



LOWER TRINITY GROUNDWATER CONSERVATION DISTRICT



602 E. Church Street
P.O. Box 1879 - Livingston Texas 77351
(pho) 936.327.9531 (fax) 936.327.9532
(email) lbgcdistrict@livingston.net
(web site) www.LTGCD.org

STAFF - Bill Jacobs *General Manager*, Martha Ferguson *Staff Assistant*

APPLICATION FOR NON-METERED OPERATING PERMIT

IMPORTANT:

1. Upon application and payment of all application fees, a non-metered operating permit may be issued to non-exempt well owners or operators who are required to report pumping under rule 3.8(d) and pay production fees to the District
2. Permits are good for one calendar year. Initial permits may be prorated for the number of months left in the year of application. Permits must be renewed annually. The District will send out renewal notices in the last quarter of the year. Permit fees are due by December 31st of each year. Failure to pay renewal fees timely may result in the permit being withdrawn and a new permit application and fees required to continue operating with a non-metered permit (Rule3.8)(h)
3. The production limits set by permit are subject to review by the District including the use and purpose for the water production, size of the well casing and pump, and other information as necessary to determine the amount of water produced on an annual basis. This District review may include a field visit to observe the well and well operation/use. The determination for the eligibility for this permit and the minimum or maximum production for the purpose of this permit rest solely with the District.
4. A well must be registered with the District before an operating permit or non-metered operating permit will be issued.

5. THIS FORM MUST BE SIGNED.

INSTRUCTIONS: Complete one form for each well. Type or print and submit along with the Non-metered Operating Permit Fee(see Schedule below) to the above address. Additional information or explanations may be attached. An Application fee for well drilling or re-working must be submitted prior to , or with this application unless applicant is applying for an existing well or is only requesting an increase in pumping allocation based on historical or expected use. All wells must be registered with the District and all applicable fees paid prior to permits being issued.

CHECK ALL THAT APPLY:

APPLICATION FEE	_____	<u>\$50.00</u>
ANNUAL FEE:	_____	\$25.00 up to 1,000,000 gallons annually
	_____	\$50.00 up to 2,000,000 gallons annually
	_____	\$75.00 up to 3,000,000 gallons annually

INCLUDE A CHECK PAYABLE TO: LOWER TRINTY GROUNDWATER CONSERVATION DISTRICT

NON-METERED OPERATING PERMIT

Date of application: _____

Date of application: _____

Well Owner: _____

Contract Name: _____

Mailing address _____

City: _____ State: _____ Zip: _____

Well location address: _____ County: _____

Latitude _____ Longitude _____

Date well is anticipated to begin producing water _____

For Existing operating wells: Date Drilled: _____

Certification:

- 1.) Applicant agrees that water produced / withdrawn from the well will be put to beneficial use at all times.
- 2.) Applicant hereby agrees to comply with the District's Rules and Management Plan.

**I hereby certify that the information given herewith is true and accurate to the
best of my knowledge and belief.**

Print Name

Signature of Well Owner or Agent

Date

Please fill out all necessary information prior to submission, be sure payment of fee is included

LOWER TRINITY GROUNDWATER CONSERVATION DISTRICT P.O. Box 1879 - 602 E. Church St. - Livingston Texas 77351 (pho) 936-327-9531 (fax) 936-327-9532		For District Use Only <input type="checkbox"/> Well Permit Expiration Dates (180 days) _____ Ext 1(+180d) _____ Ext 2 (+180d) _____ <input type="checkbox"/> Other Aquifer Penetration Registration _____ <input type="checkbox"/> Fee Paid \$ _____ <input type="checkbox"/> Well Registration	
Part I - Multi-purpose Form of Intent to Drill, Alter, or Register a Well or Other Aquifer Penetration			
A. Check appropriate box for type of application/ registration <input type="checkbox"/> New Well: casing size _____ pump type and size _____ <input type="checkbox"/> New Other Aquifer Penetration (fill out pertinent info) <input type="checkbox"/> Alteration of Existing Well. Explain reason for and nature of alteration: <input type="checkbox"/> Alteration of Existing Other aquifer Penetration. Explain reason for and nature of alteration: <input type="checkbox"/> Existing Well (apply for permit of existing well or register existing well) _____ gallons per minute estimated capacity of requested well or alteration of existing well.		Completion Paperwork Turned in: <input type="checkbox"/> State of Texas Well Drillers Report <input type="checkbox"/> State of Texas Well Plugging Report (if applicable) <input type="checkbox"/> State of Texas Report of Undesirable Water or Constituents (if applicable) <input type="checkbox"/> Copies of all well information available (drillers log, etc.)	
C. Anticipated Start Date of Drilling: _____ Well driller must notify LTGCD 24 h before the following begin: <input type="checkbox"/> Start of drilling <input type="checkbox"/> Start of cementing <input type="checkbox"/> Completion of well/penetration PLEASE PRINT OR TYPE REQUESTED INFORMATION		B. Additional Required Information: 1. Attach a copy of the deed record (page containing ownership information as filed with the County Clerk). 2. Include a copy of the survey, plat, or on-site sewage facility design plan of the property showing the location of the well and septic system (note distances). 3. Flood Plain Development Permit No: _____ 4. Submit the State Well Drillers Report (after complete) If existing well, Name of Original Owner: _____	
D. Please check one of the following: <input type="checkbox"/> Capable of more than 25,000 gallons per day (17.36 gpm). If checked, please fill out Part I and II. <input type="checkbox"/> Less than or equal to 25,000 gallons per day (17.36 gpm). If checked, please fill out Part I. Omit Part II.			
E. Well/ Penetration Owner Information-Owner Name: _____		F. Owner Tel: _____	
G. Owner Mailing Address: Street or PO Box, City State Zip			
H. Well Driller Company Contracted With: _____		I. Pump Installer Company Contracted With: _____	
J. Company Mailing Address: (Street or PO Box, City, State, Zip) _____		K. Company Mailing Address: (Street or PO Box, City, State, Zip) _____	
L. Company Tel: _____	M. Company Fax / Email: _____	N. Company Tel: _____	O. Company Fax / Email: _____
P. Well Driller Name: _____		Q. Pump Installer Name: _____	
R. Weller Texas State License No. _____		S. Pump Installer Texas State License No. _____	
T. Well / Penetration Information-Latitude: _____		U. Longitude: _____	
V. Well / Penetration Site Physical (911) Location (Street Address, City, Zip) _____			
W. Name of Subdivision _____		X. Unit _____	AA. Block _____
			BB. Lot _____
CC. If not located within a subdivision: Name and number of Survey/ Abstract: _____			DD. Acreage: _____
EE. If no physical (911) or other address information, give directions on separate page to the property that will allow an inspector to find the site.			
FF. Purpose of use (check all that apply): <input type="checkbox"/> Domestic (private homeowner well) <input type="checkbox"/> More than 10 households <input type="checkbox"/> Livestock <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Municipal <input type="checkbox"/> For Sale to others <input type="checkbox"/> Public Safety <input type="checkbox"/> Commercial (give company name) <input type="checkbox"/> Test well <input type="checkbox"/> Monitor well <input type="checkbox"/> Observation well <input type="checkbox"/> Other (please specify): <input type="checkbox"/> Hydrocarbon Exploration			
GG. Distance of well/ penetration from septic tank and drain, leach, or absorption field (feet): Distance from nearest property line (feet): _____ Distance from nearest building (feet): _____ Distance from centerline of nearest public road (feet): _____ Distance from existing well (feet): _____			
HH. By signing this form, you declare that you are familiar with the District's current rules and well construction standards and agree to Abide by them. By signing this form, the Well/ Penetration Owner understands that this allows LTGCD to enter the property to inspect.			
Signature of Well/ Penetration Owner/Date: _____		Signature of Well Driller/ Date: _____	
		Signature of Pump Installer/ Date: _____	

PART II-APPLICATION FOR NON-EXEMPT WELL PERMIT	Permit No. _____
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Applies to wells capable of producing more than 25,000 gallons per day (17.36 Gallons Per Minute).	Date Signed: _____
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A. Owner Name, Address, and Phone no:	Date Application Completed: _____	
	Hearing Date: _____	
	Date Approved: _____	Date Denied: _____
	Permitted Capacity (gpy or Ac-Ft/Y): _____	
	Permitted Use: _____	
	Renewal Date: _____	

B. Location and Use of Produced Water: Attach a map or plat drawn on a scale that adequately details (and show exact boundaries of property) the location of:

<input type="checkbox"/> Existing or proposed well and other improvements on the property	Land surface elevation, mean sea level (ft): _____
<input type="checkbox"/> Existing water use facilities	Geologic formation(s) from which water is to be produced: _____
<input type="checkbox"/> Proposed use or increased use of produced water.	

C. Location of Adjacent Permitted Wells. With assistance from the District, attach a map or plat drawn on a scale of one inch equaling (1,000)ft. that adequately identifies all permitted wells within a 1/4 mile radius of the proposed or existing well.

D. Actual or anticipated annual amount of water to be used (specify units, gallons per year, acre feet per year): _____

E. Actual or anticipated pump size in gallons per minute: _____

F. Anticipated date the proposed construction or alteration is to begin: _____

G. Other: _____

H. **Availability of other water resources.** Identify, if available, any other presently owned sources of water (i.e., surface, treated) or those which could be owned or otherwise acquired, the availability of which is both technically feasible and economically reasonable for the permittee, that could be reasonably used for the stated purposes, including quality and quantity of such alternate sources:

I. **Water Conservation Plans.** Attach information showing what water conservation plan or measures the permittee has adopted, what water conservation goals the permittee has established, and what measures and time frames are necessary to achieve the permittee's established water conservation goals.

J. Service area description of resold water: If the water is to resold to others, attach a description of (check of attachments) <input type="checkbox"/> service area population <input type="checkbox"/> metering <input type="checkbox"/> lead and repair program <input type="checkbox"/> Is this a platted development <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> delivery and distribution system including number of connections	<input type="checkbox"/> info on customer's water demands (per capita water use) <input type="checkbox"/> water use data <input type="checkbox"/> wastewater data <input type="checkbox"/> water conservation measures <input type="checkbox"/> water conservation and drought or emergency water management plan identifying trigger conditions and means of implementation and enforcement
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K. Well driller must notify LTGCD 24 hours before the following actions begin

<input type="checkbox"/> Start of drilling	<input type="checkbox"/> Start of cementing	<input type="checkbox"/> Completion of well
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L. After drilling and well completion, provide all the following well information, if available

<input type="checkbox"/> State of Texas Well Drillers Report	<input type="checkbox"/> Chemical Analysis	<input type="checkbox"/> State of Texas Well Plugging Report (if applicable)
<input type="checkbox"/> Geophysical Log	<input type="checkbox"/> Pump Test Data	<input type="checkbox"/> State of Texas Report of Undesirable Water of Constituents
<input type="checkbox"/> Hydrologic Analysis (if required)		<input type="checkbox"/> (if applicable)
<input type="checkbox"/> other (please specify): _____		

This form, when completed and approved by the District is a Drilling Permit. This permit will remain in effect for (180) days. Extensions will be granted upon request.

**Permit Application Check List for
Non-Exempt well (commercial)**

***For home owner well (exempt) - fill in parts a, b, c, i, & l in your application data.**

The application for a permit shall be in writing and signed, and shall include the following:

- () a) the name and mailing address of the applicant and the owner of the land on which the well will be located.
- () b) if the applicant is other than the owner of the property, documentation establishing the applicable authority to construct and operate a well for the proposed use.
- () c) the 911 address of the well site or a map showing the well location.
- () d) a location map of all known existing wells within a one-quarter mile radius of the proposed well or the existing well to be modified.
- () e) a map from the county Appraisal District indicating the location of the proposed well or the existing well to be modified, the subject property, and adjacent owner's physical addresses and mailing addresses.
- () f) a statement of the nature and purpose of the proposed use and the amount of water to be used for each purpose.
- () g) a declaration that the applicant will comply with the District's Rules and all groundwater use permits and plans promulgated pursuant to the District's Rules.
- () h) a water conservation plan or a declaration that the applicant will comply with the Management Plan.
- () i) the location of each well and the estimated rate at which water will be withdrawn.
- () j) a water well closure plan or a declaration that the applicant will comply with all District well plugging and capping guidelines.

Note: Requests to drill a well with a daily maximum capacity of more than 2 million gallons and requests to drill, modify, increase production or production capacity of a Public Water Supply, Municipal, Commercial, Industrial, Agricultural or Irrigation well with an outside casing diameter greater than 10 inches require additional information as required by District Rules.

() k) Permit fees paid to District

() **Administratively Complete**

() l) Please attach a general map of the well location from a major highway.