

# Texas Department of License and Regulation

Water Well Driller/Pump Installer Program  
P.O. Box 12157 Austin, Texas 78711 (512)463-7880 FAX (512)463-8616  
Email address: [water.wells@license.state.tx.us](mailto:water.wells@license.state.tx.us)

This form must be completed and filed with the department within 30 days following the plugging of the well.

## PLUGGING REPORT

### A. WELL IDENTIFICATION AND LOCATION DATA

#### 1) OWNER

Name Shirley Bailey Address 1900 Sager Rd City Rockdale State Tx. Zip 76567

#### 2) WELL LOCATION

County MILAM Physical Address 800 N. Wilcox City Rockdale State Tx. Zip 76567

3) Owner's Well No. Long. 97° 100' 37" Lat. 30° 39' 41.9" Grid #

4) Type of Well ☒ Water ☐ Monitor ☐ Injection ☐ De-Watering 5) NT

Drill, Pump Installer, or Landowner performing the plugging operations must locate and identify the location of the well within a specific grid on a full scale gridded map available from Texas Natural Resource Information Service. The location of the well should be denoted within the grid by placing a corresponding dot in the square to the right. The legal description is optional.

### B) HISTORICAL DATA ON WELL TO BE PLUGGED (if available)

6) Driller NOT KNOWN License No. —

7) Drilled 1 8) Diameter of hole — inches 9) Total depth of well 102.2 feet.

### C. CURRENT PLUGGING DATA

10) Date well plugged 2/13/02 11) REMOVE ALL REMOVEABLE CASING

Please check box beside the method of plugging used

- ☒ Tremmie pipe cement from bottom to top.  
☐ Tremmie pipe bentonite from bottom to 2 feet from  
From surface, cement top 2 feet.  
☐ Pour in 3/8 bentonite chips when standing water in  
well is less than 100 feet depth, cement top 2 feet.  
☐ Large diameter well filled with clay material from  
top to bottom.

12) Name of Driller/Pump Installer or Well Owner performing the plugging  
William T. Holomon

License No. 54448I

#### 13) CASING AND CEMENTING DATA RELATIVE TO THE PLUGGING OPERATIONS CASING LEFT IN WELL

DIAMETER (inches)	FROM (feet)	TO (feet)
<u>4</u>	<u>- 3</u>	<u>102</u>

#### CEMENT/BENTONITE PLUG(S) PLACES IN WELL

FROM (feet)	TO (feet)	SACKS
<u>SURFACE</u>	<u>102</u>	<u>8</u>

#### COMMENTS

### D. VALIDATION OF INFORMATION INCLUDED IN FORM

I certify that I plugged this well (or the well was plugged under my supervision) and that all of the statements herein are true and correct. I understand that failure to complete items 1 through 13 will result in the report(s) being returned for completion and resubmitted.

Company or individual's Name (type or print) BRIEN WATER WELLS

Address Rt. 1 Box 702 City HEARNE State Tx. Zip 77859

Signature William T. Holomon Date 2/20/02 Signature   Date    
Licensed Driller/Pump Installer Apprentice

14  
MORRIS

Section 32.005 of the Texas Water Code, concerning confidentiality information in the Reporting of Well Reports, reads as follows:

Every licensed driller drilling, deepening, or otherwise altering a water well in this state shall make and keep a legible and accurate well log in accordance with department rule on forms prescribed by the department. Not later than the 60th day after the completion or cessation of drilling, deepening, or otherwise altering the well, the licensed driller shall deliver or transmit by certified mail a copy of the well log to the department, the Texas Natural Resource Conservation Commission, and the owner of the well or the person for whom the well was drilled. The well log shall be recorded at the time of drilling and must show the depth, thickness, and character of the strata penetrated, the location of water-bearing strata, the depth, size, and character of casing installed, and any other information required by department rule. The department shall hold the contents of the well log confidential and not a matter of public record if it receives, by certified mail, a written request to do so from the owner or the person for whom the well was drilled.

The last sentence specifies the means whereby you may, if you wish, assure that logs of your wells will be kept confidential.

[illegible]

CITY OF ROCKDALE  
PERMIT APPLICATION FOR  
PRIVATE WATER WELL

PAGE 1

PROPERTY OWNER NAME (PRINTED) <b>Shirley &amp; Adrian Bailey</b>	DATE: <b>1/31/02</b>
SIGNATURE <i>Adrian W. Bailey</i> <i>Shirley Bailey</i>	ADDRESS <b>1900 Sager Rd.</b> <b>Rockdale, IL 60567</b> PHONE NUMBER <b>512-446-6596</b>

PURPOSE OF THE WELL PERMIT:

- |                                      |  |                                 |
|--------------------------------------|--|---------------------------------|
| <input type="checkbox"/> DRILLING    | <input type="checkbox"/> CONSTRUCTION        | <input type="checkbox"/> REPAIR |
| <input type="checkbox"/> ABANDONMENT | <input checked="" type="checkbox"/> PLUGGING |                                 |

DETAILED LOCATION SKETCH OF WELL SITE MUST BE INCLUDED WITH APPLICATION

**WELL SITE LOCATION**

STREET ADDRESS: <b>800 N. Wilcox</b>	<b>800 N. Wilcox</b>
SUBDIVISION, BLOCK & LOT: <b>Wm. Mitchell Survey</b> <b>A-263</b>	<b>Wm. Mitchell Survey A-263</b>
ESTIMATED DEPTH:	<b>est. 110 ft.</b>
ESTIMATED PUMPING RATE (GPM)	
EST. WATER TO BE PUMPED DAILY (GALLONS)	<div style="text-align: right;">             _____ gpm X 60 min X _____ hrs = _____ Gals/Day           </div>
(Use Example for Formula)	
ESTIMATED WATER TO BE PUMPED ANNUALLY (GALS)	<div style="text-align: right;">             _____ Gals/Day X _____ Days = _____ Gals/Year           </div>
(Use Example for Formula)	

USE OR USES FOR WATER PRODUCED: \_\_\_\_\_

PROPOSED METHOD OF DRILLING OR CONSTRUCTION: \_\_\_\_\_

PROPOSED METHOD OF REPAIR AND CORRECTION: \_\_\_\_\_

KIND OF EQUIPMENT TO BE USED: \_\_\_\_\_

METHOD OF ABANDONMENT AND PLUGGING: \_\_\_\_\_

**CONTRACTOR(S):**

NAME: <b>BRYAN DRILLING</b>	NAME: _____
ADDRESS: _____	ADDRESS: _____
STATE/ZIP: <b>Houston, TX</b>	STATE/ZIP: _____
PHONE: _____	PHONE: _____
*LICENSE NUMBER: _____	*LICENSE NUMBER: _____

\*AS ISSUED BY TEXAS WATER WELL DRILLERS BOARD

NOTE ADDITIONAL REQUIREMENTS - PAGE 3

UPON COMPLETION OF WORK STATED ABOVE, PROPERTY OWNER SHALL FURNISH TO THE CITY OF ROCKDALE THE FOLLOWING INFORMATION:

DATE WORK STARTED: \_\_\_\_\_

DATE WORK COMPLETED: \_\_\_\_\_

WATER WELL DRILLER:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_

LIST OF CONTRACTORS:

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_

DEPTH OF WELL \_\_\_\_\_ DIAMETER OF WELL \_\_\_\_\_

DEPTH OF PUMP \_\_\_\_\_

PUMPING RATE (GPM) \_\_\_\_\_

PURPOSE OF THE WELL \_\_\_\_\_

DATE OF ABANDONMENT \_\_\_\_\_

COMPLETE LOGS OF ALL NEW WELLS - SHOW DEPTH TO AQUIFER THROUGH ALL GEOLOGIC FORMATIONS ENCOUNTERED

STATEMENT FROM WATER WELL DRILLER (CONTRACTOR) THAT ALL WORK WAS DONE IN ACCORDANCE WITH TNRCC AND WATER WELL DRILLING BOARD SPECIFICATIONS

UPON FINAL INSPECTION AND ACCEPTANCE, THE CITY WILL REVIEW PERMIT FEES CHARGED AND MAKE ADJUSTMENTS IF NECESSARY