

Texana Groundwater Conservation District  
P.O. Box 1098, Edna, Texas 77957  
www.texanagcd.org

# APPLICATION TO REQUEST INCLUSION IN THE AQUIFER MONITORING PROGRAM

Submit this form to request the district conduct aquifer monitoring activities.

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Item 1: Specify the name and address of the person requesting the monitoring:

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Item 2: Specify the name and address of the well owner:

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Item 3: Specify the address or geographic coordinate of the location of the subject well:

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

Latitude: \_\_\_\_\_ N, Longitude: \_\_\_\_\_ W

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Item 4: Details regarding the preferred method of Contact (phone, text, email, regular mail):

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Item 5: Certification of Request

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision; the information submitted is, to the best of my knowledge and belief, true, accurate and complete.

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Signature of the Applicant

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Date of Signature