P.O. Box 818 Merced, CA 95341 | contact@miugsa.org | Phone: (209) 677-7462



Groundwater Extraction Facility Registration Form

Any person, owner, or operator who intends to extract water from a groundwater extraction facility ("Well") within the boundaries of MIUGSA is required to register the Well according to the terms, conditions and information required by the MIUGSA. Failure to register a Well, or extraction of water from a Well that has not been registered, may result in fees, fines for other penalties from MIUGSA.

Please fully complete a Groundwater Extraction Facility Registration Form for each Well from which you intend to extract water, and return to the MIUGSA.

Landowner Information	
Contact Name:	
Business Name:	
Address:	
City/State/Zip:	
Phone:	Fax:
Email:	
Operator Information (if different than abo	ove)
Contact Name:	
Business Name:	
Address:	
City/State/Zip:	
Phone:	Fax:
Email:	
Well Information	
Assessor Parcel No. (APN):	-
Well location - Latitude:	Longitude:
Owners Well Name/No.:	
State Well No. (SWN):	
State WCR No.:	





Pumping Level (ft):

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Additional Well Information				
County Well Permit	t: Date Drilled:			
Well Depth (ft):	Manufacturer of Water Meter:			
Casing Diameter (ir	n.): Serial No. of Water Meter:			
Motor/Engine (HP):	Electric Meter No.:			
Top of Perforations:	: Bottom of Perforations:			
Pump Discharge Diameter (in):				
Well Equipment				
Fuel/Power: El	lectric Diesel LP Gas Other:			
Maximum Flow:	Typical Pump Flow if different (GPM):			
Measured:	Estimated:			
Pump Tests (if any)				
Date:				
Ву:	Performed Test Date:			
Manufacturer of Wa	ater Meter:			

Static Level (ft):



Yield (GPM):

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Well Water Use Type

Agricultural Stock Watering (number and type of animals) Domestic (number and type of persons served) Public Municipal

Private Municipal

Industrial

Other (describe)

Supporting Documentation Checklist:

Check to confirm that you have attached a map of the property showing the location of the Well, and clearly identifying parcels that are able to receive water from the Well.

Identify on map crop acreage and whether irrigated or dry farm.

Check to confirm that you have attached a driller's log and. if available, any mechanical log made.





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	I declare that I am authorized the information and statemer knowledge.	d to provide the information requents provided herein are true and c	ovide the information requested in this form, and all covided herein are true and correct to the best of my	
Registrar	ıt			
Signature	of Registrant	Date		

