NECHES & TRINITY VALLEYS
GROUNDWATER CONSERVATION DISTRICT
P.O. Box 1387 • 501 Devereaux St., Suite 201, Jacksonville, TX 75766
Phone: (903) 541-4845 • Fax: (903) 541-4869 • office@ntvgcd.org

REQUEST TO AGGREGATE HISTORIC OPERATING PERMITS

FOR DISTRICT USE ONLY	
State/District Well No.: _____	Date Application Received: _____
Fee Received: $ _____ Paid By: _____	Date Received: _____
Date Approved: _____	Approved By: _____

Instructions: The owner of multiple wells on the same contiguous acreage, authorized for the same purpose of use, whose operating permits were reclassified as Historic Operating Permits (HOPs) under § 5.203(a), may request that the General Manager reclassify those HOPs as a single HOP for the wells in aggregate (§ 5.203(c)). The total authorized production for the aggregated wells may not exceed the sum of the individual authorizations, and the purpose of use may not change. Aggregation does not relieve the permittee of the duty to meter each well and to report production from each well individually (§ 5.203(c)). Submit with any applicable fee.

Part I. Permit Holder

☐ Individual ☐ Partnership ☐ Corporation ☐ Governmental Entity ☐ Estate/Trust/Guardianship

Name: _____

Mailing Address (Street/PO Box, City, State, Zip): _____

Physical Address (Street, City, State, Zip): _____

Telephone: _____ Email: _____

Part II. HOPs to Be Aggregated

HOP No.	Well No.	Aquifer	Authorized (acre-feet/yr)	Purpose of Use
TOTAL				

Part III. Contiguous Acreage

Description of the contiguous acreage on which the wells are located: _____

_____

_____

Total contiguous acres: _____

Part IV. Required Attachments

☐ **1.** Map showing the contiguous acreage and the location of each well.

☐ **2.** Deed, lease, or other instrument showing ownership of, or the right to produce groundwater from, the contiguous acreage.

☐ **3.** Signatory documents — attach each that applies:

- ☐ Written evidence of an agent's authority to sign for the applicant (§ 9.104(b)(1)).

☐ Assumed name certificate (individual or partnership doing business under an assumed name) (§ 9.104(b)(1), (3)).

☐ Joint applicants: written designation of the applicant selected to represent the others (§§ 9.103, 9.104(b)(2)).

☐ Estate or guardianship: current letters testamentary or order appointing guardian (§ 9.104(b)(4)).

☐ Corporation, district, county, city, or other entity: bylaws, charter, resolution, or corporate affidavit showing the signing official's authority (§ 9.104(b)(5)).

☐ Trust: name of the trust, nature of the trust agreement, and name and current address of each beneficiary (§ 9.104(b)(6)).

Part V. Certifications (initial all that apply)

_____ All wells listed are on the same contiguous acreage and are authorized for the same purpose of use.

_____ The total authorized production of the aggregated HOP will not exceed the sum of the individual authorizations listed above.

_____ Applicant understands aggregation does not relieve the permittee of the duty under Chapter 8 to meter each well and to report groundwater production from each well individually (§ 5.203(c)).

_____ Applicant understands the aggregated HOP remains subject to proportional adjustment under § 5.216 and, if applicable, cancellation under § 5.219.

Attestation and Signature (Required — § 9.104)

STATE OF TEXAS §

COUNTY OF _____ §

I certify that the information provided in this request is true and accurate to the best of my knowledge and belief, and I subscribe and swear or affirm under oath that the facts set out herein are accurate.

Signature requirements (§ 9.104): A partnership must state whether it is a general, limited, or limited liability partnership. A trustee must sign as "trustee." Each joint applicant must sign, and where spouses own the well or interest, each spouse must sign. A person signing on behalf of the applicant must provide the information below.

Signer's Position: _____ Telephone: _____ Email: _____

Signer's Physical and Mailing Address: _____

Signed: _____ Date: _____

Printed Name: _____ Title: _____

Joint Applicant / Spouse (if applicable):

Signed: _____ Date: _____

Printed Name: _____ Title: _____

Subscribed and sworn to before me on this _____ day of _____, 20_____.

_____ Notary Public, State of Texas (SEAL)