

Registered Wells Only - Well Owner/Well Details Update Form (Please complete a separate form for each well registered)

Please complete and submit to: Edwards Aquifer Authority, Attn: Well Protection Program, 900 E. Quincy St. San Antonio, TX 78215. Additional Well Owner Update forms are available online at www.edwardsaquifer.org.

Is the well being registered due to a change in ownership? □ Yes □ No

| For EAA Use Only | | | |
|------------------|--|--|--|
| Form: 123019 | | | |
| Entity #: E | | | |
| Well #· W | | | |

| 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 | y) (State) | (Zip) |
| 3.) Email Address: | | Contact Preference | e: □ Phone □ Email |
| If the point of contact for the well is different from abo | ve, please provide: | | |
| 1.) Contact's Full Name: | Phone: (|) | |
| 2.) Contact's Mailing Address: | | | |
| (Street or P.O. Box) | | (State) | (Zip) |
| 3.) Contact's Email Address: | | Contact Preference | e: □ Phone □ Emai |
| 4.) Relationship to Owner | | | |
| Part II - Well Location | | | |
| 1.) Well Site Address: | | | |
| (Street Address) | (City) | (State) | (Zip) |
| 2.) Size of property where well is located:(a | acres). | | |
| 3.) If well location does not have a specific address, ple | ease provide a short de | scription of the well location | on from the |
| nearest intersection of two named public roads, streets, | or highways: | _(feet/miles) N S E W | from the |
| corner of and | | _· | |
| Part III – Well Information: (Please answer to the b | est of your knowledge | e. For unknown informati | ion, mark |
| blank(s) with N.A.) | _ | | |
| 1.) Please indicate source of groundwater: □ Edwards A | Aquifer; □ Other (specif | fy) | |
| 2.) Is property serviced by a public water supply? □ no | - | | |
| 3.) Well capacity (gallons per minute)?4.) Pur | | | |
| 6.) Total depth of well?ft. 7.) To what depth is | | | |
| 8.) What is the well status? In use; Temporarily ou | | | |
| 9.) Please indicate the purpose(s) of use (check all that | | | |
| ☐ Multiple Households; ☐ Irrigation-Landscape/Garden | | | ictrial: |
| □ Municipal; □ Business/Commercial; □ Other (specify | _ | crops, \Box Livestock, \Box mut | istiiai, |
| | | | |
| 10.) Is a copy of the State Well Report available? □ no | | | |
| The information provided is accurate to the best of | my knowieage. Ł-sign | ature or manual signatur | е пееаеа |
| below. | | | |
| Manual or E-Signature of Well Owner or Au | uthorized Agent | Date | |