



Phone: 254/933-0120 Fax: 254/933-8396
P.O. Box 1989, Belton, TX 76513

Every drop counts!

Application for New and Existing Exempt Wells

Per District Rule 1.1(gg), an Exempt Well is a new or existing well that meets *at least one* of the criteria in District Rule 6.3, and as a result, the well is exempt from permitting under the laws of this State or the District Rules

Select one of the following:

EXISTING WELL **NEW WELL** **REPLACEMENT WELL**
other (ex: Geothermal Closed Loop)

If Existing Well, on what date was the well drilled: _____

1. Owner Information

Well Owner: _____ **Email:** _____ **Telephone:** _____

Address (Street/P.O. Box, City, State, ZIP): _____

Contact Person (if other than owner): _____ **Telephone:** _____

2. Property Location & Proposed Well Location

Owner of Property (if different from Well Owner): _____

Address of Well Location: _____

Acreage: _____ **Bell CAD Property ID #:** _____ **Latitude:** _____ **Longitude:** _____

3. Well Use & Description

- a. Proposed use for the well: _____; If OTHER, please explain in an attachment
- b. **Estimated Rate of Withdrawal (GPM):** _____
- c. **Well Depth:** _____;
- d. **Column Pipe ID:** _____ in.
- e. **Proposed Water Bearing Formation:** _____; **Management Zone:** _____
- f. Attach a map or drawing showing the proposed location(s) or the well(s) and the distance from the well(s) to the property lines, other wells, and septic systems. See District Rule 6.3 for specific spacing requirements.

REQUIRED BY LAW: Pump Installer / Well Driller Information

Name: _____ Street Address: _____

TDLR Pump Installer License #: _____ City, State, ZIP: _____

TDLR Well Driller License #: _____ Phone: _____ Fax: _____

Email: _____

Name of Consultant preparing Application (if applicable): _____

Con. Phone: _____ Con. Fax: _____ Con. Email: _____

4. Certification

By submitting this document, I hereby certify that the information contained herein is true and correct to the best of my knowledge and belief.

Typed Name of the Owner or Designee: _____

Signature: _____ Date: _____