



Lower Trinity Groundwater Conservation District
 P.O. Box 1879 - 602 E. Church St. - Livingston TX 77351
 (pho) 936-327-9531 (fax) 936-327-9532
 www.LTGCD.org

Application for: Water Well Exception to Spacing Request
 Pursuant to Lower Trinity Groundwater Conservation District Rule 8 - Exception to Spacing Rule

| Do Not Write in The Area Below | | | |
|--------------------------------|------------|---------------|-------------|
| Date Received | Event Code | Date Approved | Received By |
| | | | |

Please write legibly and Print using black ink

| | | | | | | |
|---|------|---------------|-------|----------|----------------|-----------|
| Licensee Name | Last | | First | | Middle Initial | |
| License Number | | Address | | | | |
| City | | State | | Zip code | | Phone () |
| Email address | | | | | | |
| Well Owner's Name | Last | | First | | Middle Initial | |
| Address | | City | | State | | Zip code |
| Phone () | | Email address | | | | |
| <small>The District will add your address to the Well Driller/Pump Installer email notification list. Your email address is confidential pursuant to the Texas Public Information Act and will not be shared with the Public.</small> | | | | | | |
| Reason Exception is Requested: (attach additional pages or information if needed) | | | | | | |
| | | | | | | |
| | | | | | | |
| Borehole Size: _____ Well Casing Size: _____ Well depth: _____ Cementing Method: _____ | | | | | | |
| Surface Casing: _____ Screen Depth: _____ Production Zone: _____ Static Water Level: _____ | | | | | | |
| Property Line: _____ ft Distance to source of Contamination: _____ Septic Tank: _____ ft Field Lines: _____ ft | | | | | | |
| Plugging Material: _____ Type of Contamination: _____ | | | | | | |

Diagram of construction or plugging

Diagram of site and distances

 REQUESTOR
 Signature of Driller or person submitting request

 DATE

This form must be signed and dated