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REQUEST FOR A VARIANCE FROM HTGCD RULES

Instructions: This form is used for requesting a variance from HTGCD Rules according to HTGCD Rule 14 and shall be filled out as completely as possible.

- Check All ( ) Variance requested for Well Performance Test (Tier 2).
Applicable: (X) Variance requested for Aquifer Tests (Tier 3).
( ) Variance requested for Active Resolutions that specify an allowance for a variance.
( ) Variance requested for Installation of an access tube for the purpose of reporting water levels msrmts.
X Variance to Rule #13.3.3C

Well Inspection: District staff shall inspect each well involved in a variance request. 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: OBRC PROPERTIES, LLC (DRIFTWOOD RECOVERY)
Mailing Address: 1905 ELDER HILL ROAD, DRIFTWOOD, TX 78619
Phone: (512) 759-8328
E-mail Address: pfluor@driftwoodrecovery.com
Contact Person (if other than owner): Peter Fluor Phone: (512) 759-8328

Location, Description, and Uses of Well

Lot or Tract Size: 83.76 acres Directions to Well (or attach location map): See attached

Driller: CenTex Pump & Supply Drilling Date if Known:

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

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

Driftwood Recovery, located at the above address, is an in-patient medical facility providing addiction rehabilitation, treatment and counseling. The demand for patients seeking their services far exceeds their current capacity. Driftwood Recovery is planning to construct new facilities to accommodate 20 additional inpatients plus a Wellness Center, therapy and counseling buildings and renovations to several existing buildings.

To be able to provide adequate potable water to serve this expansion it has been determined that a new well and Public Water System will be required.

A test well was drilled in 2019 that proved up to provide 20 to 25 GPM.

When COVID occurred in 2020 the expansion was put on hold.

The need for the expansion was restarted in late 2021 with building and site plans now complete and submitted to Hays County for review and approval.

The plan is to start building construction in late March / early April of this year, provided site and building permits are approved by then. The current HTGCD moratorium on new wells would cause this expansion to again be halted until Driftwood Recovery can be assured they can have an adequate water supply to support their operations. Therefore, this variance is "mission critical" to their plans. If a meeting would be helpful to further explain Driftwood Recovery's needs their executive personnel can be available at HTGCD's convenience.

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

- ( ) Copy of District Well Registration Form
- ( ) Copy of District Operating Permit
- (x) 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.
- (x) Other Copy of Driftwood Recovery's medical facility registration

**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

4/3/23  
\_\_\_\_\_  
Date

<p><b><u>To Be Completed by District Personnel Only</u></b></p> <p>Registration #: _____ State or Temp. Well #: _____ Status: ( ) Exempt ( ) Non-exempt</p> <p style="text-align: center;"><b><u>Variance Determination</u></b></p> <p>Staff Analysis of Variances Requested: _____ _____ _____</p> <p>( ) Variance will be contained entirely on well owner's property. A waiver or easement from an adjoining property owner is not required. Comments: _____ _____ _____</p> <p>( ) 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: _____ _____ _____</p> <p>( ) Waiver or easement filed with County Clerk's Office. Comments: _____ _____ _____</p> <p>Other Comments: _____ _____ _____</p> <p>Date Application was Administratively Complete: _____ ( ) 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: _____</p> <p>Signed by: _____ Date: _____</p>
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