Lone Star Groundwater Conservation District

Amendment to Operating Permit Form (Non-Exempt)

655 Conroe Park North Dr.
Conroe, Texas 77303
Phone: (936) 494-3436
Email: permitting@lonestargcd.org
Web Site: www.lonestargcd.org

All non-exempt wells require a registration number and an Operating Permit. This form is to be used to change the permit conditions of an existing operating permit. (See Rule Section 2). **Please complete all questions, print and fill in the appropriate spaces before submission.**

If you are completing this form on behalf of the property owner, submittal of the Delegation of Signatory Authority and Documentation of Authority Form is required.

Replacement Wells: For registration of a new non-exempt well to replace an existing non-exempt well in accordance with District Rule 2.13, please fill out the Replacement Well Registration Form in lieu of this Amendment to Operating Permit Form.

I. Purpose For This Application (Select All That Apply and Complete the Relevant Sections)

Operating Permit Amendments require approval by Board of Directors.

☐ Add New well(s) to Operating Permit

☐ Allocation Increase

☐ Allocation Decrease (*Minor Permit Amendment - Does not require Board of Directors approval)*

☐ Alter an Existing Well (e.g., alter pump HP or GPM)

☐ Change Water Use Type (e.g., Agricultural Use to Public Water Supply)

☐ Other. Explain:

_____

Note: *Transfer of Ownership, Withdrawal of Permit, Spacing Exception, Replacement Well, Test Hole, and Emergency Permit Applications are found on District website.*

II. Property Owner Contact Information (Required for All Requests)

Property Owner/Permit Holder Name

Name_____
If Property Owner/Permit Holder Name does not match the existing Operating Permit, contact the District for additionally required form(s).

Email: _____ Phone: _____

_____
Mailing Address *(Suite/Unit # if applicable)* City State Zip

If the Operating Permit is in a company name, include individual contact information below.

Contact Name (if different from above):_____ Title: _____

Email:_____ Phone: _____

_____
Mailing Address (*Suite/Unit # if applicable*) City State Zip

If the Application Contact is different from Property Owner/Permit Holder, include individual contact information below.

Contact Name (if different from above):_____ Title: _____

Email:_____ Phone: _____

_____
Company Address (*Suite/Unit # if applicable*) City State Zip

III. Billing Contact Information

This contact will receive the Water Use Fee invoices. Water Use Fees are billed annually in perpetuity.

Contact Name (if different from above):_____

Title:_____

Email:_____

Phone:_____

_____
Company Address (*Suite/Unit # if applicable*) City State Zip

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IV. Non-Exempt Water Use (Required for All Requests)

Current Type of Non-Exemption claimed:

☐ Commercial (Water used for business purposes)

☐ Public Supply (Water supplied for human consumption for less than 15 connections)

☐ Public Water Supply (Water supplied for human consumption for more than or equal to 15 connections or 25 individuals at least 60 days out of the year)

☐ Irrigation (Water used for irrigation for agricultural, or livestock purposes, includes pond or lake fill capable of producing more than 25,000 gallons per day)

☐ Industrial (Water used for manufacturing, processing, material processing, or waste material processing)

☐ Other; please explain: _____

☐ Type of business: _____

V. Add New Well(s) to Operating Permit

Are you requesting to add new or existing well(s) with this "Amendment to Operating Permit Form"? ☐ Yes ☐ No

If "Yes", complete the remainder of the "Add New Well(s) to Operating Permit" Section.
If "No", skip to Section VI, "Demand Calculation Documentation".

Number of Well(s) to be Added on the Operating Permit: _____

Number of Previously Permitted Wells Listed on Operating Permit: _____

Total Number of Wells to be listed on the Operating Permit: _____
(New and Existing Well(s) in the same aquifer)

Existing Operating Permit number: _____
Note: A new well may not be added to a Historic Use Permit. Please see "Non-Exempt Well Registration for New Operating Permit Form".

Will the groundwater produced be transported out of Montgomery County? ☐ Yes ☐ No
If "Yes", contact the District for additional information required regarding transport and/or export.

VI. Demand Calculation Documentation

Number of Connections:

Column:	I	II	III	IV
Water Use Type	**Current Number of Active Connections**	**Anticipated Additional Connections Used for Calculating this Allocation Increase Request**	**If not included in Column II, Additional Connections Anticipated in the Next Five (5) Years**	**Total Anticipated Connections at Build-Out**
Commercial				
Single Family Residential				
Multi-Family Residential				
Irrigation				
Industrial				
Other				
		Total =		

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Are you requesting an adjustment to the permitted allocation with this "Amendment to Operating Permit Form"? ☐ Yes ☐ No
If "Yes", complete the remainder of the "Demand Calculation Documentation" Section.
If "No", skip to Section VII, "Alter an Existing Well".

Select the change of allocation requested: ☐ Increase ☐ Decrease

Current Permitted Amount: _____ *gallons/year*

Amount Requesting to Increase or Decrease By: _____ *gallons/year*

Annual Allocation Requested: _____ *gallons/year*

Note: If allocation is approved, Water Use Fees will be required in full for the current calendar year that approval is granted, regardless of drilling status or production. (e.g. if an allocation is approved in December of 2024, you must pay Water Use Fees for the full year of 2024.)

If allocation was previously approved by way of anticipated connections (whether approved for expectations for the following five (5) years or through to build-out), explain in detail what changed in demand and/or connection planning to require additional allocation needs at this time.:

_____

_____

_____

_____

_____

_____

Date of Last Allocation Increase for this Operating Permit: _____

Information on Other Permits and Water Wells:

Note: An **Operating Permit** includes a specific number of wells and water use allocation permitted within an individual District Aquifer, referred to as a **"Water Well System."** Identify all other Operating Permits and wells (often utilized in operational redundancy) that are connected or "tied in" to serve the Water Well System subject of this application.

Number of Operating Permits connected to this Water Well System: _____ Total Number of Wells connected to this Water Well System: _____

List Operating Permit Numbers, including aquifers:_____

_____

_____

_____

_____

_____

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Demand Calculations:

All applicants are required to provide a detailed description of how the requested annual water demand was calculated.

The entire water portfolio must be considered when providing demand calculation documentation (*e.g. surface water, reuse water).*

Below is a helpful tool to assist with demand calculation, not the required format.

Suggested Demand Documentation Format:

(Available resources to compare the averaged gallons per use type: EPA, TCEQ, TWDB, Texas AgriLife, Industry Standards)

- **Public Water Supply/Public Supply:**

Number of connections **(x)** *gallons/day per connection (with reasonably averaged gallons per use type)* **(=)** *Gallons/day for system*.
Gallons/day for system **(x)** 365 days **(=)** ***Annual Production Needed***

- **Commercial:**

Gallons/day used for type of business **(x)** 5 days *(business days)* **(x)** 52 weeks **(=) Annual Production Needed**

- **Irrigation:**

Inches of water applied/week **(x)** area irrigated in ft^2 **(x)** 32.41 *(conversion factor to gallons)* **(=) Annual Production Needed**

- **Systems with available alternative water supply sources:**

Annual Production Determined Above **(-)** *Alternative water availability (e.g. surface water, reuse water)* **= Total Groundwater System Needs**

- **Historical Use Based Calculations:**

(Attach supporting documents. E.g. meter readings, water bill(s), documented comparable industry standards)
Proven Average Monthly Use **(x)** *12 months* **= Annual Production Needed**

Report Demand Calculation Documentation Below: (Attach applicable supporting documentation to this submittal)

Demand Calculation Description:

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VII. Alter an Existing Well

Are you requesting to alter an Existing Non-Exempt Well with this Amendment to Operating Permit Form? ☐ Yes ☐ No

If "Yes", complete the remainder of the "Alter an Existing Well" Section;
Alter well form is also required
If "No", skip to Section VIII, "Change Water Use Type".

Well Registration Number(s): _____

Is this well tied to a Historic Use Permit? ☐ Yes ☐ No

If "Yes", contact the District for additional information regarding HUP conversion options.

Provide a detailed description of how the well will be altered including each characteristic that would be changed from existing Operating Permit conditions (e.g., changing HP of well from 50 to 100 HP, change in well screening interval). See hydrogeological requirements.

_____

_____

_____

VIII. Change Water Use Type

Are you requesting to change the permitted water use type with this Amendment to Operating Permit Form? ☐ Yes ☐ No

If "Yes", complete the remainder of the "Change Water Use Type" Section.
If "No", skip to Section IX, "Hydrogeological Report".

Select New Water Use Type:

- ☐ Commercial (Water used for business purposes)
- ☐ Public Supply (Water supplied for human consumption for less than 15 connections)
- ☐ Public Water Supply (Water supplied for human consumption for more than or equal to 15 connections or 25 individuals at least 60 days out of the year)
- ☐ Irrigation (Water used for irrigation for agricultural, or livestock purposes, includes pond or lake fill capable of producing more than 25,000 gallons per day)
- ☐ Industrial (Water used for manufacturing, processing, material processing, or waste material processing)
- ☐ Temporary Construction Supply Well
- ☐ Other; please explain: _____

IX. Hydrogeological Report Requirements

District Rules enforce Hydrogeological Report Requirements within the following scenarios. Initial below to confirm your understanding of each scenario and your confirmation that a Hydrogeological Report will be submitted when amending an existing Operating Permit, as applicable. If not, write N/A.

____ Requesting a well or well system capable of producing 700 GPM or more from the same District Aquifer.

____ Requesting to amend allocation for a well or well system capable of producing 700 GPM or more from the same District Aquifer.

____ Requesting an exemption from District Spacing Rule 3.2 *(less than 50ft from property boundary)*

____ Requesting an exemption from District Spacing Rule 3.3 *(Aquifer Spacing Rule)*

Hydrogeological report contact:

Name: _____ Phone: _____

Company: _____ Email: _____

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X. Spacing Requirements

The District has property line and well-to-well spacing rules. Initial below to confirm your understanding of the Spacing Requirements. If not, write N/A

____ Proposed well cannot be **less than** 50 feet from property boundary *(District Rule 3.2) (Exempt and Non-Exempt)*

____ Proposed well must comply with **aquifer spacing requirements** to existing wells *(District Rule 3.3) (Non-Exempt Only)*

New, non-exempt wells shall be spaced from all registered or permitted wells (all wells registered at time of form submittal) a minimum distance depending on the proposed aquifer the well is requesting to be screened.

Wells Screening Chicot/Evangline Aquifer: 2.0 feet multiplied by the Maximum Allowable Pumping Rate of the well

Wells Screening Jasper Aquifer: 1.5 feet multiplied by the Maximum Allowable Pumping Rate of the well

Wells Screening Catahoula Aquifer: 1.0 feet multiplied by the Maximum Allowable Pumping Rate of the well

____ Non-compliance with Spacing Requirements must go through the Spacing Exception Request Form submittal process and may require District Board of Director's approval.

XI. Application Fee

Fees per application type: (For the full Fee Schedule as approved by the Board of Directors, and Hydrogeological Guidelines see the District's website.)

Amendment to Existing Operating Permit (No Hydrogeologic Report Required)	$250.00 (per requested amendment)
Amendment to Existing Operating Permit (Hydrogeologic Report Required)	$500.00
Allocation Decrease	$150.00

XII. Required Documents

Please initial (or insert "N/A" for Not Applicable) that you have attached the below documents:

_____ Application Fee (Required)

_____ Delegation of Signatory Authority and Documentation of Authority Form

_____ Proof of Property Ownership (Required)

_____ Completed 'Non-Exempt Well Registration Form' for each well requested

_____ Supporting Documentation for Demand Calculation

_____ Map depicting the proposed well location detailed by latitude and longitude or by GPS coordinates, with the applicable spacing buffer(s) depicted (Required)

_____ Well pump performance testing data (as applicable) and contractor information for the pump

_____ Hydrogeological Report

_____ Spacing Exception Request Form

_____ Conservation Plan (applicable if you are required by TCEQ or TWDB to have a Conservation Plan) and information regarding requirements for smart irrigation, drought resistant landscaping, and rain harvesting barrels.

_____ Drought Contingency Plan (applicable if you are required by TCEQ or TWDB to have a Drought Contingency Plan)

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XIII. Acknowledgement

By signing this form, I understand, agree, and certify that:

A. This well shall be drilled by a TDLR licensed driller and/or apprentice within 30 feet of the location specified;
B. I will furnish the District with a copy of the completed driller's well report log within 60 days of completion of this well and prior to production of water. (other than such production as may be necessary to the drilling and testing of such well);
C. In using this well, I will avoid waste, achieve water conservation, protect groundwater quality and the water produced will be for a beneficial use;
D. I will comply with all District and State well plugging and capping guidelines in effect at the time of well closure;
E. 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;
F. Applicant understands and agrees that all non-exempt wells are required to equip permitted well(s) with a flow measurement device as required under District Rule's Section 11
G. Applicant understands and agrees that if submitted application is approved, the owner of the permit will be charged the District's current Fee Rate for the year it is calendar year it is approved and on the annualized basis in perpetuity. For example, a permit approved in December will be charged for the full calendar year Water Use Fee, irrespective of drilling or usage.
H. Applicant understands and agrees that, 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.
I. I agree that if the well is located in a flood prone area, well owner will comply with Administrative Rules of the TDLR 16, Texas Administrative Code, Chapter 76 Rule 76.1000;
J. I agree to follow well spacing requirements in District Rules 3.2-3.3 and Administrative Rules of the TDLR 16, Texas Administrative Code, Chapter 76 Rule 76.1000;
K. Upon sale of the property, I agree to notify the buyer that a Transfer of Ownership is required by the District.
L. I hereby certify that the information given here in is true and accurate to the best of my knowledge and belief.
M. I acknowledge the application fees are due at the time of submittal of application and are nonrefundable regardless of application status, including but not limited to, approvals, expirations, withdrawals, or other.

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

_____ _____ ____/____/_____

Applicant Signature Print Name Date

District to Complete

_____ _____

Sarah Kouba **Well Registration No.**

General Manager
Lone Star Groundwater Conservation District

_____

Date Approved