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| EDWARDS AQUIFER | | | | | |

| For EAA Use Only Form: 12202019 | | | | |
|------------------------------------|--|--|--|--|
| Entity #: E | | | | |
| Application #: C | | | | |
| Well #: W | | | | |

900 E. Quincy St., San Antonio, Texas 78215 (210) 222-2204 or (800) 292-1047 Fax (210) 222-9869

Application for Well Plugging Permit

One application required for each well.

- 1. This application must be completed, signed, and submitted to the EAA prior to plugging an Edwards Aquifer well or a well that is drilled through the Edwards Aquifer.
- 2. The application must be typed or printed legibly using ink.
- 3. A processing fee of \$25.00 must accompany the application.
- 4. Checks and money orders made payable to the "Edwards Aquifer Authority" will be accepted. Do not submit cash. To pay by Credit Card, please open https://www.edwardsaquifer.org and click Online Payments and follow the instructions. Please provide the payment Confirmation No.
- 5. Upon receipt of a complete application, please allow thirty (30) days for processing.
- 6. Incomplete applications will be returned to the applicant for completion.
- No well plugging can commence until the application is approved and a well plugging permit is issued. 7.

I. - General Information – Please provide <u>all</u> of the following:

| 1. | Property Owner Name: | | | | |
|--|--|--------|------------|--|--|
| 2. | Property Owner Contact Name: | | | | |
| 3. | Property Owner Phone: () | Email: | | | |
| 4. | Property Owner Mailing Address: | | | | |
| 5. | Agent Name: | | Phone: () | | |
| 6. | Agent Company Name: | | Email: | | |
| 7. | Agent Mailing Address: | | | | |
| 8. | Plugging Contractor Company Name: | | | | |
| 9. | Contractor Name: | | Lic. #: | | |
| 10. | Contractor Phone: () | Email: | | | |
| 11. | Contractor Mailing Address: | | | | |
| II Well Site Information and Proof of Ownership - Please provide all of the following: | | | | | |
| 1. | Well Site Address: | | | | |
| | City: | Zip: | County: | | |
| 2. | Latitude: | | | | |
| | (The coordinates are required to be in degrees/ minutes/ seconds NAD 83 format.) | | | | |

3. Please provide a road map to the subject property and please provide a property map showing the location of the existing well. Maps must include sufficient information to locate the property and well.

- 4. Please provide proof of ownership (**<u>EITHER</u>** a copy of a <u>complete recorded</u> deed, a <u>current</u> tax record, <u>**OR**</u> a <u>current</u> appraisal district record) with a legal description of the subject property.
- 5. Please provide geophysical well logs (Natural Gamma on the right track and Caliper on the left track) and include a signed and dated Edwards Aquifer Authority Geophysical Well Log Certification Form.

III. - Well Information and Plugging Method - Please provide all of the following:

| 1. | Well Type: L Non Flowing Artesian Edwards Well L Flowing Artesian Edw | ards Well | | | |
|------------------------|--|--|--|--|--|
| | ☐ Water Table Edwards Well ☐ Trinity Aquifer well drilled thr | ough the Edwards Aquifer | | | |
| 2. | Well Depth: | ft. | | | |
| 3. | Casing Type: | | | | |
| 4. | Casing Diameter: | | | | |
| 5. | Well Casing Depth: | ft. | | | |
| 6. | Is the applicant planning to use sand or stone aggregate to fill the borehole below the well casing or the water level, which ever is deeper? Yes No If "Yes", please provide the total estimated depth of sand or stone aggregate placement below land surface:ft. | | | | |
| 7. | Please provide the total estimated depth of grout placement below land surface:(Usually, 10-feet below the well casing or to the water level, whichever is deeper.) | ft. | | | |
| 8. | Authority rules require that the entire well, including the annular space and casing, be pressure filled with grout. If no information is available to indicate that the annular space is properly sealed, then the well plugging contractor is required to perforate or remove the casing in order to properly seal the annular space while grouting the well. | | | | |
| | You must submit at least <u>one</u> of the following: | | | | |
| | a. Documentation indicating that the annular space is properly sealed. \Box Yes | No No | | | |
| | Removal of the entire casing by extraction or over-drilling. Yes No If "Yes", please submit your proposal in writing, including the method for extracting or over-drilling the casing. | | | | |
| | c. Perforate the casing. Yes No If "Yes", please submit your proposal in writing, including the method for per | forating the casing. | | | |
| 9. | Describe and attach a diagram of the plugging method (include well depth and all | other well specifications). | | | |
| IV | – Owner's or Agent's Certification: | | | | |
| Agen are t the E | tify that, as the Applicant, I am the owner of the well which is the subject of thin nt of the well owner. Additionally, I certify that each and all of the statements a true and correct to the best of my knowledge and belief. Moreover, I agree to fu Edwards Aquifer Authority Act, the rules of the EAA, and any well plugging pe ed pursuant to this Application. | nd information contained herein illy comply with the terms of | | | |
| | ature of Owner or Agent Da | ıte | | | |
| Print | t Name: | | | | |
| Co-S | Signature Da | .te | | | |
| Print | t Name: | | | | |