



REAL-EDWARDS CONSERVATION & RECLAMATION DISTRICT

P.O. Box 1208
234 Evergreen St.
Leakey, Tx 78873

Phone: 830-232-5733
Fax: 830-232-5734
www.recrd.org / info@recrd.org

Existing Well Registration Form

For wells producing less than 25,000 gallons per day and were drilled prior to January 1, 2002.

WELL OWNER INFORMATION

Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____ Cell/Other: _____

WELL INFORMATION

Location of well: Edwards County Real County

approximately _____ miles _____ N _____ S _____ E _____ W from _____

on County Rd or H.W. _____ Subdivision Name: _____ Tract/Lot #: _____

Attach complete driving directions to location from nearest town or major highway intersection.

Latitude: _____ Longitude: _____

Well Use [CHECK ONE]: Domestic/Household Livestock Public Supply Other

Well Casing Size _____ Pump HP _____ Pump Type _____ Yield _____ [gpm]

Size of tract of land (in acres) on which the well is located: _____

Distance (in feet) from well site to nearest property line: _____

Distance (in feet) from well site to nearest septic tank absorption field; or other potential contamination source: _____

DRILLING COMPANY

Date Drilled: _____

Driller: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

I HEREBY CERTIFY THAT I AM THE REGISTRANT OF THE ABOVE-DESCRIBED WELL. I UNDERSTAND THAT I AM REGISTERING THIS WELL IN COMPLIANCE WITH DISTRICT RULES, AND THE DISTRICT WILL ISSUE A "WELL REGISTRATION NUMBER" TO THIS WELL FOR ACCOUNTABILITY. BY SIGNING BELOW, I ACKNOWLEDGE THAT ALL FOREGOING STATEMENTS AND DATA ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature: _____

Date: _____

Printed Name: _____

Owner

Agent

DISTRICT USE ONLY

Well # _____

Grid: _____

VERIFIED and APPROVED

Signature: _____

Approval Date: _____

Printed Name: _____