STAGE GULCH CRITICAL GROUND WATER AREA

Form for Recording Flow Meter and Power Meter Readings*
YEAR: **2022**

Owner:_____Well Location or No.:_____ Well ID: UMAT_____
Flow Meter Serial No.:_____Power Meter Number:_____
Flow Meter Units: **Acre-Feet, Gallons** (circle) Multiply By: **0.001, 0.01, 100, 1000, other**:

DATE	TIME	FLOW METER	POWER METER	COMMENTS

*Record **weekly** when water is used. Copies of monthly power company statements may be substituted for weekly power meter readings. However, if a flow meter is broken, the power meter must be recorded daily as well as the time of the reading and hours of pump operation. **Please note the flow meter units and multipliers, such as gallons X 1000 or acre-feet X 0.01.**

By December 1st, mail or fax this form to:

FAX: (503) 986-0902

Oregon Water Resources Department
Attn: Michael Thoma
725 Summer Street NE, Suite A
Salem, OR 97301