



208 Kimberly Dr | Cleburne, TX 76031 | Ph: 817-556-2299 | Fax: 817-556-2305 | www.prairielandsgcd.org

SEMIANNUAL WATER PRODUCTION REPORT

For use by Approved Semiannual filers only

Instructions: Complete one form for each well and attach a copy of the meter log for each well. Sign form and return to Prairielands Groundwater Conservation District *no later than the 15th day of the close of the semiannual period.*

Year: _____

Registrant: _____ **Well ID #:** _____

1. Method used in measuring: Water Meter Multiple Water Meters

Other (explain): _____ Number of well meters: _____

2. Select the semi-annual period, then enter meter readings below for the end of each month as displayed on meter. (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.) Include the amount of groundwater for each month in gallons. (EX: Meter displays 500110 on July 1. August 1, meter displays 501200. July’s monthly use in gallons would be 1,090.)

Semiannual Period: **January - June** **July – December**

Last reported meter reading: _____
(December 31st) (June 30th)

Month	Meter Reading	Date Read	Gallons
Jan / Jul			
Feb / Aug			
Mar / Sep			
Apr / Oct			
May / Nov			
Jun / Dec			
TOTAL GALLONS FOR REPORTING PERIOD			

3. Water was used for: _____

4. Was the water used at a location other than the location of the well? Yes No

If yes, location of the use of the water: _____

5. Was any of this water transported for use outside of the District (outside of Ellis, Hill, Johnson, and Somervell counties)? Yes No

If yes, show amount transported in chart below with explanation: _____

GROUNDWATER TRANSPORTED

Month	Gallons	Month	Gallons
Jan / Jul		Apr / Oct	
Feb / Aug		May / Nov	
Mar / Sep		Jun / Dec	
TOTAL GALLONS FOR REPORTING PERIOD			

Note: Groundwater transport fees shall be paid in arrears, even if water use fees are paid annually in advance.

6. Did you use any surface water? Yes No

If yes, please state the amount and the purpose for which it was used: _____

AFFIRMATION

I AFFIRM THAT THE INFORMATION INCLUDED IN THIS REPORT IS TRUE AND CORRECT
TO THE BEST OF MY KNOWLEDGE.

Print Name:	Date:
Signature:	Phone #: