

Application for Well Plugging or Capping

Application Fee - \$250

1124 Regal Row ~ Austin, TX 78748 ~ 512-282-8441 ~

Complete this application for authorization to plug or cap a well in the District.

Select one of the Following:

Section I. Contact Information

Well Owner /Applicant:	Email:		
Mailing Address:	City:	Zip:	County:
Primary Phone: Secondary Phone:			
Please check the box that appropriately describes the app	licant: 🗆 Land Ow	ner/Grantor 🗆 Le	ssee/Grantee
Property lot size:acres			
Check this box if the physical address is the same as the mailing add			
Physical Well Address:	City:	Zip:	County:
Well Contractor	Alternate Point of Contact (Well Site Access)		
Contractor Company:	Contact N	ame :	
Driller Name :	Mailing Ad	ddress:	
Mailing Address:	City:		, Texas Zip:
City:, Texas Zip:	Primary Pl	hone:	
Primary Phone:	Secondary	/ Phone:	
Email:			

Section II. Supporting Ownership Documentation

- 1. Provide a complete copy of the recorded deed, showing current ownership, legal description, and a date recorded. If the applicant is a lessee/grantee then provide a copy of the recorded easement, lease, or memorandum of lease.
- 2. Provide a certified copy of the most recent property survey. If a subdivision plat is applicable, please also provide a recorded copy of the subdivision plat.
- 3. Provide a map of the property or site plan showing the location of the existing well.

Section III. Well Information

- 1. Indicate the total number of existing wells on the entire property, in use _____, not in use _____.
- 2. Aquifer of well to be Plugged:
 Upper Trinity
 Middle Trinity
 Lower Trinity
 Fresh Edwards
 Other
- 3. Well Coordinates (http://www.latlong.net/) Latitude: ______ Longitude: ______
- 4. Casing Type:_____ Casing diameter:_____Casing depth:_____Water Level:_____ Total Depth:_____

Section IV. Plugging Schematic or Capping Method

Prior to the District Staff granting approval to plug the well, <u>a well video log is required to assess the condition of the well, the</u> <u>casing depth, and total well depth. A plugging schematic is then submitted by a licensed well driller and should include:</u> Total Depth, Casing Depth, Casing size, Borehole size, Water Level, grout volumes, Washed Gravel depth level, and perforation depths.

Prior to the District Staff granting approval to cap the well, <u>a capping diagram should be developed by a licensed well driller and should include:</u> *a description of the capping method, and other pertinent information such as Total Depth, Casing Depth, Casing size, Borehole size, Water Level if known.*

Section V. Declarations

Initial to indicate that the applicant has read and understands the following declarations.

- The applicant understands that failure to submit all required application items within the application review period will result in an administratively incomplete application and non-issuance of a permit.
- ____The applicant will comply with well plugging and capping guidelines set forth in these Rules and will report well closures as required in Rule 3-5.
- ____ Within 180 days of the approved authorization, an abandoned well must be plugged in accordance with 16 TAC §76.1004, the District's Rules, and plugging specifications. The plugging must be performed by a licensed driller

Section VI. Applicant or Authorized Agent Sworn Statement

I hereby make application to the Barton Springs/Edwards Aquifer Conservation District for the purpose indicated above for the water well described herein, and I certify that I am the property owner/grantor or lessee/grantee or an Authorized Agent, and that each and all the statements herein are true and correct, and that I will comply with District Rules, Well Construction Standards, and groundwater use permit and plan requirements. I hereby authorize the District access to this property following reasonable advance notice or, in an emergency, immediately, with such emergency access reported to the owner if advance notice was not possible. The District may access the well for the purposes of inspecting, collecting water quality samples, and investigating conditions relating to the withdrawal, waste, water quality, pollution or contamination of groundwater.

Signature of Applicant or Authorized Agent* (*Notarized Agent Authorization Form Required)	Print Name	Date
State of Texas, County of theday of20	SWORN TO AND SUBSCRIBED before me by the said owner or agent on the said owner or agent owner	
Notary Public, State of Texas	My comm	nission expires

For District Personnel Use Only

Submitted/ Staff Initials	\$250 Application Fee Chk #:	
Submitted// Staff Initials	Application Form	
Submitted// Staff Initials	Plugging Schematic	Approved on
Application Administratively Complete on :	Incomplete on :	

	·
Signature of Completion (District Staff)	Date:
Board / General Manager Approval:	Date: