



Panhandle Groundwater Conservation District
PO Box 637, 201 W. 3rd St.
White Deer, TX 79097
Phone: 806-883-2501
Fax: 806-883-2162

FOR DISTRICT USE ONLY
Date Received
Application No.
Date Completed
Date Issued/Denied

Exempt Water Well Registration

(Pumping capacity must be producing 17.5 gallons per minute or less)

1. Owner

Mailing Address; C/S/Z

Phone No(s) Cell Home Email

Physical Location of property if different than mailing address (1/2 mi east of Intersection of CR 12 & CR T)

2. Land Surface Owner name and address, if different than well owner

(If applicant is other than the owner of the property, provide documentation establishing authority to produce water.)

3. Well Location and Property Description (Survey Map OR Subdivision Plat May be attached)

Total Contiguous Acres County / Counties Quarter(s)

Section Number(s) Block(s) Survey(s) Name

-OR- Subdivision Name; Block & Lot No:

4. Intended Use Domestic Fish & Wildlife Stock/Windmill Frac Industrial/Rig Supply

Other (explain)

5. Quantity and Term Requested and Completion Information

A. Actual or anticipated production pipe size(s) B. Quantity of requested permit GPM

C. Proposed casing size inches D. Proposed Pump Type

E. Actual or anticipated date of project commencement or completion

F. Drillers Name: Phone No.

G. Attach a copy of the well log if available

6. Proposed Well Location

Well is located within Section _____ BLK _____ and is
 _____ measured yards from (N or S) property or section line.
 _____ measured yards from (E or W) property or section line
 Latitude _____ Longitude _____
 Land Surface Elevation : _____ (from TOPO Sheet or GPS Unit)

I agree that this well will be drilled within three (3) yards of the location specified by this application and not elsewhere, and that **I will furnish the Board of Directors the completed driller's log** immediately upon completion of this well and **prior to the production of water**. _____ Landowner Initial I agree that reasonable diligence will be used to protect groundwater quality, avoid waste, achieve water conservation, and that I will follow well plugging guidelines at the time of well closure and report closure. I agree to abide by the District's rules and management plans as may be amended. I hereby certify that I have read the foregoing statements and all data therein contained are true and correct and complies with District Rules.

I agree that I have the legal authority to produce the groundwater associated with the land surface and that this permit may be amended or revoked, based on the legal transfer of the associated groundwater rights or right to produce groundwater to another person/entity. I agree that the permit may be amended in the future due to enforcement of the adopted desired future conditions of the aquifer and the District's rules. I understand that failure to abide by the terms of this permit will result in civil penalties and/or revocation of this permit.

Signature _____ Date _____
 Owner

Printed Name _____ Title _____

Agent Contact Info: (Address, C/S/Z; Office Ph. #; or Mobile Ph. #: _____

I hereby certify that this application has been verified and is meets spacing in accordance with the rules of the District.

PGCD Signature _____ Approval Date: _____

Office Use Only: \$ 100.00 deposit filed by: _____ Ck no: _____ Date Rec'd: _____ Refund Deposit Sent: _____ Rollover _____

FOR DISTRICT USE ONLY I hereby certify that this application has been verified and is administratively complete. This is also your notice to proceed to drill this water well at your own risk until final approval by the Board. <div style="text-align: right;"> _____ General Manager </div> <div style="text-align: right;"> _____ Date </div>

Complete Test Hole Page IF APPLICABLE (No Pumping Authorization)

7. Owner/Applicant: _____ Date: _____

No. of Test Wells _____ For _____ Size of Well(s) _____

County _____ Section _____ Block _____ Survey _____

Test Hole #1: District # _____ : Latitude _____ Longitude _____ Quarter _____

_____ measured yards from (**N** or **S**) property or section line _____ measured yards from (**E** or **W**) property or section line

Location of three (3) closest adjoining wells: Will **Easements be required** from Adjoining Property Owner? ____ YES ____ NO

Well 1 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Well 2 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Well 3 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Test Hole #2: District # _____ : Latitude _____ Longitude _____ Quarter _____

_____ measured yards from (**N** or **S**) property or section line _____ measured yards from (**E** or **W**) property or section line

Location of three (3) closest adjoining wells: Will **Easements be required** from Adjoining Property Owner? ____ YES ____ NO

Well 1 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Well 2 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Well 3 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Test Hole #3: District # _____ : Latitude _____ Longitude _____ Quarter _____

_____ measured yards from (**N** or **S**) property or section line _____ measured yards from (**E** or **W**) property or section line

Location of three (3) closest adjoining wells: Will **Easements be required** from Adjoining Property Owner? ____ YES ____ NO

Well 1 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Well 2 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Well 3 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Test Hole #4: District # _____ : Latitude _____ Longitude _____ Quarter _____

_____ measured yards from (**N** or **S**) property or section line _____ measured yards from (**E** or **W**) property or section line

Location of three (3) closest adjoining wells: Will **Easements be required** from Adjoining Property Owner? ____ YES ____ NO

Well 1 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Well 2 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Well 3 _____ measured yards from proposed well: Size: _____ Type: _____ Owner: _____

Field Inspected ____ Yes ____ No Inspected by: _____ Date: _____
(PGCD staff may space test wells if landowner requests, but spacing is not required for test holes)