

# RED RIVER

## GROUNDWATER CONSERVATION DISTRICT

### RED RIVER GROUNDWATER CONSERVATION DISTRICT

P.O. Box 1214, Sherman, TX 75091  
5100 Airport Drive, Denison, TX 75020  
Office: (800) 256-0935 | Fax: (903) 786-8211  
[rrgcd@redrivergcd.org](mailto:rrgcd@redrivergcd.org) | [www.redrivergcd.org](http://www.redrivergcd.org)

### APPLICATION FOR PRODUCTION PERMIT FOR NEW WELL

*Complete one application for each well - Refer to District Rules 3.9 - 3.10.*

*This application must be completed and submitted in conjunction with the District's Application for New Well Registration (Form RRGCD-100), which will be incorporated and considered as part of this application.*

### ***Applicant Information***

Name: \_\_\_\_\_ E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Alt. Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Address City State Zip code

### ***Well Information***

Owner Name: \_\_\_\_\_ Well Name: \_\_\_\_\_

Well Address: \_\_\_\_\_  
Address City State Zip code

### ***Well Spacing***

Does the proposed well location comply with the District's spacing requirements?  Yes  No

*If No, please explain (Application for Exception to Spacing Requirements of the District may be*

*required):* \_\_\_\_\_

### ***Purpose and Amount of Water Use***

*For each proposed purpose of use of water from the well, provide the proposed amount of use:*

Use: \_\_\_\_\_ Amount (gallons/year): \_\_\_\_\_

Use: \_\_\_\_\_ Amount (gallons/year): \_\_\_\_\_

Use: \_\_\_\_\_ Amount (gallons/year): \_\_\_\_\_

Total Amount of Water Requested (gallons/year): \_\_\_\_\_

Will the entire amount of water requested be put to beneficial use in the first full calendar year of production?

Yes  No *If No, please attach supplemental information describing in detail the projected timeframe for use.*

Aquifer or subdivision water is to be drawn from: \_\_\_\_\_

Will the groundwater produced from the well be resold, leased, or otherwise transferred to others, whether inside or outside of the District? Yes No

*If yes, provide the following:*

1. *Description of purpose of use and location to which the groundwater will be delivered:*

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2. *Attach a copy of the legal documents establishing the right for the groundwater to be sold, leased, or otherwise transferred (e.g. contract for the sale, lease, or transfer of groundwater).*

Will the groundwater produced from the well be transported out of the District? Yes No

*If yes, attach supplemental information describing the following issues and provide documents relevant to these issues:*

1. *Availability of water in the District and in the proposed receiving area during the period for which the water supply is requested;*
2. *Projected effect of the proposed transport on aquifer conditions, depletion, subsidence, or effects on existing permit holders or other groundwater users within the District; and*
3. *How the proposed transport is consistent with the approved regional water plan and District Management Plan.*

### ***Hydrogeological Report Requirement***

Is the proposed production capacity of the well, or proposed aggregate production capacity if the well is part of a well system, 200 gpm or more? Yes No

*If Yes, attach a Hydrogeological Report that complies with all of the requirements of the District's Hydrogeological Report Requirements.*

### ***Attachments***

Please check off/describe all items attached to this permit application (not all items listed may be required):

- Application for New Well Registration – Form RRGCD-100 (REQUIRED)
- Location Map Showing Proposed Well Location (REQUIRED)
- Hydrogeological Report
- Water Conservation Plan (WCP)\*
- Drought Contingency Plan (DCP)\*
- Application for Exception to District Spacing Requirements
- Other (explain): \_\_\_\_\_

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\*\* In lieu of submitting the WCP and DCP, the applicant may declare via the *Certification* section below that he/she will abide by the District's Management Plan and Drought Contingency Plan, respectively, except in cases where the applicant is required by other law to prepare a drought contingency plan.

### **Certification – please read carefully**

*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 permit will at all times be put to beneficial use. I further certify and declare that I will comply with the District’s Rules and all groundwater use permits and plans promulgated pursuant to the District’s Rules, the District’s Management Plan, and the District’s Drought Contingency Plan. 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. My signature below further represents my declaration that I am responsible for reporting any closure of the well to the District and the appropriate state agencies and that I will strictly comply with all District well plugging and capping guidelines.*

*I further acknowledge that I am not authorized to drill the well that is the subject of this application until receipt of a Production Permit from the District, and that a District Production Permit is not complete until District receipt of a fully complete and accurate Well Report and Well Completion Form.*

\_\_\_\_\_  
*Print Name*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**STATE OF TEXAS**  
**COUNTY OF \_\_\_\_\_**

**SWORN TO AND SUBSCRIBED BEFORE ME** on (date) \_\_\_\_\_, by  
(applicant) \_\_\_\_\_.

\_\_\_\_\_  
Notary Public – State of Texas  
My Commission Exp. \_\_\_\_\_

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

*Red River Groundwater Conservation District*

*P.O. Box 1214, Sherman, TX 75091*

*Fax: (903) 786-8211 | rrgcd@reddriverscd.org*

*If you have any questions, please call (800) 256-0935*

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**FOR DISTRICT USE ONLY**

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|---|--|--------------|
| Application Fee Received by District?                     | <input type="checkbox"/> Yes <input type="checkbox"/> No | Amount Paid: |
| Is application administratively complete?                 | <input type="checkbox"/> Yes <input type="checkbox"/> No |              |
| Is Applicant currently in compliance with District Rules? | <input type="checkbox"/> Yes <input type="checkbox"/> No |              |

Date of Hearing (if applicable):

Notes: