

# POST OAK SAVANNAH GROUNDWATER CONSERVATION DISTRICT (POSGCD)

## Application for Cost Share Assistance in Plugging a Well

**Return this completed form to:** POSGCD, PO Box 92 (310 East Ave. C), Milano, TX 76556  
**Phone:** 512-455-9900 **Email:** [gperry@posgcd.org](mailto:gperry@posgcd.org)  
Please type or print legibly. Incomplete applications will be returned to applicant.

POSGCD Cost Sharing Program: The district will pay 100% of the plugging cost, not to exceed \$3,500.00 for any one well. To be considered the well must have been registered with the district prior to the end of previous year and must meet the State definition of an "abandoned well". Funds for this program are limited. Financial need will be considered in reviewing applications. Please call the District office with any questions or for assistance in filling out this form.

POSGCD Certificate #	State Well # (if available)	Application Date	Date Received
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### Well Owner

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
(First, Middle, Last)  
Address: \_\_\_\_\_ Email: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Contact person if other than owner: \_\_\_\_\_  
Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

### Well Information (POSGCD can assist with this Section)

Well location (*directions to well site from nearest state or federal highway*):

Begin at \_\_\_\_\_ and then go \_\_\_\_\_  
and then go \_\_\_\_\_ and then go \_\_\_\_\_  
and then go \_\_\_\_\_ and then go \_\_\_\_\_

Well is located in: Milam County Burleson County Is well still in use? \_\_\_\_\_

**\*\*Please attach copies of the State of Texas Well Report or Drillers Schedules or Logs, if available:**

If this well is located in a subdivision, please provide name: \_\_\_\_\_

Date well drilled: \_\_\_\_\_ Hand dug or drilled? \_\_\_\_\_

Type of well: Domestic Irrigation Municipal Other \_\_\_\_\_

Aquifer and formation water was drawn from: \_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_ Surface Elevation: \_\_\_\_\_

List equipment remaining in well: \_\_\_\_\_



**POST OAK SAVANNAH GROUNDWATER CONSERVATION DISTRICT (POSGCD)**  
**Application for Cost Share Assistance in Plugging a Well**

**Please provide information to support your request for financial assistance  
in plugging this well**

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(include additional sheets if necessary)

**Affirmation and Execution**

I certify that all statements and information in this application are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Applicant

THE STATE OF **TEXAS**

COUNTY OF \_\_\_\_\_

This instrument was acknowledged before me on (date) \_\_\_\_\_

by (applicant) \_\_\_\_\_

(NOTARY SEAL)

\_\_\_\_\_  
Notary Signature

**Can be notarized in the presence of any Notary of your choice. There is a Notary at the POSGCD office.**

**FOR OFFICE USE ONLY**

Notes: \_\_\_\_\_

Well inspected by: \_\_\_\_\_ Date: \_\_\_\_\_

