



For EAA Use Only
Form: 040313

Entity #: E _____
Application #: C _____
Well #: W _____

900 E. Quincy, San Antonio, Texas 78215
(210) 222-2204 or 1-800-292-1047 Fax (210)222-9869

Application for “Drill Through the Edwards Aquifer” Well Construction Permit

One application required for each well.

1. This application must be completed, signed, and submitted to the EAA prior to constructing a **new** well that intersects the Edwards Aquifer **or** altering or reconstructing an **existing** well that intersects the Edwards Aquifer. **(The entire annular space through the Edwards Aquifer must be properly sealed.)**
2. The application must be typed or printed legibly using ink.
3. A processing fee of \$25.00 must accompany the application.
4. Only checks and money orders made payable to the “Edwards Aquifer Authority” will be accepted. Please do not submit cash.
5. Upon receipt of a complete application, please allow thirty (30) days for processing.
6. Incomplete applications will be returned to the applicant for completion.
7. No well construction can commence until the application is approved and a well construction permit is issued.

I. - Applicant Information - Please provide **all** of the following:

1. Property Owner Name: _____
2. Property Owner Contact Name: _____ Phone () _____
3. Property Owner Mailing Address: _____
4. Agent Name: _____ Phone () _____
5. Agent Company Name: _____
6. Agent Mailing Address: _____
7. Drilling Contractor Company Name: _____
8. Driller Name: _____ Lic. #: _____ Phone () _____
9. Driller Mailing Address: _____

II. - Well Site Information and Proof of Ownership - Please provide **all** of the following:

1. Well Site Address: _____ City: _____
Zip: _____ County: _____ Subdivision: _____
2. Latitude: _____ Longitude: _____
(The coordinates are required to be in degrees/ minutes/ seconds NAD 83 format.)
3. Please provide a road map to the subject property **and** please provide a property map showing the location of the proposed well, the nearest septic tank, and nearest septic absorption field or septic spray area. Maps must include sufficient information to locate the property and well.

4. Please provide proof of ownership (**EITHER** a copy of a complete recorded deed, a current tax record, **OR** a current appraisal district record) with a legal description of the subject property.
5. Describe and attach a diagram of the construction method (include well depth and all other well specifications).

III. - Well Information – Please provide **all** of the following (Place “N/A” in the blanks that are not applicable):

1. Type of well construction: Install a new well that Intersects Through the Edwards Aquifer
 - Capping a New or Existing well that is drilled through the Edwards Aquifer
 If checked, please provide the duration the well will be capped. _____ months
 If checked, please provide when the well will be placed into service _____ months
 - Alter or Reconstruct an existing well that is drilled through the Edwards Aquifer. Examples include installing additional casing, repairing existing casing, adjusting the well depth, or any work that may affect the integrity of the annular space seal.
 - Other - Please specify: _____
2. Source of groundwater (please specify): _____
3. Total estimated well depth: _____ ft.
4. Total estimated depth to the bottom of the Edwards Aquifer: _____ ft.
5. *Casing (s) outside diameter (OD): _____ in. *Borehole diameter (s): _____ in.
 (*Note: The annular space through the Edwards Aquifer must be a minimum of 2 inches between the borehole and the outside well casing (4 inches total).)
6. Casing: Steel PVC
7. Schedule or SDR Type (s) or casing wall thickness (in inches): _____
8. Total estimated casing depth (s): _____ ft.
9. If the well casing is installed to total depth, please provide the depth interval the well casing is perforated or slotted to form a well screen: _____ ft. to _____ ft.
10. Annular seal material: _____
11. Total estimated depth(s) of grout placement below land surface: _____ ft.
12. Grouting method: Tremie - Positive Displacement Exterior
 Positive Displacement Interior or Continuous Injection
13. Type of Packer(s): _____ Packer(s) estimated depth(s): _____ ft.
14. Surface casing (Sleeve) type: _____ Sleeve Size: _____ in. Sleeve Depth: _____ ft.
15. Number of feet from the nearest property line (50-foot minimum): _____ ft
16. Number of feet from the existing or proposed nearest septic tank (50-foot minimum): _____ ft
17. Number of feet from the existing or proposed nearest septic absorption field or spray area (150-foot minimum):
 _____ ft
18. Will the well be located in a flood plain? Yes No
 If “Yes”, will the well head extend 36 inches above the flood plain? Yes No
19. Purpose of Use: Municipal/Public Supply Industrial Irrigation / Commercial Agricultural
 Domestic / Household Livestock Other (please specify) _____

IV. – Owner’s or Agent’s Certification:

I certify that, as the Applicant, I am the owner of the well which is the subject of this Application, or the Authorized Agent of the well owner. Additionally, I certify that each and all of the statements and information contained herein are true and correct to the best of my knowledge and belief. Moreover, I agree to fully comply with the terms of the Edwards Aquifer Authority Act, the rules of the EAA, and any well construction permit that may be issued pursuant to this Application.

Signature of Owner or Agent _____ Date _____

Print Name: _____

Co-Signature _____ Date _____

Print Name: _____