

Control Number: 52299



Item Number: 939

Project 52299 Compliance
Texas Water code (TWC) 13.1596



Pickton Water Supply Corp.
PWS#1120018

Manager: Alondra Ledesma

Contact information:

Mailing: P.O BOX 127 /Physical: 40 County Rd 2419
Pickton, TX 75471

Phone: 903-866-300 Cell 903-952-3337

Fax: 903-866-3002

Email: pickton_watersupply@yahoo.com

Field Operators: Contracted with Cypress Springs SUD/ Kevin
Spence Manager

Contact information:

Mailing: PO Box 591/ Physical: 114 Farm Road 115,
Mt. Vernon, TX 75457

Phone: 903-588-2081 Cell 903-588-0981

Fax: 903-588-2085

Email: kevin@cssud.org

Pickton WSC owns three water wells, alternates two wells. One is for
back up.

Locations

Well #1 South Well 1 mile south of HWY 11 on FM 269 Pickton TX
75471.

Water Well-coordinates 33.014672, -95.394999.

Under Critical Load Status with Farmers Electric Cooperative.

Well #2 North Well @water tower Generator available.

10400 FM 269 S Pickton TX 75471

Water Well-coordinates 33.024349, -95.393943

Under Critical Load Status with Southwestern Electric power
Company.

Well # 3 CR 2415 Pickton TX 75471

Water Well-coordinates 33.017319, -95.406307

Under Critical Load Status with Farmers Electric Cooperative.

RE [EXTERNAL] Critical Load Status

From: Doyal B Reed (dbreed1@aep.com)
To: cornersvillewsc@yahoo.com
Date: Tuesday, October 25, 2021, 05:44 PM CDT

Thank you for sending the information regarding your facilities. SWEPCO is reviewing what you've provided and will prioritize those facilities appropriately on our system. Please understand this does not constitute a guarantee of uninterrupted supply of electric service. I'll contact you if additional information is needed.

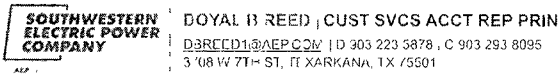
Alondra

I have verified and coded the accounts that needed to be coded. All accounts below are now coded as P2.

Would you please make sure that our P1-P5 designations are correct?

Please let me know if you need any additional information.

Thank you!



From: Cornersville WSC <cornersvillewsc@yahoo.com>
Sent: Tuesday, October 26, 2021 11:32 AM
To: Doyal B Reed <dbreed1@aep.com>
Subject: [EXTERNAL] Critical Load Status

[EXTERNAL] Critical Load Status

Hello,

Per our phone conversation this is the list of the accounts we need to be added to your Critical Load Status

Cornersville Water Supply Corp

Act #960-327-282-0-4 / 911 address 19525 Hwy 11 E Winnsboro Tx, 75494

Act #968-998-282-0-4 / 911 address 2425 CR 2391 Winnsboro TX 75494

Act #962-003-382-0-8 / 911 address 2425 CR 2391 Winnsboro Tx, 75494

Act# 960-606-282-0-1 / 911 address 3204 CR 2393 Winnsboro Tx, 75494

Well #2

Pickton Water Supply Corp.

Act #965-413-382-0-6 / *911 address* 10400 FM 269 S Pickton Tx, 75471

Please let me know if there is further information needed

Thank you for your time!

Alondra Ledesma
General Manager, Cornersville WSC
(903)866-3000 | cornersvillewsc.com
cornersvillewsc@yahoo.com
P.O. Box 127, or 40 CR 2419N Pickton, Tx, 75471

Well #2



Application for Critical Load Industrial Customer (Non-Residential) Status

The criteria for qualification as Critical Load Public Safety or Critical Load Industrial are provided in the Public Utility Commission of Texas Substantive Rule 25.497 *Designation of critical load does not guarantee an uninterrupted supply of electricity.* It is the responsibility of the Member to make arrangements for alternative sources of electric power should a localized outage or load shed event occur.

Service Address Information *Please note that one application per Meter Number must be submitted*

Member Name Associated with the Account Number:* Account Number:
PICKTON WATER SUPPLY 8829400

Meter Number.*
901194

Street. (if street address is unavailable, please provide nearby roadway, and/or distance to the closest town).
Or enter Latitude/Longitude below (if entering Latitude/Longitude, please enter 'N/A' here)*

FM 269

Latitude/Longitude (if known).

33.014676, -95.394999

City:* Zip Code.*
PICKTON, TEXAS 75471

Facility Type & Description

Please select the type of facility:

Water - Well



If 'Other' is selected please describe the facility in detail in the box below

Describe the specific public safety issue that may result from an interruption of normal power service:

Disruption of water service to the public.

Describe any existing battery or backup capacity (required)*

None

Battery Backup Back up capacity (kW)

Backup Generation Back up capacity (kW)

If applicable, is the Backup generation Tier 4?

Yes No

Length of time the facility can operate without electricity from the electric utility: 12 hrs

Length of time required for start-up following a power outage:

Well # 1

Submitter's Contact Information (Primary Contact)*

Email Address: pickton_watersupply@yahoo.com
First Name: Alondra
Last Name: Ledesma
Phone Number: (903)866-3000

Submitter's Contact Information (Alternate Contact)*

Email Address: Kevin@cssud.org
First Name: Kevin
Last Name: Spence
Phone Number: (903)588-2081

Member Mailing address.

Street:*	City:*
P.O BOX 127	PICKTON
State:*	Zip:*
TEXAS	75471

Please submit the filled application to criticalload@farmerselectric.coop



Application for Critical Load Industrial Customer (Non-Residential) Status

The criteria for qualification as Critical Load Public Safety or Critical Load Industrial are provided in the Public Utility Commission of Texas Substantive Rule 25.497 *Designation of critical load does not guarantee an uninterrupted supply of electricity.* It is the responsibility of the Member to make arrangements for alternative sources of electric power should a localized outage or load shed event occur.

Service Address Information *Please note that one application per Meter Number must be submitted*

Member Name Associated with the Account Number:* Account Number.*
PICKTON WATER SUPPLY 3357701800

Meter Number.*
900588

Street. (if street address is unavailable, please provide nearby roadway, and/or distance to the closest town).
Or enter Latitude/Longitude below (if entering Latitude/Longitude, please enter 'N/A' here)*

COUNTY ROAD 2415

Latitude/Longitude (if known).

33.017319, -95.406307

City:* Zip Code:*
PICKTON, TEXAS 75471

Facility Type & Description

Please select the type of facility

Water - Well



If 'Other' is selected please describe the facility in detail in the box below

Describe the specific public safety issue that may result from an interruption of normal power service:

Disruption of water service to the public.

Describe any existing battery or backup capacity (required)*

None

Battery Backup Back up capacity (kW)

Backup Generation Back up capacity (kW)

If applicable, is the Backup generation Tier 4?

Yes No

Length of time the facility can operate without electricity from the electric utility: 12 HRS

Length of time required for start-up following a power outage:

Well # 3

Submitter's Contact Information (Primary Contact)*

Email Address: pickton_watersupply@yahoo

First Name: Alondra

Last Name: Ledesma

Phone Number: (903)866-3000

Submitter's Contact Information (Alternate Contact)*

Email Address: kevin@cssud.org

First Name: Kevin

Last Name: Spence

Phone Number: (903)588-2081

Member Mailing address:

Street:*

P.O BOX 127

State.*

TEXAS

City:*

PICKTON

Zip.*

75471

Please submit: the filled application to criticalload@farmerselectric.coop