

Affidavit of Ownership or Lease of Section(s) or Portions of Section(s)

State of Texas, County of Ground Water Right Owner/Lessee Name: (Please attach filed deed or water right lease)			
		Mailing Address:	
		Cell Phone:	
Email:			
An Agent Authorization form may be	required for permitting, joining or reclassification of wells		
Desc	ription of Property		
Section:	Portion of Section Owned:		
Block:			
Survey:			
Acres:	(Attach additional pages if needed)		
Date of Possession :	Length of Lease (if applicable):		
Signature:	Date:		
	STRICT USE ONLY		
Received Date: Verified and entered by:			
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Old GPU:	New GPU:		