

Southern Trinity Groundwater Conservation District 824 Washington Street Waco, Texas 76701 254 759-5610

For Dis	strict Use Only
Application	for Variance from Well Spacing Limitations
No.:	
Application	Rec*d
Fee Rec'd_	

Application for Variance from Well Spacing Limitations

Instructions: This application is to be used to apply for a variance from well spacing limitations and must be completed, signed, notarized and returned to the District. Please keep a copy of this application for your records. Please print or type legibly. Incomplete applications will be returned.

Fee required: An application fee of \$\\$\\$ must accompany this application. Only personal or cashier's checks or money orders made out to the Southern Trinity Groundwater Conservation District will be accepted. NO CASH PLEASE.

Part I – Well Owner's Information

Name of Well Owner: Telephone No.: Home ()		======	
Telephone No.: Home ()	Business ()_	Fax ()_	
Mailing Address:	(m)		
(Street or PO Box)	(City)	(State)	(Zip)
Physical Address:(Street)	(City)	(04-4-)	(7.)
E-mail Address:	(City)	(State)	(Zip)
Is the well owner the Applicant for this	variance from well spacin	a limitations?	
If not, who is the Applicant?			
B. Well Operator's Information (info	ormation for operator of	the proposed well)	
Name of Well Operator:			
Name of Well Operator: Telephone No.: Home ()	Business ()	Fax ()	
Mailing Address:	Dustriess ()	1 ax ()	- 6
(Street or PO Box)	(City)	(State)	(Zip)
Physical Address:			(— - F)
(Street)	(City)	(State)	(Zip)
E-mail Address:			
Is the well operator the Applicant for the	is variance from well space	ing limitations?	
If not, who is the Applicant?			
C. Applicant's Authorized Represent	tative Name if any		
	ell owner and		officer, at
	on owner und	operator (agent,	officer, at
•			
etc.):	Business ()	Fax ()	
etc.):	Business ()_	Fax ()_	=======================================
etc.):			
etc.):	(City)		(Zip)
etc.):Telephone No.: Home ()	(City)	(State)	

A. What is the drilling permit application number for the proposed well?

В.	Provide the names and addresses of owners of wells located within the applicable minimum well spacing distance mandated in § 6.103 of the District's rules from the proposed well (attach additional sheets as necessary):
C.	Please provide information about why the applicable well spacing requirements mandated in § 6.103 of the District's rules cannot be complied with, if applicable (attach additional sheets as necessary).
D.	Please provide information demonstrating that the operation of the proposed well will not substantially interfere with the use and enjoyment of wells located within the minimum well spacing distance mandated in § 6.103 of the District's rules, if applicable (attach additional sheets as necessary).

Part III - Supporting Documentation

- A. Provide additional sheets as necessary with the names and addresses of owners of wells located within the applicable minimum well spacing distance mandated in § 6.103 of the District's rules from the proposed well.
- B. Provide additional sheets as necessary with information about why the applicable well spacing requirements mandated in § 6.103 of the District's rules cannot be complied with, if applicable.
- C. Provide additional sheets as necessary with information demonstrating that the operation of the proposed well will not substantially interfere with the use and enjoyment of wells located within the minimum well spacing distance mandated in § 6.103 of the District's rules, if applicable.
- D. Provide signed waivers from the owners of all wells located within the applicable minimum well spacing distance mandated in § 6.103 of the District's rules from the proposed well stating that they have no objection to the District granting the requested variance, if applicable (attach waivers).

Information about assigning an Authorized Representative:

1. If an Authorized Representative or agent of the Applicant will sign this application, the Authorized Representative or agent shall provide written evidence of his or her authority to represent the Applicant, as appropriate.

- 2. If the Applicant is an individual or a partnership doing business under an assumed name, the Applicant shall attach an assumed name certificate from the county clerk of the county in which the principal place of business is located and from the Secretary of State, if applicable.
- 3. Joint Applicants shall select one among them to pursue the application with the District and shall attach written evidence of such representation.
- 4. If the Applicant is an estate or guardianship, a current copy of the letters testamentary issued by the court shall be attached to the application.
- 5. If the Applicant is a corporation, public district, county, municipality, or other corporate entity, written evidence in the form of bylaws, charters, or resolutions specifying the authority of the official to apply for the variance shall be submitted. A corporation may file a corporate affidavit as evidence of the official's authority to sign.
- 6. If either Applicant is acting as trustee for another, the Applicant shall disclose in writing the nature of the trust agreement and provide the name and current address of each trust beneficiary to the District.

Applicant's Certification:					
I hereby certify that the information given herein is true and accurate to the best of my knowledge and belief.					
Printed Name of Applicant or Agent	Signature of Applicant or Agent				
STATE OF TEXAS COUNTY OF					
Subscribed and sworn before me this	_ day of, 20				
	Notary Public's Signature Date Commission Expires:				

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