COW CREEK GROUNDWATER CONSERVATION DISTRICT

PHYSICAL ADDRESS: 9 TOEPPERWEIN ROAD, BOERNE, TEXAS 78006 MAILING ADDRESS: P.O. BOX 1557, BOERNE, TEXAS 78006 (830) 816-2504 FAX (830) 816-2607

PUMP INSTALLER REPORT

This form is used for reporting the installation or replacement of a water well pump.

A. WELL AND OWNER INFORMATION (Any person who has the right to produce groundwater from the land, either by ownership, contract, lease, easement, or any other estate in the land.)

Name	CCGCD Well #	
Well Location	Latitude /	
911 Address	Longitude	

B. PUMP INSTALLER'S INFORMATION (The licensed person who is installing the water well pump.)

Company	Address	
Installer's Name	License Number	
Phone Number	Email	

C. WELL EXEMPTION STATUS (Only select one. Please contact the District if you are unsure.)

Domestic and/or Livestock Well equipped to pump greater than	□ Domestic and/or Livestock Well <u>NOT</u> equipped to pump greater		
17.36 GPM NO METER PERMITTED	than 17.36 GPM NO METER PERMITTED		
□ Domestic and/or Livestock Well capped at 5 GPM	☐ Other Well Type <u>NOT</u> equipped to pump greater than 17.36 GPM		
NO METER PERMITTED	METER REQUIRED		
☐ Other Well Type equipped to pump greater than 17.36 GPM			
METER REQUIRED			

D. INSTALLED WELL / PUMP INFORMATION

Casing Size		Well Depth	Pump / Motor Brand	Pump Model	
Pump Depth (ft)		Pump Diameter	Number of Stages	Pump Discharge (in)	
Pump Motor (hp)		Voltage	Phase	Production Rate (gpm)	
Meter Brand		Meter serial #	Meter Reading	Installation Date	
If production was restricted, please explain how and with what equipment					

E. SIGNATURE

By signing this form, I declare that the information provided in this form is true and correct, to the best of my knowledge and belief. I hereby certify that this well was equipped by me or under my direct supervision. Furthermore, I am familiar with all pertinent requirements contained in the Cow Creek Groundwater Conservation District Rules. I agree and acknowledge that if the information I have provided changes in the future, it is my responsibility to provide the new information to the District. I understand that a change in this information may result in additional requirements.

Signature of Pump Installer:

Printed Name:

Date: _____