



**RUSK COUNTY**  
GROUNDWATER CONSERVATION  
DISTRICT

# Rusk County Groundwater Conservation District

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## WATER WELLS USED FOR OIL AND GAS OPERATIONS INSPECTION REQUEST FORM

*District Rule 9.2.5, Well Closure, Retainment, Transfer of Water Wells Used for Oil and Gas Operations  
A \$300.00 fee is due upon the submittal of this form for each well requested*

### Request for:

- Exempt Well *(Applying for a Certificate of Registration)*
  - 1) a well that is drilled, completed, or equipped so that it is incapable of producing more than 25,000 gallons of groundwater per day;
  - 2) a well to be 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 RRC;
  - 3) a well authorized under a permit issued by the RRC under CH. 134, Natural Resource Code, or production withdrawals required for mining activities.
- Non-Exempt Well *(Applying for an Operating Permit)*
  - 1) a well that is drilled, completed, or equipped so that it produces more than 25,000 gallons of groundwater per day;
  - 2) A well that does not meet exempt well status Rule 9.1

**District Well Number to be Transferred:** \_\_\_\_\_

### PART I. OWNERSHIP TRANSFER INFORMATION

#### Current Well

**Owner:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

#### Request Well Transfer to:

New Well Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

### PART II. WELL LOCATION AND PROPERTY DESCRIPTION

Well Location: \_\_\_\_\_  
Street Address City State Zip Code

RRC API ID & Well Name *(Oil & Gas Lease Sites)*: \_\_\_\_\_

### PART III. PROPOSED WELL INFORMATION

Well Use: _____	Domestic _____	Commercial _____	Oil & Gas Rig Supply _____
_____	Livestock _____	Industrial _____	Well Fracking _____
_____	Poultry _____	Monitor Well _____	Mining Activities _____
_____	Irrigation _____	For Sale _____	Public Water Supply _____

Other \_\_\_\_\_

- a) Estimated Rate Water Will be Withdrawn (in gallons per minute): \_\_\_\_\_
- b) Maximum pumping Capacity of well (in gallons per minute): \_\_\_\_\_
- c) Quantity of water to be produced by this well annually (in acre-feet or gallons): \_\_\_\_\_
- d) Will the groundwater produced be transported out of Rusk County:  YES  NO  
 If yes, please explain: *(TRANSPORT PERMIT & OPERATING PERMIT REQUIRED)*
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- e) Will the groundwater withdrawn from the well be resold, leased, or otherwise transferred to others?  YES  NO  
 If yes, please provide the location to which the groundwater will be delivered:
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f) State the nature and purpose of beneficial use of the groundwater under the requested permit and provide any evidence if available:

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- g) Will well be used for more than one household? \_\_\_\_\_ how many? \_\_\_\_\_
- h) Will the well be connected to an irrigation system? \_\_\_\_\_ how large an area? \_\_\_\_\_
- i) Will the water from this well be discharged into a pond or impoundment? \_\_\_\_\_

**PART IV. REQUIRED DOCUMENTATION (NON-EXEMPT WELL APPLICANTS)**

- Evidence the applicant has legal authority to produce groundwater associated with the land surface and the permit application (District Rule 9.4(c)) **DISTRICT PROVIDED AFFIDAVIT FORM**
- Hydrological Study Type 1 to be submitted for wells producing from 250gpm to 499gpm; or Hydrological Study Type 2 to be submitted for wells producing from 500gpm or more. (District Rule 9.4(l))
- Water Conservation Plan to comply with the District’s Management Plan **or**
  - The water conservation plan of a municipality or entity providing retail water services, the water conservation plan of the municipality or entity shall also be provided along with a copy of the contract between the applicant and any subsequent user of the water.
- Declaration that the applicant agrees to avoid waste and achieve water conservation; to protect the groundwater quality; that the applicant will comply with well plugging and report closure of the well to the District within 30 days **or** attach well closure plan.
- Proof of notification to all land owners and/or registration/permit holders that are located with the spacing requirement circumference of the applied well, along with the publishers affidavit showing publication of notice.

**PART V. CERTIFICATION**

**I hereby swear or certify that the information in this application is true and accurate to the best of my knowledge and belief and agree to abide by the District’s Rules. I confirm the pump has been removed and give permission for District Personnel to inspect the well with a “down hole” water well camera and Geo-Physical Logging Tools. I have read and understand fully District Rule 9.2.5 and have enclosed a non-refundable check for \$300.00 for the inspection of the water well on this form. I understand that if, there is indication of commingling of the aquifers or zones, transfer of the water well will not be authorized and the well must be plugged or repaired according to TDLR regulations. If the well passes inspection, the well owner will receive a registration or operating permit for the**

**water well. Use of water from the well must comply with all rules and regulations of the TDLR, Chapter 36 of the Texas Water Code, and District Rules.**

\_\_\_\_\_  
Print Name (Current Well Owner/Operator)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Transfer of ownership to the new owner must be a mutual agreement between the two parties and must be verified by the transferor's and transferee's signature. Without the signature of the party whom the well will be transferred to, this application will be incomplete and no inspection will be conducted until signed.**

\_\_\_\_\_  
Print Name (Well Owner to be transferred to)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please complete all required fields in application, if incomplete information is found the application will not be processed and deemed administratively incomplete.**

**District staff will make every effort to inspect this well within sixty (60) days of this request. If non-conforming construction is found, the District may provide the inspection data to TDLR.**

*RCGCD Staff Use Only*

Date Received: _____	Received By: _____	Date Assigned: _____
Fees Paid: _____	Well ID: _____	Date Denied: _____
Fee ID: _____	Date Paid: _____	Permit #: _____
Application ID: _____	Check #: _____	State Well Report #: _____
DVD & Log #: _____	Inspected By: _____	Date Inspected: _____
Does the inspection match the State Well Report: _____		
E-log Fluid Level: _____		
E-log Total Depth: _____		
E-log Screen Intervals: _____		
Producing Formation: _____		
Formation Depths: _____		
Comments: _____		