

DO NOT  
STAPLE

**UPPER TRINITY GROUNDWATER CONSERVATION DISTRICT**

Phone: 817-523-5200 | Toll Free: 877-38UTGCD (877-388-8423) | Fax: 817-523-7687

Mailing Address: UTGCD, P.O. Box 1749, Springtown, TX 76082

Office Address: 1859 W. Hwy. 199, Springtown, TX

**2019 ENTITY PRODUCTION REPORT**

Instructions: Complete one form for each well. Sign form and return to Upper Trinity GCD with fees due.

1. Name of Registrant: \_\_\_\_\_ Well ID Number: \_\_\_\_\_

2. Reporting period beginning meter reading (as displayed on meter): \_\_\_\_\_ Date: \_\_\_\_\_

Reporting period ending meter reading (as displayed on meter): \_\_\_\_\_ Date: \_\_\_\_\_

*Note: If your meter dial has a constant "0" or "00" located next to the rolling numbers, these zeros should be read as part of your total reading.*

3. 2018 Groundwater Withdrawal: Report the amount of groundwater withdrawn for each month in gallons, not barrels or the meter readings (although monthly meter readings shall be available for inspection by the District during reasonable business hours). Example: Meter displays 200,110 on January 1. On February 1, meter displays 201,200. January's monthly use in gallons would be 1,090.

**GROUNDWATER PRODUCTION**

JAN:	APR:	JUL:	OCT:
FEB:	MAY:	AUG:	NOV:
MAR:	JUN:	SEPT:	DEC:
Total For Reporting Period (In Gallons)=			

4. Water was used for (circle one):

(1)Public Water Supply      (2)Drilling or Oil & Gas Production      (3)Commercial/Small Business

5. Is it in a Well System? Yes \_\_\_\_\_ No \_\_\_\_\_ Other wells in system: \_\_\_\_\_

6. Please provide an estimate of the total quantity of water lost that is attributable to system loss: Gallons or percentage of total annual production lost (for each well): \_\_\_\_\_

Sources of system losses: \_\_\_\_\_

Method(s) employed to address the system losses: \_\_\_\_\_

Gallons of groundwater used by fire department or emergency services district (attach UTGCD's Emergency Use Water Report) \_\_\_\_\_

7. Location of the use of the water (circle one):      (1) Onsite      (2) Offsite w/in District      (3) Out of District

8. Was the water sold on a retail or wholesale basis? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, name of person to whom it was sold \_\_\_\_\_; Quantity sold to each person \_\_\_\_\_ (attach additional sheets as necessary)

9. How did you measure the water used in the Groundwater Production chart in No. 3?

(1) Water Meter      (2) Multiple Water Meters      (3) Estimate

10. Was any of this water transported for use outside of Montague, Parker, Wise, and Hood counties?

Yes \_\_\_\_\_ No \_\_\_\_\_ (If no, go to No. 11)

If yes, explain and complete chart below (include amount transported): \_\_\_\_\_

**GROUNDWATER TRANSPORTED**

JAN:	APR:	JUL:	OCT:
FEB:	MAY:	AUG:	NOV:
MAR:	JUN:	SEPT:	DEC:
Total For Reporting Period (In Gallons)=			

Did you use any surface water? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please write the amount and the purpose for which it was used \_\_\_\_\_.

**FEE CALCULATIONS**

11. To calculate water use fees, groundwater transport fees, and/or emergency use fees, please use the formulas below:

**WATER USE FEES:** \_\_\_\_\_ total gallons of groundwater (from Question 3) at a rate of \$0.22 per 1,000 gallons = \$ \_\_\_\_\_.

**TRANSPORT FEES:** \_\_\_\_\_ total gallons of groundwater transported from District (from Question 10) at a rate of \$0.11 per 1,000 gallons = \$ \_\_\_\_\_. (Add this \$ amount to payment.)

**EMERGENCY USE EXEMPTION:** \_\_\_\_\_ total gallons of groundwater used for Emergency Services (from Question 6) at a rate of \$0.22 per 1,000 gallons = \$ \_\_\_\_\_. (Subtract this \$ amount from payment.)

**TOTAL DUE FOR REPORT:** \$ \_\_\_\_\_

**AFFIRMATION**

12. I hereby swear or affirm that the information included in this report is true and correct to the best of my knowledge.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Phone: \_\_\_\_\_

Print Name: \_\_\_\_\_

E-mail: \_\_\_\_\_