



Lower Trinity Groundwater Conservation District

RESIDENTIAL WELL REGISTRATION FORM

This form is to be used only for **Residential** wells using less than 25,000 gallons of water per day and an outside casing diameter of 6 inches or less and **Residential Agriculture** wells using less than 100,000 gallons of water per day. **Registration form must be completed and submitted to the District office prior to drilling.**

WELL DRILLER INFORMATION:

Name of Company: _____ Email: _____
Mailing Address: _____
City: _____ State: _____ Zip Code: _____ Fax#: _____
Contact Name: _____ Telephone: _____
Name of Licensed Driller: _____ License #: _____

RESIDENTIAL HOMEOWNER INFORMATION:

Name of Property Owner: _____ Telephone: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____

WATER WELL INFORMATION:

Anticipated Drill Date: _____ [☐] New Well [☐] Replacement Well (*Old Well Status*): _____
Well Use will be for: [☐] Single Family Home [☐] Agricultural [☐] Property Pond
Physical 911 Well Address: _____
City: _____ State: _____ Zip: _____ County: _____
Casing Size: _____ Pump Size: _____
Wells GPM: _____ Estimated Depth of Well: _____
GPS Coordinates: Latitude: N: _____ Longitude: W: _____

By submitting this form, the driller declares that they are familiar with the State and District's current rules and well construction standards and agrees to abide by them. By submitting this form, the well owner understands that this allows LTGCD to enter the property to inspect the well. By submitting this form, both the driller and the property owner affirm that the well penetration site meets the spacing requirements set by the Texas Water Well Drillers Board. By submitting this form, you hereby certify that you have furnished the above information and to the best of your knowledge and belief, all data herein contained are true and correct.

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