

**HAYS TRINITY GROUNDWATER CONSERVATION DISTRICT**

State Well No. \_\_\_\_\_

Center Lake Business Park

14101 Hwy 290 West, Bldg. 100, Suite #212, Austin, TX 78737

District \_\_\_\_\_

Mailing Address: P.O. Box 1648, Dripping Springs, TX 78620

Registration No \_\_\_\_\_

[www.haysgroundwater.com](http://www.haysgroundwater.com); email: [gm@haysgroundwater.com](mailto:gm@haysgroundwater.com)

(512) 858-9253 Fax (512) 858-2384

**REQUEST FOR A VARIANCE FROM HTGCD RULES**

**Instructions:** This form is used for requesting a variance from HTGCD Rules only and shall be filled out as completely as possible.

**Check All** ( ) Variance requested for property line spacing Rules.

**Applicable:** ( ) Variance requested for well to well spacing Rules.

( ) Variance requested for other Rules. Please specify: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Well Inspection:** District staff shall inspect each well requesting a variance. Property access for inspections is authorized by Texas Water Code, Chapter 36.123 and shall be scheduled with the well owner and conducted in accordance with District Rule 3 and Rule 7. Inspections may include confirming well location, measuring water level, confirming pumping capability, water sampling, geological survey, or any other well-related inspection activity deemed necessary by the District.

**Well Owner**

Well Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

(Street or P.O. Box)

(City)

(ZIP)

Daytime Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Contact Person (if other than owner): \_\_\_\_\_ Phone: \_\_\_\_\_

**Location, Description, and Uses of Well**

Lot or Tract Size: \_\_\_\_\_ acres Directions to Well (or attach location map): \_\_\_\_\_

Driller: \_\_\_\_\_ Drilling Date if Known: \_\_\_\_\_

Water to be used: ( ) On-Site ( ) Off-Site If off-site, please specify where used: \_\_\_\_\_

If requesting a variance on HTGCD minimum spacing requirements, the owner or well driller must provide the distances in feet between the new well and any existing or proposed: Closest Property Line: \_\_\_\_\_

Other Wells: \_\_\_\_\_ Septic Tank: \_\_\_\_\_ Septic Leach Field: \_\_\_\_\_ Other Potential Pollution Sources (specify): \_\_\_\_\_

**Provide explanation about your need for the requested variance(s).** (Attach additional pages as necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please indicate any attachments provided with this form:**

- ( ) Copy of District Well Registration Form
- ( ) Copy of District Operating Permit
- ( ) Copy of District Transport Permit
- ( ) Well Location Map or Property Plat. Must be drawn to a scale that adequately details the well site, well site access route, property lines, location of other existing or proposed wells on the tract, existing wells on adjoining tracts which may lie within the spacing required for the proposed well, location of surface storage, location of existing water uses if any, location of existing or proposed on-site wastewater systems, and the location of any other potential source of pollution.
- ( ) Written Plugging Plan or Procedure. Required only if different from the procedures described in 16 TAC Chapter 76.
- ( ) Other? \_\_\_\_\_

**Owner's or Applicant's Sworn Statement**

I hereby swear and affirm that the information given herein is true and accurate to the best of my knowledge and belief, and that I am aware of, knowledgeable of, and will comply with all District Rules.

\_\_\_\_\_  
Owner's or Applicant's Signature

\_\_\_\_\_  
Date

**To Be Completed by District Personnel Only**

Registration #: \_\_\_\_\_ State or Temp. Well #: \_\_\_\_\_ Status: ( ) Exempt ( ) Non-exempt

**Variance Determination**

Staff Analysis of Variances Requested: \_\_\_\_\_  
\_\_\_\_\_

( ) Variance will be contained entirely on well owner's property. A waiver or easement from an adjoining property owner is not required. Comments: \_\_\_\_\_  
\_\_\_\_\_

( ) Variance will affect adjacent property owners. A waiver or easement from an adjoining property owner is required and must be filed with the County Clerk's Office. Comments: \_\_\_\_\_  
\_\_\_\_\_

( ) Waiver or easement filed with County Clerk's Office. Comments: \_\_\_\_\_  
\_\_\_\_\_

Other Comments: \_\_\_\_\_  
\_\_\_\_\_

Date Application was Administratively Complete: \_\_\_\_\_ ( ) Admin. Approved ( ) Ref. to Board

Date Application was Ref. to Board: \_\_\_\_\_ Public Hearing Date (if held): \_\_\_\_\_

Board Action: ( ) Approved as Filed ( ) Modified or with Special Conditions ( ) Denied Date: \_\_\_\_\_

Signed by: \_\_\_\_\_ Date: \_\_\_\_\_



**VARIANCE NOTICE**

I, \_\_\_\_\_, owner of property identified as \_\_\_\_\_, have made an application to the Hays Trinity Groundwater Conservation District (District) for a variance to District well spacing rules requiring the proposed new water well to be located at least 50 feet from the property line. The proposed well will be located approximately \_\_\_\_\_ feet from the common property line. In accordance to District Rule 14.1.2 the well owner or operator shall provide notice to any neighbor who may be affected by the variance. The well will be cemented with positive displacement technique to a minimum of one hundred (100) feet to surface or tremie pressure filled to the depth of one hundred (100) feet to surface in accordance with Texas Administrative Code, Title 16, Chapter 76, Rule 17.100.

\_\_\_\_\_  
Property Owner's signature

\_\_\_\_\_  
Date