

# Real Edwards Conservation and Reclamation District

PO Box 350, Barksdale, TX 78828

Phone/fax (830) 234-3158

www.recrd.org

## WELL REGISTRATION / APPLICATION FORM

(Use for application for new wells, or modification or replacement of existing wells)

**Note: This form must be filed with the District at least five (5) business days before the drilling, equipping, or completing of any well, or the substantial alteration of the size of any well or well pump within the District.** District staff will review the registration and make preliminary determination as to whether the well meets the exclusions / exceptions provided in District Rule 5. If the preliminary rule is that the well is excluded / exempt, the registrant may begin drilling or modification immediately upon receiving the approved registration. If the preliminary determination of the District is that the well is not excluded / exempt, then the registrant must file an application for an Operating Permit from the District before the well may be drilled, altered, or modified.

**Fee & Deposit:** This form must be returned to the District with a non refundable filing fee of \$50.00 and a deposit of \$50.00 (check, cashiers check or money order) The Deposit will be returned to the well payee if; (1) This application is denied, (2) the application is granted and upon receipt by the District of the correctly completed drillers log of the well within six (6) months after the date of this application, or (3) the proposed well location is abandon, without being drilled or results in a dry hole upon return and surrender to the District of this application marked "Abandon" by the Applicant within six (6) months after the date of this application. If neither the driller's log of the well or this application marked "Abandoned" is returned to the District within six (6) months after the date of this application, the deposit becomes the property of the District.

### WELL INFORMATION

1. Applicant Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_ Phone #: \_\_\_\_\_
2. Proposed well size: Casing: \_\_\_\_\_ Pump Size (hp) \_\_\_\_\_ Maximum yield \_\_\_\_\_ g.p.m. ( \_\_\_ Estimated \_\_\_ Metered)  
Proposed Use: (Please check one) \_\_\_ Domestic/Household \_\_\_ Livestock \_\_\_ Other \_\_\_\_\_
3. Driller: : \_\_\_\_\_ Address: \_\_\_\_\_  
City \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_ Phone #: \_\_\_\_\_
4. Anticipated Drilling, Alteration or Modification Date: \_\_\_\_\_
5. Location:  
Edwards County \_\_\_\_\_ Real County \_\_\_\_\_ approximately \_\_\_\_\_ miles from \_\_\_\_\_  
(town) on County Rd or H.W.. \_\_\_\_\_ :  
Section \_\_\_\_\_ Block \_\_\_\_\_ and Survey \_\_\_\_\_  
If Subdivision: Tract/Lot # \_\_\_\_\_ of \_\_\_\_\_ Subdivision;  
GPS Coordinates if Available: Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
*(Attach complete driving directions to location from nearest town or major highway intersection)*
6. Size of tract of land owned by Applicant on which the well will be drilled, modified, or altered \_\_\_\_\_ acres  
Distance from well site to nearest property line of adjoining landowner: \_\_\_\_\_ feet  
Distance from well site to nearest septic tank absorption field; out-door privy or other potential contamination source \_\_\_\_\_ feet.

I hereby certify that I am the Applicant for the above-described well, that I have read the foregoing statements, and that to the best of my knowledge and belief, all data therein contained are true and correct and complies with all District Rules. I further certify that, if approved and if this is to be a new well it will be drilled within ten (10) yards of the location specified in this application and that I or my agent will furnish to the District a copy of the completed well log immediately upon completion of the well and before the production of water from the well.

Signature: \_\_\_\_\_ OWNER AGENT

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

### District Verification

I certify that this Registration has been verified and is in compliance with the Rules of the District

Signature: \_\_\_\_\_ Title \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Revised Feb 2007