



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 2024 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 # _____