

MIDDLE PECOS GROUNDWATER CONSERVATION DISTRICT

P. O. Box 1644 Fort Stockton, Texas 79735 – Phone (432)336-0698
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Registration Form For An Existing Well

Pursuant to the District's rules, it is a violation of these rules for any person to drill or operate a well without registering the well with the District, receiving a certificate of registration from the District, and receiving a permit from the District, if applicable.

INSTRUCTIONS: Complete all questions. Please print or type. An incomplete application is grounds for refusal. This form can be faxed or mailed. If you are applying for a permit, this registration form must be attached to your application.

EXEMPT WELL STATUS: ___ Please check here if you believe your proposed well meets the exemption criteria in the District's rules, and state the basis for your exemption: _____

Registrant: _____ Phone () _____

Mailing Address: _____ Physical Address: _____

E-Mail Address: _____ Fax Number _____

IF Registrant is not the Land Owner, provide the following:

Land Owner: _____ Phone () _____

Mailing Address: _____ Physical Address: _____

E-Mail Address: _____ Fax Number _____

Attach a copy of documentation establishing authority of Registrant to construct and operate a well on Land Owner's property (deed, lease, contract, etc.)

Well Location; Latitude _____ Longitude _____ Elevation _____ Feet above Mean Sea Level

Landowner Well Name _____ **Middle Pecos GCD#** _____ (Office will complete)

WELL USE:

___ Domestic, ___ Livestock, ___ Irrigation, ___ Public Supply, ___ Industrial, ___ Other/Specify _____

State any subsequent additional purpose of use for the well and approximate period of time for that use:

Domestic _____; Livestock _____; Irrigation _____; Public Supply _____;
Industrial _____; Other/Specify _____

State the amount of water for each purpose: _____ Domestic, _____ Livestock,
_____ Irrigation, _____ Public Supply, _____ Other/Specify _____

Aquifer(s): _____

Estimated rate of withdraws: _____

Maximum amount of withdrawal in a 24-hour period as equipped : _____

Method of withdrawal: _____

Location of proposed use: _____

WELL COMPLETION: Well Depth _____
State Well Number: _____ Date Drilled _____ Driller: _____

Casing and Screen Surface Completion: _____ Concrete Slab, width _____, length _____, height _____
Diameter (inches) From (ft.) To (ft.) Steel Sleeve _____ or Other _____
Cementing Method used _____
Cemented by _____

WELL EQUIPMENT No. of Sacks From (ft.) To (ft.)
Type of Pump: _____ Turbine, _____ Submersible, _____ Windmill _____
_____ Other _____
Pump size: _____ Fuel Power: _____ Electric, _____ Diesel, _____ Other _____
Horsepower _____ Yield: _____ gpm _____ Measured _____ Estimated Date: _____

WELL TESTS: Has a chemical analysis been performed? _____ Yes _____ No Date: _____

By: _____
Performance Test: Date _____ Type of Test: _____ Pump, _____ Bailer, _____ Jetted, _____ Other _____
Yield: _____ gpm. Static Level: _____ ft. Pumping Level: _____ ft.

Attach driller's log and other available information, such as any mechanical log made or chemical analysis performed.

I agree to abide by the rules of the District, the District Management Plan, and orders of the District's Board of Directors. I hereby certify that the water withdrawn from this well will be put to a beneficial, non-wasteful use at all times, that I have either attached a well closure plan or I will comply with well plugging guidelines and report closure of this well to the District, and that each and all of the statements herein are true to the best of my knowledge and belief.

Signature of Registrant

Date

For District Use Only:

Date Received: _____
District Well # _____
State Well # _____