

BEE GROUNDWATER CONSERVATION DISTRICT
PO BOX 682, BEEVILLE 78404
361-358-2244

EXEMPT WELL REGISTRATION

Instructions: Please complete all applicable questions. Please type or print. Call the office to register the well and receive a number.

Well Owner: _____ Phone: _____

Address: _____ Owner's Well Number: _____

_____ Date Drilled: _____

Tenant/Operator: _____ Driller: _____

WELL LOCATION: Latitude: _____ N. Longitude: _____ W.
(If Known)

Elevation: _____ Ft. Above Mean Sea Level

Location
Of Property _____ (acres) _____ miles _____ (N,S,E,W) of _____ (nearest community) on _____ (road)

Attach a map adequate to locate the well, and provide: _____ Feet from the _____ property line, and
(N,S,W,E, ETC.)

_____ Feet from the _____ property line.

WELL USE Domestic: ___ Livestock ___ Irrigation ___ Industrial ___ Public Supply ___ Injection ___ Other ___

WELL EQUIPMENT: Type of Pump: ___ Turbine ___ Submersible ___ Windmill ___ Other _____

Signature of Landowner or Agent

Date

Attach drillers log and other available information if available and return to BEE GCD at PO BOX 682, BEEVILLE, TX 78104. If not returned within 180 days, a fine of \$25.00 will be assessed.

FOR OFFICE USE ONLY:

DATE RECEIVED: _____ BEE GCD WELL NO: _____

PERMIT NUMBER: _____