



**NECHES & TRINITY VALLEYS
GROUNDWATER CONSERVATION DISTRICT**
 PO Box 1387 • 914 S. Bolton St., Jacksonville, TX 75766
 Phone: (903) 541-4845 • Fax: (903) 541-4869
 Email: office@ntvgcd.org

For District Use Only	
Permit No:	
Operating Permit Fee	
Paid:	
Date:	
Permit Approved	
Date:	
By:	

APPLICATION FOR OPERATING PERMIT

Instructions: Complete one form for each well, type or print, submit along with the Operating Permit Fee (see Schedule of Fees) to the above address. Additional information or explanations may be required. An Application for well drilling or re-working must be submitted prior to, or with this application unless applicant is applying for an existing well or is only requesting an increase in pumping allocation based on historical or expected use.

OPERATING PERMIT FEES

Well casing diameter: less than or equal to 6" \$100.00
 greater than 6" \$200.00
 greater than 10" \$400.00

Well Report
 Tracking No. _____
 State Well No. _____
 TCEQ source ID: _____

Well Owner: _____ Well No./Name: _____

Contact: _____ Telephone: _____

Address: _____

City: _____ State: _____ Zip: _____

Well Site: _____

Latitude: _____ Longitude: _____

Date anticipated to begin producing water: _____ at Max GPM of: _____
 gallon per minute

Pumping in gallons per year: _____ Well casing Diameter: _____

Certification:

- 1.) Applicant agrees that water produced / withdrawn from the well will be put to beneficial use at all times.
- 2.) Applicant hereby agrees to comply with the District's Rules and Management Plan.
- 3.) Applicant hereby agrees to equip permitted wells with a flow measurement device and report pumping and pay production fees quarterly when required under Rule 4.

**I hereby certify that the information given herewith is true and accurate to the
best of my knowledge and belief.**

Print Name

Signature of Well Owner or Agent

Date