



# LOWER TRINITY GROUNDWATER CONSERVATION DISTRICT

602 E. Church St. #150  
Livingston, TX 77351  
Office: (936) 327-9531  
Website: WaterWells.Info  
Email: LTGCDistrict@gmail.com

## Residential Well Registration Form For 2022 Operating Year

This form is to be used only for **Residential** wells using less than 25,000 gallons of water per day and an outside casing diameter of 4 inches or less and **Residential Agriculture** wells using less than 100,000 gallons of water per day.

**This registration form must be complete and submitted to the District by Email prior to drilling.**

Anticipated Drill Date: \_\_\_\_\_

Purpose for Water Use (*please check one*)

Single Family Home     Agricultural     Property Pond

### **1. Well Owner Information:**

Name of Property Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

### **2. Well Location:**

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

GPS Coordinates (required): Latitude: N: \_\_\_\_\_ Longitude: W: \_\_\_\_\_

### **3. Well Specifications:**

New Well     Replacement Well (*If so, indicate status of old well*): \_\_\_\_\_

Casing Size: \_\_\_\_\_ Pump Size: \_\_\_\_\_ GPM: \_\_\_\_\_ Depth of Well: \_\_\_\_\_

### **4. Well Driller Information:**

Name of Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ E-mail: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name of Licensed Driller: \_\_\_\_\_ License #: \_\_\_\_\_

By submitting this form, the driller declares that they meet with all the State and District's current rules and well construction standards and agrees to abide by them. By submitting this form, the well owner understands that this allows LTGCD to enter the property to inspect the well. By submitting this form, both the driller and the property owner affirm that the well penetration site meets the spacing requirements set by the District and the Texas Department of Licensing and Regulation, (TDLR) and you hereby certify that you have furnished the above information and to the best of your knowledge and belief, all data herein contained are true and correct.

Well Driller Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_

Date: \_\_\_\_\_

Registration Permit # \_\_\_\_\_