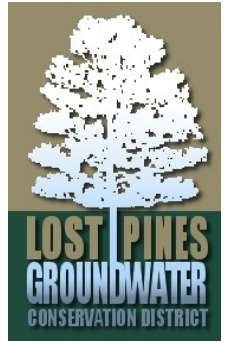


# FORM 300

## Well Registration Application



For District Use Only:

_____
Application Date
_____
Well Number

Return this Form to: LPGCD, PO Box 1027 (908 Loop 230), Smithville, TX 78957  
Phone: 512-360-5088 FAX: 512-360-5448 Email: [lpgcd@lostpineswater.org](mailto:lpgcd@lostpineswater.org)

### SECTION I – APPLICANT

Name _____
Company (if applicable) _____
Street (or PO Box) _____
City _____ State _____ Zip _____
Phone Number (____) _____

### SECTION II – EXEMPTION

Is the Applicant Requesting an Exemption Under Lost Pines Groundwater Conservation District Rule 3.1? Yes _____ No _____
TYPE OF EXEMPTION CLAIMED:
_____ A well that is solely for domestic or livestock use that is incapable of producing more than 25,000 gallons per day (gpd).
_____ A well that uses less than 200 acre-feet/year solely for agricultural use.
_____ A well that is used solely to supply water for a rig that is actively engaged in drilling or exploration operations for an oil or gas well permitted by the Railroad Commission of Texas.
_____ A water well authorized under a permit issued by the Railroad Commission of Texas for mining activities.
_____ A water well drilled and completed solely for the purposes of aquifer testing.

**SECTION III – WELL INFORMATION**

Location of the well: Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

Physical description of the well location (if GPS coordinates are not available):  
\_\_\_\_\_

County that the well is located in: Bastrop \_\_\_\_\_ Lee \_\_\_\_\_

What is the type of well (circle one)?

*Domestic Livestock Irrigation Municipal Supply Mining Rig Supply Test Other* \_\_\_\_\_

What aquifer is water produced from (if known): \_\_\_\_\_

Please attach copies of the following Schedules or Logs, if available:

State Well Report: \_\_\_\_\_ Electric Log: \_\_\_\_\_ Aquifer Test Results: \_\_\_\_\_

Date Well Drilled: \_\_\_\_\_ Driller: \_\_\_\_\_ Driller's License No: \_\_\_\_\_

Land surface elevation: \_\_\_\_\_ feet

Total Well Depth: \_\_\_\_\_ feet

Screened Interval: \_\_\_\_\_ to \_\_\_\_\_ feet

Depth to Water: \_\_\_\_\_ feet

Well Diameter: \_\_\_\_\_ inches

Diameter of borehole: \_\_\_\_\_ inches

Pump set at: \_\_\_\_\_ feet

Pump type: \_\_\_\_\_

Pump size: \_\_\_\_\_ horsepower

Well Capacity: \_\_\_\_\_ gpm

NOTE: A fully completed state well report can be submitted in lieu of the above information.

**SECTION IV – AFFIRMATION**

**I certify that all statements and information in this application are true and correct.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date