

POST OAK SAVANNAH GROUNDWATER CONSERVATION DISTRICT
Permit Application To Drill, Operate and or Alter an Exempt Well

Well Number (Assigned by POSGCD)

Application Date

Please return this completed form to:
POSGCD
P. O. Box 92, (310 East Ave. C) Milano, TX 76556
Phone (512)455-9900 Fax (512)455-9909
email: posgcd@tconline.net

IS THIS WELL WITHIN A SUBDIVISION? Yes: ____ No: ____
(IF WITHIN A SUBDIVISION, PLEASE PROVIDE SUBDIVISION NAME)

PURPOSE FOR THIS APPLICATION:

____ New Well
____ Replacement Well, if replacement please briefly explain
____ Alter an existing well, if altering well, please briefly explain

POSGCD can help with information in the shaded areas on this form.

A CHARGE OF \$25.00 WILL BE ASSESSED FOR ALL "RETURNED" CHECKS

SECTION I – APPLICANT

NAME (First, Middle Initial, Last) _____ Phone Number _____
Street (or PO Box) _____
City _____ State _____ Zip _____

SECTION II - DEPOSIT REQUIRED FOR NEW WELLS

Instructions: Please type or print legibly. Incomplete applications will be returned to applicant

If the applicant intends to drill a new well, a well log deposit of \$100 PER PROPOSED WELL must accompany this application. The entire deposit may be refunded under the terms of the district. If the applicant intends to increase the size of an existing well, increase the size of a pump on an existing well, or replace a permitted well, such that the completed well is an exempt well according to the rules of the District, then there is no deposit required. Only personal or cashier's checks or money orders made out to Post Oak Savannah Groundwater Conservation District will be accepted. **NO CASH PLEASE.** The applicant may be required to submit any additional information identified by the board during the permitting process as reasonably required or beneficial to the districts' decision. Additional funds may be required from the applicant if necessary to complete the District's cost of processing the application.

SECTION III – AUTHORIZATION TO DRILL (If Name and Address of Property Owner are different from Person shown in Section I.)

Name (First, Middle Initial, Last) _____
Street (or PO Box) _____
City _____ State _____ Zip _____
Must answer yes to the following for this application to be complete:
Is copy of Authorization to drill on Property attached according to rule 7.4.4? Yes _____

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SECTION IV – EXEMPTION

Request for Exemption Under Post Oak Savannah Groundwater Conservation District Rule 7.10: Yes ___ No ___

TYPE OF EXEMPTION CLAIMED:

___ A well used solely for domestic needs and that is incapable of producing more than 25,000 gallons per day.

___ A well used for water for feeding livestock or poultry that is drilled or equipped that is incapable of producing more than 25,000 gallons of groundwater per day.

___ Other (Please list Rule Cited & Explanation)

SECTION V – WELL INFORMATION

PLEASE PROVIDE WELL INFORMATION (POSGCD can help with this Section).

Well Location: (Directions to Well Site from nearest state or federal highway):

**Begin at: _____, and then go _____,
and then go, _____, and then go _____,
and then go _____, and then go _____.**

Well is Located in: Milam County: _____ Burleson County: _____

Please include or attach legal description for the property where this well will located.

Have the water rights for this property been leased, sold, or transferred to another party? Yes ___ No ___

SECTION VI - FEES

Has appropriate fee been paid to District to process this application?

YES NO AMOUNT PAID \$

SECTION VII – ATTACHMENTS (please list all items attached to this permit)

*****Please attach legal description of the property where this well is to be drilled**

SECTION VIII – AFFIRMATION AND EXECUTION

I certify that all statements and information in this application are true and correct. I also declare that all groundwater withdrawn will be put to beneficial use at all times, and that I will abide by the Management Plan and Rules of the Post Oak Savannah Groundwater Conservation District .

Signature of Applicant

THE STATE OF TEXAS

COUNTY OF _____

This instrument was acknowledged before me on _____

By _____.

(NOTARY SEAL)

Notary Signature

Can be notarized by any Notary of your choice, at the POSGCD Office, or General Manager can do the notary when he measures your well.