### POST OAK SAVANNAH GROUNDWATER CONSERVATION DISTRICT (POSGCD) Permit Application to Drill or Alter and Operate a Non-Exempt Well

Return this completed form to: POSGCD, PO Box 92 (310 East Ave. C), Milano, TX 76556 Phone: 512-455-9900 FAX: 512-455-9909 Email: admin@posgcd.org Please type or print legibly. Incomplete applications will be returned to applicant.
Application Date: <u>5-10-24</u> Date received by POSGCD Well Number: <u>Po-012194</u> Assigned by POSGCD
Date received by POSGCD Assigned by POSGCD
PURPOSE FOR THIS APPLICATION (Choose one)
New well If other than New Well, please explain purpose briefly:
O Replacement well
O Alter an existing well
O Operate an existing well
O Other
SECTION 1: APPLICANT
Name: <u>High and Branch LLC</u> Phone: <u>512-848-4826</u>
Mailing Address: <u>8575 F. F.M. 485</u>
City: <u>Cameron</u> State: <u>11</u> Zip: <u>76520</u>
Email: billy a greaterland Partners, con
Are you requesting a partial exemption under Post Oak Savannah GCD Rule 7.10?
•
If yes, please cite applicable rule, or explain
SECTION 2: AUTHORIZATION TO DRILL
Has any part of the water rights of the property for this well been leased, sold, or transferred? 🔲 Yes 🗹 No
If yes, or if the name and address of the property owner is different than the person shown in Section 1, please complete this section and attach affidavit of authorization to drill and produce groundwater, as per Rule 7.4.4(b).
Name: Phone: Phone:
Mailing Address:
City: State: Zip:
Is the affidavit of authorization to drill and produce groundwater attached?



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#### **SECTION 3: REQUIRED FEE**

If the applicant intends to drill a new well, increase the size of an existing well, increase the size of a pump on an existing well, or replace a permitted well, then a **\$100 NON-REFUNDABLE FEE PER EXISTING, OR PROPOSED WELL** must accompany this application. If the applicant intends to drill a new well, or use an existing well for the intended purpose of **FRAC USE**, then a **\$300 NON-REFUNDABLE FEE PER EXISTING, OR PROPOSED WELL** must accompany this application. The applicant may be required to submit any additional information identified by the board during the permitting process as reasonably required or beneficial to the Districts' decision. Additional funds may be required from the applicant, if necessary, to complete the District's cost of processing the application. A part of **\$25.00 will be assessed for all "returned" checks.** 

SECTION 4: PURPOSE FOR WA	ATER USE
Primary Use: - Select One - Road Construction Secondary Use: _	Exerpt/Donestie
If Other, please explain:	

List proposed usage of water produced from well and the amount of usage, including conjunctive use.

Use:	Amount Used:	gallons/day
Use:	Amount Used:	gallons/day
Use:	Amount Used:	gallons/day
Total Amou	nt to be Used:	gallons/day
Proposed rate at which water will be withdrawn:	40 gallon	s/minute
Aquifer or Formation water is to be withdrawn from:	- Select One - Harper	
The total number of acres that overlies the aquifer of listed above that is contiguous to the well being app	or formation <u>244</u>	_acres
Location of water usage: - Select One -	-	
Total amount of water requested per year:	5Acre-I	Feet (1 acre-foot = 325,851 gallons)
SECTION	5: PLANS AND STUDIES	
Please attach copies of the following plans or studie	es, or indicate:	
Well Closure Plan	an Conservation Plan	Drought Contingency Plan
Aquifer Impact Study Monitoring Plan		
Declaration to abide by all Rules and the Mar	nagement Plan of the District	

\*\* In lieu of submitting these plans, the applicant may declare that he/she will abide by the District's Rules and Management Plan as they pertain to these items.



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	SECTION 6: WELL INFORMATIO	N			
Is the property where this well is or will I	be located within a subdivision or city?	Yes 🛛 No			
If yes, please indicate the name of the s	ubdivision or city:	а			
Well is located in: Burleson Count	y 📝 Milam County				
Physical Address: 8575 EF	M 485, Carreron, TX 7652	0			
Well Coordinates: Latitude:	D. BSIG Longitude:	-96.8208			
Well (Lease) Name:					
Please attach copies of the following sc	hedule or logs, if available:				
Driller's Schedule	Driller's Well Log/Report	Electric Log			
Please fill in table with existing or propo	sed well information:				
Date well drilled:	Driller's Name:	Driller's license number:			
Well depth (feet):	Diameter of hole (inches):	Diameter of pipe (inches):			
Pump set at (Depth of lift in feet): Depth to water (feet): Pump size (horsepower):					
Well Capacity (gallons/minute):	Pump power source:	Type of pump:			
Request for well to be aggregated with other wells? Yes VNo					
If yes, please list wells (by District ID or	Permit number):				

#### SECTION 7: QUALIFICATION FOR WELL ASSISTANCE

I acknowledge, by initialing, that I have been made aware of the Driller's Guidance Document and the qualifications for participation in the District's Groundwater Well Assistance Program (GWAP) and fully understand my responsibility as the applicant for this water well. I understand that the Driller's Guidance Document and its by-products are a recommendation and not a requirement. I further understand, that by not following the recommendations, this water well may not meet qualifications of the GWAP.

#### **SECTION 8: ATTACHMENTS**

Please indicate all attachments included with this application. REQUIRED items shall be included for this application to be complete.

Property Description or Deed (REQUIRED)	Map or Plat of property (REQUIRED)
Map showing location and spacing (REQUIRED)	Affidavit of Authorization to Drill
Variance of Well Spacing	Groundwater Lease or similar documentation
List of Oil and/or Gas wells to be Fractured (FRAC	USE ONLY – REQUIRED)
POSGCD FORM 2001 Permit Application to Drill or Alter and Operate a Non-Exe 12/28/2022	empt Well

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#### **SECTION 9: AFFIRMATION AND EXECUTION**

I certify that all statements and information in this application are true and correct. If the name and address in Section 3 of this application is different than that in Section 1, I also certify that I have authorization to act on behalf of the person(s) in Section 2 and that I also have authorization to produce groundwater from this well. I further declare that all groundwater withdrawn will be put to beneficial use at all times. If I have chosen the Declaration option in Section 6, I here by declare that I will abide by all Rules and the Management Plan of the District according to the District's Rule 7.4.4 D, F, G, and H concerning these items.

Signature of Applicant

THE STATE OF TEXAS COUNTY OF \_\_\_\_\_\_\_

This instrument was acknowledged before me on (date) May 10, 2024

by (applicant) Billy Wright

MICHAEL REDMAN Notary Public, State of Texas Comm. Expires 07-25-2026 Notary ID 131655582

alth

Notary Signature



Property Details					
Account					
Property ID:	26335	Geographic ID: A027-121-003-00			
Туре:	Real	Zoning:			
Property Use:		Condo:			
Location					
Situs Address:	8575 E FM 485 CAMERON, TX 7	6520			
Map ID:		Mapsco:			
Legal Description:	A0270 HARRIS, WILLIAM E.,244.71 ACRES				
Abstract/Subdivision:	A0270 - HARRIS, WILLIAM E.				
Neighborhood:					
Owner					
Owner ID:	10048640				
Name:	HIGHLAND BRANCH LLC				
Agent:	,				
Mailing Address:	96 BEACH WALK BLVD SUITE 12 CONROE, TX 77304	216			
% Ownership:	100.0%				
Exemptions:	For privacy reasons not all exemp	tions are shown online.			

## Property Values

Improvement Homesite Value:	\$0 (+)
Improvement Non-Homesite Value:	\$0 (+)
Land Homesite Value:	\$0 (+)
Land Non-Homesite Value:	\$0 (+)
Agricultural Market Valuation:	\$1,358,140 (+)
Market Value:	\$1,358,140 (=)
Agricultural Value Loss: 😧	\$1,317,650 (-)
Appraised Value:	\$40,490 (=)
Homestead Cap Loss: 😧	\$0 (-)
Assessed Value:	\$40,490
Ag Use Value:	\$40,490

### VALUES ARE PRELIMINARY AND SUBJECT TO CHANGE.

Information provided for research purposes only. Legal descriptions and acreage amounts are for appraisal district use only and should be verified prior to using for legal purpose and or documents. Please contact the Appraisal District to verify all information for accuracy.

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## Property Taxing Jurisdiction

## Owner: HIGHLAND BRANCH LLC %Ownership: 100.0%

Entity	Description	Tax Rate	Market Value	Taxable Value
CAD	County Appraisal District	0.000000	\$1,358,140	\$40,490
ESD#1	MILAM COUNTY ESD #1	0.000000	\$1,358,140	\$40,490
GMC	MILAM COUNTY	0.613200	\$1,358,140	\$40,490
SCA	CAMERON I S D	1.021300	\$1,358,140	\$40,490
Total Tax	Rate: 1.634500			

## Property Land

Туре	Description	Acreage	Sqft	Eff Front	Eff Depth	Market Value	Prod. Value
IPP1	IMP PASTURE 1	200.0000	8,712,000.00	0.00	0.00	\$1,110,000	\$37,130
NPP1	NATIVE PASTURE	44.7100	1,947,567.60	0.00	0.00	\$248,140	\$3,360

# Property Roll Value History

Year	Improvements	Land Market	Ag Valuation	Appraised	HS Cap Loss	Assessed
2024	\$0	\$1,358,140	\$40,490	\$40,490	\$0	\$40,490
2023	\$0	\$1,957,680	\$32,710	\$32,710	\$0	\$32,710
2022	\$0	\$611,780	\$33,690	\$33,690	\$0	\$33,690
2021	\$0	\$611,780	\$32,770	\$32,770	\$0	\$32,770
2020	\$0	\$434,130	\$10,480	\$10,480	<b>\$</b> 0	\$10,480
2019	\$0	\$434,130	\$10,430	\$10,430	<b>\$</b> 0	\$10,430
2018	\$0	\$672,000	\$52,990	\$52,990	\$0	\$52,990
2017	\$0	\$649,600	\$52,310	\$52,310	\$0	\$52,310
2016	\$0	\$582,400	\$55,490	\$55,490	\$0	\$55,490
2015	\$0	\$448,000	\$35,660	\$35,660	\$0	\$35,660
2014	\$0	\$448,000	\$33,070	\$33,070	\$0	\$33,070

## Property Deed History

Deed Date	Туре	Description	Grantor	Grantee	Volume	Page Number
4/15/2024	GWD	GENERAL WARRANTY DEED	SKILES CLIFFORD III & JENNIFER	HIGHLAND BRANCH LLC	2024	1355
10/30/2020	WD	WARRANTY DEED	TEXCRETE OPERATIONS LLC	SKILES CLIFFORD III & JENNIFER	2020	4443
12/12/2019	WDV	WARRANTY DEED WITH VENDORS LIEN	SALVATO JOE	TEXCRETE OPERATIONS LLC	2019	4663
11/19/2018	WDV	WARRANTY DEED WITH VENDORS LIEN	ATKINSON EMILY ET AL	SALVATO JOE	2018	18035
4/26/2013	AH	AFFIDAVIT OF HEIRSHIP	ATKINSON H L ESTATE	ATKINSON EMILY ET AL		

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### ATKINSON H L PROBATE #4058 ESTATE