

## Well Registration

## Application Fee \$0

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

Complete this form to register your well and contact information with the District. Fill out an additional registration form if you are registering more than two wells.

Section	on I. Owner Contact Information		
Prope	rty/Well Owner:		Primary Phone:
Email:		_ Mailing Address:	
City:	, Texas Zip:	County:	
Secon	dary Contact Person:		Phone:
Email:			
Section	on II. Property Information		
1.	Physical Property Address (Well I	_ocation):	
	City:, Texas Z	ip:County:	Property lot size: acres
2.	Is there or will there be a septic s	ystem on site?	
3.	Is the property within a CCN or is If yes, provide the name of the lo	•	er water provider? □ No □ Yes
4.	Previous owner's name (if known	):	
5.	Indicate the total number of exist	ing wells on the entire pro	perty, in use, not in use
Section	on III. Primary Well Information		
	ALL the use types that are currently	v supplied by the <b>primary w</b>	vell.
		<del></del> · · ·	
			served:
☐ Unu	used - Capped, Plugged, Open		
	ner		
	wn, please provide the following inf		
			ell):
	Aquifer: ☐ Trinity ☐ Edwards ☐ Ot		
3.	Date well was drilled:	_ Well Driller:	Well Depth
			Well Capacity (GPM):
4.	Well Coordinates (http://www.la	tlong.net/) Latitude:	Longitude:

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5. Do you have a State Well Report or other records for this well that you can email or mail in? ☐ No ☐ Yes

Registration Submitted on:  Temp Well Number or SWN#	For District Personnel U	•	
Notarized Agent Authorization Form Requ		•	
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(*Notarized Agent Authorization Form Requ			
Signature of Applicant or Authorized Agent*	Print Name		
the withdrawal, waste, water quality, poll	ution or contamination of ground	dwater.	
District may access the well for the purpo	ses of inspecting, collecting water	er quality samples, and investigating conditions relatin	
_		strict access to this property following reasonable adv orted to the owner if advance notice was not possible	
all the statements herein are true and cor	rect, and that I will comply with	District Rules, Well Construction Standards, and	
		ation District for the purpose indicated above for the v or lessee/grantee or an Authorized Agent, and that eac	
Section V. Registrant or Authorized A			
		that you can email or mail in? □ No □ Yes	
4. Well Coordinates (http://www.	latlong.net/) Latitude:	Longitude:	
Dumana Cina (la amagna autom).	Mall Composity (CDM).		
<ol> <li>Aquifer: □ Trinity □ Edwards □ (</li> <li>Date well was drilled:</li> </ol>		Well Depth	
		<b>:</b>	
If known, please provide the following in		•	
Other			
☐ Unused - Capped, Plugged, Open			
☐ Landscape Irrigation Only			
☐ Landscape Irrigation Only		rved:	
☐ Landscape Irrigation Only	stock:oor use) - Number of homes se	vell. rved:	

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