

Mid-East Texas Groundwater Conservation District

101 W. Main, Suite B22
P. O. Box 477
Madisonville, TX 77864

Ph: 936-348-3212
Fax: 936-348-3512
Website: www.metgcd.org

ANNUAL WATER USE REPORT [Rule 3.2*]

Year: _____ Active Wells: _____ County: _____ Aquifer: _____

Date: _____ Company/Utility Name: _____

Mailing Address: _____

Phone#: _____ Fax#: _____

Contact Person: _____ Email: _____

You may email this document to our office at david_metgcd@att.net. Please report, for each month, the gallons produced from each well with a total at the bottom. If you have any questions, please contact David Bailey, General Manager at the phone number above.

Well No. or Name	Well #1	Well#2	Well #3	Well#4	Well #5
Metered in:					
January					
February					
March					
April					
May					
June					
July					
August					
September					
October					
November					
December					
Total **					

Total annual water produced in gallons _____ (all wells)

Please submit this report to the District at the above address before **April 1st** of the year following the production year reported. Pumpage reported must be metered at the well head. If not metered, please provide the alternative method used. You may copy this form if needed for additional wells. Thank you.
****Total annual gallons metered for calendar year for each well. (*METGCD District Rules)**

Signature of Responsible Party

Printed Name

Date