UPPER TRINITY GROUNDWATER CONSERVATION DISTRICT

Serving Hood, Montague, Parker and Wise Counties 1859 W. Hwy. 199/P.O. Box 1749, Springtown, Texas 76082 Phone: (817) 523-5200 | Fax: (817) 523-7687

www.uppertrinitygcd.com

APPLICATION FOR TRANSFER OF WELL OWNERSHIP

A well which has changed ownership

District Use Only:
Received:
Approved:
Ву:
Well Reg. ID:
☐ Exempt
☐ Non-exempt

Applicants are urged to read all the Rules for Water Wells in Hood, Montague, Parker, and Wise Counties, Texas. Rules can be found at: www.uppertrinitygcd.com.

*Required fields.			
Part I (A) – Previous Well Owner (The T	ransferor)		
*Well Owner:			
*Phone:	*E-Mail:		Fax:
*Mailing address:		*City:	*State: *Zip: _
Contact (If different than owner)		Phone:	
Contact Email:		Fax:	
Date of Change in Ownership:			
Part I (B) – New Well Owner (The Transj	feree)		
*Well Owner:			
*Phone:	*E-Mail:		Fax:
*Mailing address:		*City:	*State: *Zip: _
Contact (If different than owner)		Phone:	
Contact Email:		Fax:	
Part II – Well Information (Please provi	de all information that ma	y be obtained by rea	asonable diligence)
*Well Site Address:			
*City:	*County:		State: TX *Zip:
*Latitude*L	ongitude		
Please contact District staff if assistance is	•		

Revised 3/30/2021 KR Page 1

Please provide all information that may be obtained by reasonable diligence. Size of Well casing: _____ Inside diameter of the pump [discharge] column pipe _____ Depth of well: ______ feet Maximum designed production capacity: _____ gpm Method of withdrawal (submersible pump, windmill, etc.): Depth to first screen: feet Pump motor size: Part III - Purpose for Water Use *Check all that apply: \(\sigma\) Domestic \(\sigma\) Livestock \(\sigma\) Agriculture \(\sigma\) Poultry ☐ Retail Public Utility ☐ Public Water System ☐ Commercial ☐ Oil/Gas Exploration *Will the groundwater produced be transported out of Hood, Montague, Parker, or Wise counties or anywhere other than the property where the groundwater was produced? □ No □ Yes. Location of water use: *Will the groundwater withdrawn from the well be used by anyone other than well owner? □ No □ Yes. Name of person/entity using water: _____ Part IV - Certification *I hereby certify that the information given herewith is true and accurate to the best of my knowledge and belief. Print Name (Previous Well Owner) Date Signature of Previous Well Owner Print Name (Current Well Owner) Date Signature of Current Well Owner

Revised 3/30/2021 KR Page 2