Gateway Groundwater Conservation District

223 S. Main / PO Box 338 Quanah, Texas 79252

Phone: (940) 663-5722 Fax: (940) 663-2577 Email: gatewaygcd@att.net

Website: www.gatewaygroundwater.com

Test Hole Drill Permit Application

Landowner Information: Name _____ Title _____ Mailing Address _____ Cell Number _____ Home Number _____ Email Address Agent Name _____ Title _____ **Property Location:** This well is located in the (circle one) NW ¼, NE ¼, SW ¼, SE ¼ of Section , Block , _____Survey, ______County, Texas. * Physical Address if known: _____ Acres Estimated Gallons Per Minute: **Driller Information:** Licensed Water Well Driller to be used for well drilling: Date Drilling Anticipated to Begin: _____ I will follow District and State well plugging guidelines at the time of well closure; and All information provided herein is, to the best of my knowledge, true and correct, and that it shall be fra ud upon the District to willfully give erroneous information in this application. Signed: Title: _____

This application was funded by: Owner Operator Other I hereby certify that this application has been verified and follows the rules of the District and that the appropriate fee has been paid:			
District Representative:		Verification Date:	
Application is valid for 6 months from date of application.			
Permit #:		Log Deposit Return:	