

SAN ANTONIO BASIN GROUNDWATER SUSTAINABILITY AGENCY WELL REGISTRATION FORM

Please return by March 31, 2023

Please fill out one form per well. A fillable pdf version of this form as well as the Frequently Asked Questions document can be downloaded at: <u>https://sanantoniobasingsa.org/well-registration/</u>

Please return your form(s) to the San Antonio Basin Groundwater Sustainability Agency ("SABGSA") by mail to P.O. Box 196, Solvang, CA 93464 or via email to <u>admin@sanantoniobasingsa.org</u>.

If you do not have a well located on your property, you are still required to fill out items 1, 2, and 5 below and return the registration form. The SABGSA encourages all property owners to submit their registration forms in advance of the March 31, 2023 deadline. Failure to submit a completed form by March 31, 2023, or within 60 days of the date of the well completion report for any well constructed after March 31, 2023, may result in a penalty.

1. Contact Information

a.	Property Owner Information				
	Contact Name:				
	Business Name:				
	Address(es):				
	Assessor's Parcel No. (APN):				
	City:				
	Phone Number:	Email:			
SAB Water District Assessment Number (if applicable):					
b.	Operator Information (if different than above)				
	Contact Name:				
Business Name:					
Address:					

 City:
 ______ State:
 _____ Zip Code:

 Phone Number:
 ______ Email:

2. Well Located on Property

If you do not have a well located on your property, please check the box below. You may skip items #3 and #4. Please sign item #5 and return both pages of this registration form to the SABGSA.

□ I certify that I do not have a well located on the property listed above in item #1.a.



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3. <u>Well and Current Type of Water Use Information (mark all that apply)</u>

	Тур	be of Well				
		Domestic	Municipal or Industrial			
		Agricultural / Irrigation	Livestock Watering			
		Other (Specify use):				
		nual Water Use Information I declare that I am a de minimis user extracting less than 2 acre-feet per year for domestic purposes only.				
] I declare that I use more than 2 acre-feet per year.				
4.	We	ell Information and Location				
	a.	APN:	State Well No. (if known):			
	b.	Well Location (Physical Address):				
	c.	Well Location (Lat/Long):				
	d.					
	e.	Well Depth (below surface, if known):				
	f.	Status: 🔲 Active 🔲 Inactive 🔲 Abandon - Date Abandon (if known):				
	g.	Who does this well serve: Only the APN listed above Additional APNs. Please list additional APNs:				
		Check this box if the well has a water meter and complete the information below.				
		Manufacturer/Model:				
		Туре:				
		Propeller DItras	onic 🔲 Electromagnetic			
		Other:				
		Does the meter have a totalizer? 🔲 Yes 📄 No				
		Meter Recording Units:				
		Gallons 100s o	of Gallons 🔲 1000s of Gallons			
		Cubic Feet HCF (F	nundred cubic feet) 🛛 🗌 Cubic Meters			
5.		nature of Property Owner or Protect of Property Owner or Protect of the second state o	operty Owner's Legal Designee on this form is true to the best of my knowledge.			

Date