

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](mailto: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

- |                                                     |                                                     |                                                      |
|-----------------------------------------------------|-----------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Plot adjacent wells        | <input type="checkbox"/> Statement of use           | <input type="checkbox"/> Statement of growth         |
| <input type="checkbox"/> Water Conservation Plan    | <input type="checkbox"/> Drought Contingence Plan   |                                                      |
| <input type="checkbox"/> Hydrogeological report     | <input type="checkbox"/> Other sources              | <input type="checkbox"/> Mitigation plan other wells |
| <input type="checkbox"/> Mitigation plan on leakage | <input type="checkbox"/> 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