



DISTRICT USE ONLY	
GPU # _____	
METER ID # _____	

Metering Method Form

Owner / Agent Name	Contact Name <i>(if Owner / Agent is a business or Trust)</i>	Email
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Address	City	ST	Zip	Phone
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Well Location: District Well # _____ County _____ Quarter _____
 Section _____ Block _____ Survey _____

Flow meters are required for all wells drilled after October 14, 2003.

Instructions: Select a metering method and complete **all** requested information.

Flow Meters

Location of Meter: at Well _____ at Pivot _____ Pivot Location *(if at Pivot)* _____

Meter Brand: _____ Meter Serial #: _____

Current Totalizer *(Reading)*: _____ Date of Totalizer Reading: _____

Totalizer Units *(Gallons, Acre-Feet, or Acre-Inches)*: _____ Multiplier: _____

OR

Alternative Metering Method

___ Center Pivot Delivery / Third Party Monitoring System *(e.g. PivoTrac, FieldNET, WagNet, etc)*
 Monitoring System: _____ Nozzle Pkg: _____ gpm

___ Center Pivot Delivery / Nozzle Package and hour meter Nozzle Pkg: _____ gpm

___ Center Pivot Delivery / Certified GPM and hour meter Nozzle Pkg: _____ gpm
 Current Hour Meter Reading: _____

___ Energy Usage *(choose one)*: Natural Gas _____ or Electricity _____
 Energy Supplier: _____ Meter Serial #: _____

Meter Location: _____

Failure to provide all required information or supply copies of the third party monitoring system's printout, a copy of the nozzle package or certified flow test, or all of the natural gas or electric invoices constitutes abandonment of the alternative metering method, and the District will require the well owner to report groundwater production by a flow meter or other alternative metering method.

I hereby certify that the information contained herein is true, accurate, and correct.

Owner / Agent Signature	Date
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