OMB Approval No.1006-0014
Expiration Date: XX/XX/2028

Lower Colorado River Well Inventory

Site ID: _____ Date: _____ Time (MST): _____ Agency: _____ Collected by:_____

Site Name: _____ Land Net: _____ 1/4 _____ 1/4_____ 1/4 Section_____ Township_____ Range_____ State: _____

Other identifier or markings: _____ GPS file name: _____ County: _____

Data reliability: C (field checked) L (poor location) M (minimal data) U (unchecked) Agency use: O District code: 04 Station type: _____

Outer casing ID: _____ in. Material: _____ Inner casing ID: _____ in. Material: _____

Outer casing ht. above land surface (LS):_____ft Distance between tops of inner and outer casings:_____ft

Describe reference point for LS: _____

Condition of well: _____

Type of power: _____ Motor brand: _____ Serial no.: _____ HP: _____

Power meter no.: _____ Power company: _____

Type of pump: _____ Diameter of discharge pipe: _____ in. Flow rate: _____cfs / gpm Method of meas: _____

Photograph no. _____, view toward _____, showing _____

Photograph no. _____, view toward _____, showing _____

_____ft _____ from power pole no._____; _____ft _____ from stop sign; _____ ft _____from street sign; _____ft ____from canal

_____ft _____ from _____; _____ft _____ from _____

Additional location information: _____

_____

_____

Water level (WL) *required outside flood plain above Laguna Dam*

Tape Held: _____ft WL measurement method: _____

WL Cut: _____ft Measuring point (MP) description: _____

WL below MP: _____ft _____

MP height above LS: _____ft TD below MP: _____ft

WL below LS: _____ft TD below LS: _____ft

Status of nearby fields, pumps, canals, etc.: _____

Site status for WL:_____ Source of WL other than measured:_____

D (dry)	G (nearby flowing)	J (injector site monitor)	P (pumping)	T (nearby recently pumped)	X (surface-water effects)
E (recently flowing)	H (nearby recently flowing)	N (measurement discon.)	R (recently pumped)	V (foreign substance)	
F (flowing)	I (injector site)	O (obstruction)	S (nearby pumping)	W (well destroyed)	Z (other)

Use of site (*list all that apply in order of use*):_____

A (anode)	E (geothermal)	M (mine)	R (recharge)	U (unused)	Z (destroyed)
C (standby emerg.)	G (seismic)	O (observation)	S (repressurize)	W (withdrawal)	
D (drain)	H (heat reservoir)	P (oil or gas)	T (test)	X (waste)	

Uses of water (*list all that apply in order of use*):_____

A (air cond., comm.)	E (power generation)	J (industrial cooling)	N (industrial other)	R (recreational)	U (unused)
B (bottling)	F (fire fighting)	K (mining)	P (public supply)	S (stock watering)	Y (desalination)
C (commercial)	H (domestic)	M (medicinal)	Q (aquaculture)	T (institutional)	Z (other- explain)
D (dewatering)	I (irrigation)				

Domestic only: number of single family residences: _____; number of multifamily residences: _____ Swimming pool: yes / no_____

Stock only: number: _____; type: _____ *Irrigation only:* number of acres served by this well:_____ ; other source of irrigation water: _____

Disposal of unconsumed portion of pumped water (*list all that apply*): _____

ST (septic tank)	SS (sewer system)	EP (evaporation pond)	SR (surface return to river)	PS (percolation into soil)	OT (other-explain)

If sewer system used, include name of municipality operating it: _____

Property owner's name (*last, first, m.i.*):_____

Property owner's phone number: _____ Date property acquired:_____

Property owner's complete mailing address:_____

Street address of well: _____

Well operator's name (*last, first, m.i.*): _____

Well operator's phone number: _____ Date operation began:_____

Well operator's complete mailing address:_____

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Original well owner: _____ Date well completed:_____

Annual volume pumped (acre-feet, gallons, cubic meters); (measured, estimated): _____

Is well within the service area of a water supplier?: ____ Name/address of water supplier:_____

Well permit no.: _____ Issuing agency: _____

Federal delivery contract name: _____ Assessor's parcel no.: _____

Latitude: _____ UTM Northing:_____m

Longitude:_____ UTM Easting:_____m

Lat/Long. Accuracy:_____ UTM Accuracy: _____m Zone number: 11

Geographic Datum:_____ Location method: _____

Elevation of reference point:_____ Elevation of MP: _____ Elevation method:_____

Description of reference point for elevation:_____

A (Altimeter) C (GPS Differential Correction Geographic) L (Level-conventional survey)

B (GPS Autonomous Geographic) D (GPS Differential Correction Geodetic) M (Map)

If Map: Map name: _____ Accuracy: _____ Scale: _____ Altitude of LS: _____ft

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LCRAS field numbers watered by well: _____

_____

_____

Remarks (*additional comments or sketches*): _____

_____

_____

Paperwork Reduction Act Notice

The Colorado River Basin Project Act and the Boulder Canyon Project Act authorize collection of this information. The primary use of this information is to determine the contractual status and consumptive use of Colorado River water from wells. Records of volume of water being pumped, consumptive uses, and point of diversion will be disclosed to interested parties upon written request. Public reporting burden for this form is estimated to average 20 minutes per response, including time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Furnishing the information on this form is required to obtain or retain a benefit. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) control number.