APPLICATION

(Drill, Equip, Complete, Register, or Alter the Size of a Well) MENARD COUNTY UNDERGROUND WATER DISTRICT

All proposed well locations must be approved by the District prior to drilling. This notice of intent to drill maybe mailed or emailed to district staff for review. Drilling may begin immediately upon receiving the signed Certificate to Proceed with Drilling by District Staff. The drilling of a new well is at your own risk and subject to the rules of the District.

INSTRUCTIONS: Please complete all applicable questions. Please type or print.

CONTACT INFORMATION:

Property Owner:		Phone:				
Property Name According to M	lenard CAD:					
Mailing Address:						
E-mail:						
Property Address (if different):						
Number of Contiguous Acres:				r Wells in the District:		
CAD Property ID:	_Survey:Abstra		ct:			
Block:	Lot:		_Tract:			
PURPOSE FOR APPLICAT	ION					
New well						
Register Existing Well						
Alter Existing/ Replacem	ent well; briefly exp	lain:				
If a replacement well, what will	be the status of th	e old well?	_Capped	Plugged	In Use	
DRILLING INFORMATION:						
Drilling Company:			C	ontact:		
E-mail:		Phone:		License #:		
Proposed GPM:	Total Annual V	Vater Use Requ	ested:	ac/ft/year	Depth:ft	
Type of Pump:Submersib	leTurbine	eW	indmill	Other:		
Size of Pump:	Horsepowe	er:	Cas	ing Diameter:		
Well Use:Domestic	Livestock	Irrigation	Public	Water Supply	Industrial	
Oil/Gas Expl	oration	Other:				
Latitude:	N	Longitude	e:		W	
Directions to Well:						
I declare that all groundwater withdra Rule	awn will be put to bene es of the Menard Count			abide by the Mar	nagement Plan and the	
Applicant Signature				Date		
Return this completed form to:						
Tel: (325)396-3670	D <i>(</i>) Box 1215	man	ader@menardo	countyuwd ora	

APPLICATION – NON-EXEMPT WELL (Drill, Equip, Complete, or Alter the Size of a Well) MENARD COUNTY WATER DISTRICT

An application shall be considered filed if it is administratively complete, accompanied by the required application fee, and all outstanding liens and fees owed to the District by the Applicant from any other well or permit owned by the Applicant in the District's jurisdiction. An administratively complete application consists of a completed and signed application on the District's form and all required supporting documents, maps, surveys, or studies required by the District to evaluate the application. The drilling of a new well is at your own risk and subject to the rules of the District.

INSTRUCTIONS: Please type or print. A separate application is required for each well or renewal. Permit term is five (5) years WELL LOCATION INFORMATION:

Feet from Property Line:	Nearest Existing Well:	Elevation:				
Location of Use:On Site (applicant's	contiguous acreage)	_Within the District	Export out of District			
WELL PRODUCTION INFORMATION:						
Drill Date Requested:						
Number of Acres to be irrigated by prop	osed well:	-				
Requested Production:	_ gallons per day -OR		acre-feet per year			
Requested Production to be Exported: _	gallons pe	r day	acre-feet per year			
ATTACHMENTS/DOCUMENTATION:	(all or some of the follow	wing may be requi	red)			
 Property Information including deed or lease for groundwater and map or survey Information regarding any liens or unpaid fees owed to the District Plat or map showing location of all wells within 1 mile radius with names, addresses, and phone numbers of owners/operators Pump test results / step draw down test results Information that includes a hydrogeological study that shows current water availability and the projected effects of the proposed pumping on aquifer conditions, depletion, and other groundwater users in the District Information showing the availability of water in the District during the period for which the water supply is requested, and any additional water supply that were not chosen and why. Statement of anticipated growth in water demands and alternative water sources being used. Information showing that the project is consistent with the approved Regional Water Plan and approved District Management Plan, including the desired future conditions. A water well closure plan or a declaration that the applicant will comply with the well plugging guidelines and report closure to the Texas Department of Licensing and Regulation. 						
 I declare that I will abide by the Management Plan, orders of the District Board of Directors, and the Rules of the Menard County UWD I will avoid waste, achieve water conservation, protect groundwater quality and the groundwater produced from this well will be for a beneficial use; I will comply with all District and State well plugging and capping guidelines in effect at the time of well closure; I will abide by the terms and conditions of this permit; I am the applicant or I am authorized to act for the well owner; and I agree that all statements and information submitted is, to the best of my knowledge, true, accurate, and complete. 						
THE STATE OF TEXAS COUNTY OF This instrument was acknowledged before n	ne on thisday of	_, 20 by	Applicant Signature (applicant)			
Return this completed form to:			Notary Signature			
Tel (325)396-3670	PO Box 1215 Menard, Texas 7685	i9 manage	Meredith E. Allen er@menardcountyuwd.org			