

**HEADWATERS GROUNDWATER CONSERVATION DISTRICT
APPLICATION AND AUTHORIZATION TO DRILL A PERMITTED WELL IN
KERR COUNTY, TEXAS**

OFFICE LOCATION: 125 LEHMANN DR. STE. 102 KERRVILLE, TEXAS 78028.
PHONE (830) 896-4110 FAX (830) 257-3201 E-MAIL hgcd@hgcd.org WEBSITE www.hgcd.org

RETURN THIS APPLICATION TO HEADWATERS GCD WITH:

- A plat of the property the well is to be drilled on, stating the date the property was platted
- Kerr Central Appraisal District "R" number
- Name of the driller and pump installer and the GPS location of the well
- \$1,500 Fee will be accepted from the owner or their designated agent only(cash or check)

ALL OF THE FOLLOWING INFORMATION MUST BE COMPLETED BEFORE AUTHORIZATION TO DRILL WILL BE ISSUED, DRILLING MAY NOT BEGIN UNTIL THIS AUTHORIZATION IS ISSUED. YOU MUST USE A LICENSED DRILLER AND PUMP INSTALLER THAT IS REGISTERED IN KERR COUNTY.

OWNER AND PROPERTY INFORMATION

OWNER: _____
MAILING ADDRESS: _____
911 ADDRESS: _____
CITY _____ STATE _____ ZIP _____
PHONE: _____ FAX _____
CELL PHONE _____ E-MAIL _____
DIRECTIONS TO WELL SITE: _____

Kerr Central Appraisal District Reference Number (s) _____
GPS Location Lat. ___ deg. ___ min. ___ sec. Long. ___ deg. ___ min. ___ sec Elev _____
Tract Size (Number of Permit Acres) _____ (See table on back for well spacing distances from property lines, small acreages may not support large volume wells.)

APPLICATION FOR: NEW WELL ALTER EXISTING WELL

PROPOSED WELL USE: AGRICULTURAL PWS INDUSTRIAL/COMM.

ARE THERE ANY OTHER WELLS ON THE PROPERTY YES NO, IF YES
GIVE DISTANCE TO NEAREST WELL _____

IS PROPERTY SERVED BY A PUBLIC WATER SUPPLY SYSTEM YES NO
IF YES NAME PWS _____

In a subdivision that is served by a Public Water Supply System, additional wells may only be drilled by the public water supply system owner/operator that holds the CCN

WELL DRILLER: _____ DRILLER LICENSE # _____

PUMP INSTALLER: _____ PUMP INSTALLER LICENSE # _____

Pump Installer must submit a Certified Statement of Completion of how many gallons per minute the well pump is capable of producing.

*The acknowledgement affidavit on back must be signed by the owner of the property listed on this application.
The owner may designate on the back of this form an agent to act on his behalf.*

PERMITTED WELLS SHALL BE A MINIMUM DISTANCE FROM PROPERTY LINES AS DEFINED IN THE FOLLOWING TABLE:

Projected Pumping Capability of Proposed Well in Gallons per Minute	Minimum Distance From Property Line
17.36 gpm - 60 gpm	150 feet
61 gpm - 125 gpm	300 feet
126 gpm - 250 gpm	750 feet
251 gpm - 500 gpm	1200 feet
501 gpm - 1500 gpm	1500 feet

PERMITTED WELLS CEMENTED WITH POSITIVE DISPLACEMENT TECHNIQUE TO 100 FT DEEP WITH A 3" ANNULAR SPACE MAY BE DRILLED WITHIN 50 FT. OF A SEPTIC TANK OR WASTE DISPOSAL AREA, PUBLIC WATER SUPPLY WELLS NEED A 150 FT. RADIUS SANITARY CONTROL EASEMENT

ENVIRONMENTAL and SETBACK INFORMATION

DISTANCE TO NEAREST PROPERTY LINE _____, (Must be 75 Feet)
 DISTANCE TO SEPTIC TANK AND DISPOSAL AREA _____ (Edwards Well 100 ft. Trinity Well 50 ft)
 IS THE WELL IN A FLOOD ZONE _____ DISTANCE TO RIVER, LAKE, OR STREAM _____
 DISTANCE TO ANY OTHER SOURCE OF CONTAMINATION _____
 MINIMUM HORIZONTAL DISTANCE OF ONE HUNDRED FIFTY (150) FEET FROM ANY CONCENTRATED SOURCES OF PONTENTIAL CONTAMINATION SUCH AS, BUT NOT LIMITED TO, EXISTING OR PROPOSED LIVESTOCK OR POULTRY YARDS, CEMETERIES, PESTICIDE MIXING/LOADING FACILITIES, AND PRIVIES.

ACKNOWLEDGEMENT AFFIDAVIT: Please Print and Sign

I, _____, owner of the well on this property, having completed this application, acknowledge that all the statements contained herein are true and correct to the best of my knowledge. I agree to abide by all Headwaters GCD District Rules now or hereafter adopted by the District. I agree to provide all Required Documents. I agree to be responsible for collecting and paying for a water quality analysis of water from the well after it is equipped to pump water and submit a copy of the analysis to the District. I authorize employees of Headwaters GCD access to the well site for purposes of inspection at any reasonable time.

Owner Signature _____

Designation of Agent

I, _____, the owner of the property stated on this application, designate _____, as my agent for the purpose of completing this application and all matters concerning the drilling and equipping of my water well. I understand and acknowledge that I am legally bound my agent's actions and that said agent must abide by the acknowledgement statement above signed by me.

Owner Signature _____

Sworn and subscribed before me this _____ day of _____, _____

 Notary Public

Authorization and Receipt

Assigned HGCD well # _____ Date _____
 Received from _____
 Cash Check Check # _____ Amount _____ Receipt # _____
 Authorization to Drill Well and Equip Well for _____ Gallons Per Minute
 Issued by _____

Not Valid
 Without
 Seal
 Affixed