

# Red River Groundwater Conservation District

## Application for Well Registration

All wells drilled after April 1, 2012 must be registered prior to construction beginning. Failure to timely register the well shall subject the well owner to enforcement under the District rules. **Complete one application for each well.**

Date \_\_\_\_\_ Register Existing Well \_\_\_\_\_ Application for a New Well \_\_\_\_\_ Transfer Well Ownership \_\_\_\_\_  
*Previous well owner information required*

### Part I-Well Owner and Driller Information:

Well owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact name: \_\_\_\_\_ Fax: \_\_\_\_\_

Alt. Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Registrant: (If other than Owner or Driller) \_\_\_\_\_ Phone: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Fax: \_\_\_\_\_ Email \_\_\_\_\_

Property Owner: (If other than Owner) \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

*If Registrant is other than the owner of the property where the well is located, Please attach documentation to this form establishing the applicable authority to file the application for well registration, to serve as the registrant in lieu of the property owner, and to operate the well for the proposed use.*

Drilling Company \_\_\_\_\_ Phone: \_\_\_\_\_

Driller: \_\_\_\_\_ License # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Fax: \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### Part II - Well Location:

Date/ Year drilled \_\_\_\_\_ (please note if date has been estimated)

Well name: \_\_\_\_\_ Well Site Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: TX Zip \_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_

Is the groundwater withdrawn from the well, used in a location different from the well site?

NO \_\_\_\_\_ Yes \_\_\_\_\_ Location \_\_\_\_\_ USE \_\_\_\_\_

Is the groundwater produced from the well transported for use at any point outside the district boundaries?

No \_\_\_\_\_ Yes \_\_\_\_\_ Explain \_\_\_\_\_

### Part III - Primary Purpose for Water Use:

Mark (X) beside primary use of water from the well:

<input type="checkbox"/> Domestic (household/lawn at residence)	<input type="checkbox"/> Municipal /Public Water System
<input type="checkbox"/> Livestock/Poultry	<input type="checkbox"/> Industrial /Manufacturing
<input type="checkbox"/> Commercial /Small Business	<input type="checkbox"/> Golf Course irrigation
<input type="checkbox"/> Oil / Gas	<input type="checkbox"/> Agriculture
<input type="checkbox"/> Livestock/Irrigation	<input type="checkbox"/> Filling a pond or other surface impoundment
<input type="checkbox"/> Other _____	

### Part IV – New Well Information – Must be completed before application can be approved:

RRGCD Well Registration Number (for wells transferring ownership) \_\_\_\_\_

Is this a replacement well? \_\_\_\_YES \_\_\_\_NO      If YES, is the well being replaced still in use? \_\_\_\_YES \_\_\_\_NO

Will the well being replaced be closed upon completion of the new well? \_\_\_\_YES \_\_\_\_NO

Is the expected capacity of the well 27 gallons per minute or more? \_\_\_\_YES \_\_\_\_NO

Distance to nearest known well \_\_\_\_\_      Is this a test well? \_\_\_\_YES \_\_\_\_NO

### Part V - Well Closure – To be signed by the well owner/responsible party:

Is a Water Well Closure Plan attached? \_\_\_\_YES \_\_\_\_No      If no sign below as a declaration that the owner will report any closure of the well to the District and will strictly comply with the well plugging regulations of the Texas Department of Licensing and Regulation. By signing below, I hereby represent and warrant that I have the full right, power, and binding authority to execute this document on behalf of the owner/responsible party listed herein.

\_\_\_\_\_  
Owner/Responsible Party Name

\_\_\_\_\_  
Owner/Responsible Party **Signature**

\_\_\_\_\_  
Date

### Part VI - Certification – To be signed by the well owner/responsible party:

I hereby certify that the information given herewith is true and accurate to the best of my knowledge and belief. I further certify that all water produced from the well that is the subject of this registration will at all times be put to beneficial use. My signature below represents my acknowledgement that other political subdivisions (such as the county or municipality, for example) may impose additional requirements related to the drilling and completion of water wells under certain conditions, and that I am solely responsible for obtaining any other necessary governmental approval. By signing below, I hereby represent and warrant that I have the full right, power, and binding authority to execute this document on behalf of the owner/responsible party listed herein.

\_\_\_\_\_  
Owner/Responsible Party Name

\_\_\_\_\_  
Owner/Responsible Party **Signature**

\_\_\_\_\_  
Date

**Please submit this application to the District by mail, fax or email:**

**Red River Groundwater Conservation District  
P.O. Box 1214  
Sherman, TX 75091**

**903-786-8211 (fax)**

[rrgcd@redrivergcd.org](mailto:rrgcd@redrivergcd.org)

**If you have questions, please call toll free 1-800-256-0935.**