimal) | |
| | _ | _ | | |
| If yes, explain: | | | | |
| | | | | |
| Part III – Well Information: | | | | |
| Part III – Well Information: | | | | |
| _ | GPM Total Depth of well | : FEET | | |
| Maximum pumping capacity of well: | - | | well not vet dril | led. please have driller estimate |
| Maximum pumping capacity of well: Please List Screening Intervals: | | (If | well not yet dril | led, please have driller estimate |
| Maximum pumping capacity of well: Please List Screening Intervals: Type of Pump: | Depth to pump setting: | (If | | led, please have driller estimate |
| Maximum pumping capacity of well:Please List Screening Intervals:F Type of Pump:F Inside Diameter of the pump (discharge): _ | Depth to pump setting:INCHES Inside Diame | (If | | led, please have driller estimate |
| Maximum pumping capacity of well: Please List Screening Intervals: Type of Pump: | Depth to pump setting:INCHES Inside Diame | (If | | led, please have driller estimate |
| Maximum pumping capacity of well: Please List Screening Intervals: Type of Pump: Inside Diameter of the pump (discharge): _ Pump (or bowl) diameter:INCHES | Depth to pump setting:INCHES Inside Diame Horsepower: | (If | | led, please have driller estimate |
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| Maximum pumping capacity of well: Please List Screening Intervals: Type of Pump: Inside Diameter of the pump (discharge): _ Pump (or bowl) diameter:INCHES Status of this well as of application date: (| Depth to pump setting:INCHES Inside Diame Horsepower: Mark one with X) | eter of Casing INCHES | | |
| Maximum pumping capacity of well:Please List Screening Intervals: | Depth to pump setting:INCHES Inside Diame Horsepower: Mark one with X) | (If | | |
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| Maximum pumping capacity of well: Please List Screening Intervals: Type of Pump: Inside Diameter of the pump (discharge): _ Pump (or bowl) diameter:INCHES Status of this well as of application date: (1) Querating Waiting For Part IV – Well Use: Primary Use of this well please mark (x) for | Depth to pump setting:INCHES | eter of Casing INCHES pleted but not operating g Drilled (Est. 6) | | |
| Maximum pumping capacity of well: Please List Screening Intervals: Type of Pump: Inside Diameter of the pump (discharge): _ Pump (or bowl) diameter:INCHES Status of this well as of application date: () Querating Waiting For Part IV – Well Use: Primary Use of this well please mark (x) for Public Supply (includes comme | Depth to pump setting: | eter of Casing INCHES pleted but not operating g Drilled (Est. of the content of th | | |

| List Proposed | d Usage for 2023 (specify use & a | mount, if agricultural crop irrigation, specify crop & acreage): | |
|------------------|--|--|--|
| Acres | Use | Amount Requested | gallons or acre ft./year. (circle one) |
| Acres | Use | Amount Requested | gallons or acre ft./year. (circle one) |
| Acres | Use | Amount Requested | gallons or acre ft./year. (circle one) |
| List Proposed | l Usage for 2024 (specify use & a | mount, if agricultural crop irrigation, specify crop & acreage): | |
| Acres | Use | Amount Requested | gallons or acre ft./year. (circle one) |
| Acres | Use | Amount Requested | gallons or acre ft./year. (circle one) |
| Acres | Use | Amount Requested | gallons or acre ft./year. (circle one) |
| List Proposed | d Usage for 2025 (specify use & a | mount, if agricultural crop irrigation, specify crop & acreage): | |
| Acres | Use | Amount Requested | gallons or acre ft./year. (circle one) |
| Acres | Use | Amount Requested | gallons or acre ft./year. (circle one) |
| Acres | Use | Amount Requested | gallons or acre ft./year. (circle one) |
| Yes Water Conser | No If Yes, Explain: | nit be used in conjunction with another Operating Permit? No onservation plan; a copy must be attached to application. | |
| If applicant is | ingency Plan attached? Yes required by law to have a drought with this permit have a working m | contingency plan; a copy must be attached to application. | |
| | ees that water produced/withdrawi | n from the proposed well will be put to beneficial use at all time | |
| I hereby cert | ify that the information given he | rewith is true and accurate to the best of my knowledge and registrant will comply with well plugging guidelines & rep | d belief. |
| Print Name | | Signature of Well Owner or Agent | Date |