



Lone Star Groundwater Conservation District

PO Box 2467

Conroe, Texas 77305

Phone: (936) 494-3436 Metro: (936) 441-3437 Fax: (936) 494-3438

Email: lsgcd@consolidated.net Web Site: www.lonestargcd.org

District to Complete

Permit No.

Well Registration No.

**APPLICATION FOR OPERATING PERMIT
- EXISTING WELL(S) -**

Instructions: Complete form, type or print, **submit along with an application fee of \$100 X ID (Minimum of \$300.00) of the casing to the above address plus \$35.00 publication fee.** Additional information or explanations may be attached. An Application for Existing Well Registration must be submitted prior to, or with this application.

Date of Application: _____

-This form may be faxed or mailed-

GENERAL

Well Owner: _____ Attention: _____

Only required if different then Well Registration Application.

Mailing address: _____

City: _____ State: _____ Zip: _____

Phone No.: _____ Fax No.: _____

WELL DATA

Number of wells to be permitted: _____

Amount of water requested per calendar year: _____ Gallons

<p>Well _____ (1, 2, etc.)</p> <p>Date well is anticipated to begin producing groundwater: _____</p> <p>Status of each well as of application date: (Mark <u>one</u> with X)</p> <p><input type="checkbox"/> Operating; Year drilled _____ <input type="checkbox"/> Being Drilled</p> <p><input type="checkbox"/> Completed but not being operated; Year drilled _____ <input type="checkbox"/> Awaiting permit to begin drilling</p>	<p>Well _____ (1, 2, etc.)</p> <p>Date well is anticipated to begin producing groundwater: _____</p> <p>Status of each well as of application date: (Mark <u>one</u> with X)</p> <p><input type="checkbox"/> Operating; Year drilled _____ <input type="checkbox"/> Being Drilled</p> <p><input type="checkbox"/> Completed but not being operated; Year drilled _____ <input type="checkbox"/> Awaiting permit to begin drilling</p>
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Well Owner: _____

Reason well(s) is (are) needed: _____

List subdivision(s) or service area well(s) will service: _____

Does applicant know of any water wells in this area not registered with the District? No Yes, if yes, explain _____

Is a public water system available in this area? Yes No Will the well(s) to be located with-in city limits? Yes No

Drought Contingency Plan attached or on file with District? Yes No If applicant is required by law to have a drought contingency plan; a copy must be attached to application.

CERTIFICATION:

Applicant agrees that water produced/withdrawn from the proposed well(s) will be put to beneficial use at all times.

Yes No

Applicant hereby agrees to comply with the District's Regulatory Plan. Yes No

Applicant hereby agrees to comply with the District's Management Plan. Yes No

Applicant hereby agrees to equip permitted well(s) with a flow measurement device as required under District Rule's Section 11. Note: Each applicant will be assessed a fee of \$125.00 for every meter verification inspection in addition to the initial visit. Yes No

Applicant and Owner understand that if submitted application is approved, the owner of the permit will be charged the District's current Fee Rate on an annualized basis. 2010 Fee: \$0.06 per 1,000 gallons of groundwater permitted (Ag: \$1.00 per acre foot on an annualized basis.) 2011 Fee: \$0.06 per 1,000 gallons of groundwater permitted (Ag: \$1.00 per acre foot on an annualized basis.) Note: In the event the total annual regulatory water use fee payment equals an amount less than \$10.00, the regulatory water use fee payment to be assessed to such a permit shall be the "Minimum Regulatory Water Use Fee" established as \$10.00 by the LSGCD Board of Directors. Yes No

I hereby certify that the information given herewith is true and accurate to the best of my knowledge and belief.

Print Name

Signature of Well Owner or Agent

Date

Please submit signed application along with applicable fees to P.O. Box 2467, Conroe, Texas 77305.

NOTICE:

Per District Rule 12.3, Permit Hearings must be posted for public notice ten days prior to date of the hearing. At such time the Board of Directors will take action for approval or denial of said permit. Meeting dates of all hearings are posted on the District's Web Site at www.lonestargcd.org or may be obtained by calling the District office at (936) 494-3436.

District to Complete

Permit No. _____

Aggregate Well No. _____

Qty of Wells in Aggregation: _____

