

Well Registration and Information Form (Please complete a separate form for each well registered)

Additional well registration forms are available online at www.edwardsaquifer.org .	For EAA Use Only Form: 011121
	Entity #: E
Is the well being registered due to a change in ownership? Yes No if yes, who was the previous owner?	Well #: W
Part I – Well Owner Information	
1.) Current Well Owner:Phone: ()	
2.) Mailing Address:	
(Street or P.O. Box) (City) (State	,
S.) Email Address: Contact	Preference: □ Phone □ Email
If the point of contact for the well is different from above, please provide:	
1.) Contact's Full Name:Phone: ()	
2.) Contact's Mailing Address:	
,	te) (Zip)
3.) Contact's Email Address:Contact A.) Particular of the Contact Contact	t Preference: Phone Email
4.) Relationship to Owner	
Part II – Well Location	
1.) Well Site Address: (Street Address) (City) (Sta	te) (Zip)
2.) Size of property where well is located:(acres).	, (<u>-</u> - <u>-</u> -
3.) If well location does not have a specific address, please provide a short description of the	well location from the
nearest intersection of two named public roads, streets, or highways:(feet/miles) N S	
corner of and	Tom the
Part III – Well Information: (Please answer to the best of your knowledge. For unknown	information, mark
blank(s) with N.A.)	
1.) Please indicate source of groundwater: □ Edwards Aquifer; □ Other (specify)	
2.) Is property serviced by a public water supply? □ no □ yes − name	
3.) Well capacity (gallons per minute)?4.) Pump Size (hp)?5.) Year well of	lrilled?
5.) Total depth of well?ft. 7.) To what depth is the well cased?ft.	
3.) What is the well status? □ In use; □ Temporarily out of service; □ Capped; □ Abandoned	
9.) Please indicate the purpose(s) of use (check all that apply): Single Family Household;	
□ Multiple Households; □ Irrigation-Landscape/Garden/Orchard; □ Irrigation-Crops; □ Livest	ock; ☐ Industrial;
□ Municipal; □ Business/Commercial; □ Other (specify)	<u></u>
10.) Is a copy of the State Well Report available? □ no □ yes (please provide a copy)	
The information provided is accurate to the best of my knowledge. E-signature or manu	al signature needed below.

Date

Manual or E-Signature of Well Owner or Authorized Agent