

IRION COUNTY WATER CONSERVATION DISTRICT
APPLICATION FOR A NON-EXEMPT WELL PERMIT

(A separate application is required for each well or renewal. Permit term is five (5) years.)

Well #: _____
Approval Date: _____
Renewal Date: _____

Please Print or Type

Applicant/Landowner: _____

Mailing Address: _____ City _____ ST ____ Zip _____

Phone: _____ Fax: _____ E-Mail: _____

Operator/Lessee: _____

Mailing Address: _____ City _____ ST ____ Zip _____

Phone: _____ Fax: _____ E-Mail: _____

Type of Application: New ___ Amendment: ___ Renewal With ___ Without ___ Changes

Well Location: County _____ Lat: _____ Long: _____

or if Lat/Long not known

Survey _____ Section _____

Abstract _____ Block _____ Lot _____ Tract _____

Located _____ feet from the _____ property line and _____ from the _____ property line

Acreage (contiguous) or lot size _____

Well Use: ___ Domestic/Livestock ___ Irrigation ___ Public Water Supply ___ Industrial ___ Injection
___ Other (specify) _____

Location of Use: ___ On Site (applicant's contiguous acreage) ___ Within the District ___ Export out of District

Well Information: Drill Date _____ Driller _____

Total Depth _____ feet; Static Level _____ feet; Drawdown _____ feet

Casing Size _____ inches; Pump Type _____ Pump Horsepower _____

Aquifer _____

Existing Production: _____ gallons per day _____ acre-feet per year

Maximum Production: _____ gallons per day _____ acre-feet per year

Export Production: _____ gallons per day _____ acre-feet per year

Production Reports Required

Attachments/Documentation:

- a. Plat or map showing location (in feet) of all wells within a one (1) mile radius and names, addresses and phone numbers of owner/operator/lessee.
- b. Detailed statement of proposed location of use, if greater than one half (1/2) mile from well, and type of transportation facilities.
- c. Statement of anticipated growth in water demands and alternative water sources being used.
- d. Water conservation and drought contingency plans, if required by law.
- e. Additional information that may be required in Rule 3.204(c):
 - 1. Hydrogeological report
 - 2. Identification of other possible sources
 - 3. Mitigation plan for adverse impact on other groundwater users.
 - 4. Mitigation plan for adverse impact from leakage of undesirable water.
 - 5. Description of how withdrawal is addressed in the approved regional water plan.

Affirmation: I, the undersigned, agree and certify that:

- a. I will avoid waste, achieve water conservation, protect groundwater quality and the groundwater produced from this well will be for a beneficial use;
- b. I will comply with all District and State well plugging and capping guidelines in effect at the time of well closure;
- c. I will abide by the terms of the District Rules, the District Management Plan and orders of the District Board of Directors currently in effect and as they may be modified, changed and amended from time to time;
- d. I will abide by the terms and conditions of this permit;
- e. I am the applicant or am authorized to act for the well owner; and
- f. I agree that all statements and information submitted is, to the best of my knowledge, true, accurate, and complete.

Signature of Applicant: _____ Date: _____

Printed Name: _____

NOTARY PUBLIC'S CERTIFICATE

Subscribed and sworn to before me, by the said _____, this _____ day of _____, 20____, to certify which witness my hand and seal of office.

Seal

Notary Public Signature

Notary Public Printed Name

Please mail or deliver completed form and required attachments/documentation to:

Irion County Water Conservation District
P.O. Box 10
Mertzon, TX 76941
Phone: (325) 835-2015
Fax: (325) 835-2366
E-mail: icwcd@verizon.net

Physical Address
208 N Parkview
Irion County Courthouse Annex
Mertzon, TX 76941

FOR DISTRICT USE ONLY

Date Received: _____ Approval Date: _____

Date Administratively Complete: _____ Renewal Date: _____

Well # _____

___ Form complete, signed, notarized

Attachments/Documents

- ___ Plot adjacent wells ___ Statement of use ___ Statement of growth
- ___ Water Conservation Plan ___ Drought Contingence Plan
- ___ Hydrogeological report ___ Other sources ___ Mitigation plan other wells
- ___ Mitigation plan on leakage ___ Addressed in Regional Plan

- ___ Renewal with changes
- ___ Renewal without changes

I, hereby, certify that this application has been verified and is in compliance with District Rules.

General Manager

Date

___ Hearing required

Hearing Date: _____ Date Posted: _____

Permit approved ___ Denied ___

Special Conditions: _____

I, hereby, certify that board action was taken at after proper notice and hearing in accordance with District Rules and TWC, Chapter 36.

Presiding Officer

Date