

# **Application for Test Well Drilling**

Application Fee - \$300

1124 Regal Row ~ Austin, TX 78748 ~ 512-282-8441 ~ www.bseacd.org

Complete this application for authorization to drill a new Test Well and complete the first aquifer pump test.

(To conduct additional aquifer pump tests from this well, an additional application must be submitted separately.)

### Section I. Contact Information

Well Owner /Applicant:	Email:		
	_ City:, Texas Zip: County:		
Primary Phone: Alt Phone:			
Please check the box that appropriately describes the applican	nt:   Land Owner/Grantor   Lessee/Grantee		
Property lot size:acres			
☐ Check this box if the physical address is the same as the mailing address.			
Physical Well Address:	_City:County:		
Technical Consultant	Alternate Point of Contact (Well Site access)		
	,		
This is the person who may be employed by the applicant to	Contact Name :		
complete this application on the applicant's behalf.	Mailing Address:		
	City:, Texas Zip:		
Consultant Name :			
Mailing Address:	Secondary Phone:		
City:, Texas Zip:	Email:		
Primary Phone:			
Secondary Phone:			
Email:			
<ul><li>applicant is a lessee/grantee then provide a copy of the</li><li>2. Provide a certified copy of the most recent property surecorded copy of the subdivision plat.</li><li>3. Provide a map of the property or site plan showing: the</li></ul>	ng current ownership, legal description, and a date recorded. If the ne recorded easement, lease, or memorandum of lease. urvey. If a subdivision plat is applicable, please also provide a ne location of the existing or proposed well, the locations of the cic tank (150ft setback), the nearest septic absorption field or ential sources of contamination (150ft setback).		
Section III. Water Use Types Select ALL the anticipated future use types that will be supplied	ed by the requested groundwater production from this well.		
☐ Irrigation:	☐ Industrial:		
☐ Agricultural Irrigation	☐ Operational Processes/Facilities		
☐ Residential Irrigation (outdoor use only)	□ Facility Landscape		
☐ Golf Course Irrigation	☐ Commercial:		
□ Sports & Athletic Field Irrigation	□ Operational Processes/Facilities		
□ Nursery/Greenhouse Irrigation	☐ Facility Landscape		
☐ General Irrigation	☐ Aquifer Storage and Recovery		
☐ Public Water Supply (Wholesale, Retail, Municipal, WSC, IOU)	☐ Commercial Livestock		
	☐ Other		

## Section IV. Well Information

- 1. Indicate the number of existing wells on the entire property, in use \_\_\_\_\_, not in use \_\_\_\_\_
- 2. Proposed aquifer for new well: □ Upper Trinity □ Middle Trinity □ Lower Trinity □ Fresh Edwards □ Other

- 3. Will the groundwater withdrawn from this well be used in a location different from the well site? ☐ Yes or ☐ No
- 4. Is this a replacement well? ☐ Yes ☐ No If yes, what will the status of the old well be? ☐ in use ☐ capped ☐ plugged
- 5. Is the property within a CCN or is the area serviced by another water provider? □ No □ Yes Name\_\_\_\_\_\_
- 6. Will the well be located in a flood plain? ☐ Yes ☐ No
- 7. Will this well be placed in aggregate with an existing permitted well(s)? ☐ Yes ☐ No

Signature of Applicant or Authorized Agent* (*Notarized Agent Authorization Form Required)  State of Texas, County of	SWORN TO AND SUBSCRIB	ED before me by the said owner or agent on this	;
	Print Name	Date	
Section VI. Applicant or Authorized Agent Sw I hereby make application to the Barton Springs/E well described herein, and I certify that I am the p all the statements herein are true and correct, and groundwater use permit and plan requirements. I notice or, in an emergency, immediately, with suc District may access the well for the purposes of in the withdrawal, waste, water quality, pollution or	dwards Aquifer Conservation District property owner/grantor or lessee/grad d that I will comply with District Rule I hereby authorize the District access th emergency access reported to the aspecting, collecting water quality sar	antee or an Authorized Agent, and that each ares, Well Construction Standards, and to this property following reasonable advances owner if advance notice was not possible. The	nd e
This permit is applicable only for a Test WellA Test Well must be constructed to comply water zones of different chemical quality to	with State minimum standards and commingle. <b>The well must be pro</b>	shall not be open at the surface or allow	e a
Many of the incorporated cities within Travi	y with your city ordinances regardir	ces concerning the drilling of wells within the ng the drilling of wells. The permits issued by ght to violate any city ordinances regarding	
Rules.  The applicant will comply with well plugging required in Rule 3-5.	g and capping guidelines set forth	in these Rules and will report well closures	as
	-	permits promulgated pursuant to the Distr	rict
The applicant understands that failure to su	ıbmit all required application items	within the application review period will res	ult
The applicant agrees that water produced/v			
Initial to indicate that the applicant has readThe applicant agrees that water produced/v	_		

#### APPLICATION CHECKLIST

The following Items must be completed and submitted with your application form.

#### Item 1. Written Descriptive Statement

The applicant must provide a written detailed statement that addresses all of the following components. Please address all of the components below in one "type-written" statement in a word document format. The submitted word document should be signed and dated.

- a) Nature, Purpose & Location
  - Describe the nature and purpose of the various proposed uses including proposed uses by persons other than the well owner.
  - Describe the well location and the proposed receiving area from groundwater produced from the well
  - Describe Proposed Transfers or Transports Location and purpose of any water to be resold, leased, transferred or transported.
- b) Pumpage Volume
  - State the anticipated pumpage volume and pumping rate at which water is proposed to be withdrawn from each well.

#### Item 2. Aguifer Test Work Plan

A written descriptive aquifer test work plan should be submitted with the application form and must include the required information as specified in the District's guidance document, please refer to *Guidelines for Hydrogeologic Reports and Aquifer Tests*.

#### Item 3. Well Construction Design Schematic

You will need to submit a proposed well design schematic. The hydro geologist/driller can work closely with the District and should provide a well design schematic with specifications to include: the total depth, borehole diameter, casing diameter and depth, annular seal interval(s), annular sealing method, calculated grout volumes, surface completion specifications, and any other pertinent well construction information.

## Item 4. Additional information requested by District General Manager

The applicant may be asked to submit other facts, information and considerations deemed necessary by the General Manager for protection of the public health and welfare and conservation and management of natural resources in the District. If it is determined that additional information is needed, District staff will work with you in fulfilling this component of the application.

### For District Personnel Use Only

Submitted//_ Staff Initials	\$300 Application Fee Chk #:	or \$50 Application Fee Chk #:
Submitted//_ Staff Initials	Application Form:	
Submitted//_ Staff Initials	Sec IV. Well Construction Schematic	Approved on
Submitted//_ Staff Initials	Item 1. Written Descriptive Statement	Approved on
Submitted//_ Staff Initials	Item 2. Aquifer Test Work plan	Approved on
Submitted//_ Staff Initials	Item 3. Well Construction Design Schema	atic Approved on

Application Administratively Comple	te on :	Incomplete on :			
Authorized Pump Test Volume:		Aquifer :			
Signature of Completion (District Sta	ff)		Date:		
General Manager Approval:			Date:		
Well Drilled:	Permit Number:		Temp Well # or S\	WN:	