

High Plains Underground Water Conservation District  
2930 Ave. Q, Lubbock, Texas 79414  
Phone: 806-762-0181 Fax: 806-762-1834  
Website: [www.hpwd.com](http://www.hpwd.com)

District Use Only

County: \_\_\_\_\_

Meter No: \_\_\_\_\_

**Alternative Method Reporting Form**  
**Nozzle Package/Hour Readings/Center Pivot**

1. Location of Pivot:

County: \_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_ OR

Legal Description: \_\_\_\_\_

Nozzle Package Capacity \_\_\_\_\_ gpm Beginning Hour Meter Reading \_\_\_\_\_ Date read \_\_\_\_\_

2. Location of the wells serving this pivot (provide attachment as needed for additional wells):

**Well 1**

County: \_\_\_\_\_ HPWD Permit Number: \_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_ OR

Legal Description: \_\_\_\_\_

**Well 2**

County: \_\_\_\_\_ HPWD Permit Number: \_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_ OR

Legal Description: \_\_\_\_\_

**Well 3**

County: \_\_\_\_\_ HPWD Permit Number: \_\_\_\_\_

Latitude: \_\_\_\_\_ Longitude: \_\_\_\_\_ OR

Legal Description: \_\_\_\_\_

NOTE: If a nozzle package is changed during a reporting year, then an ending reading for the old nozzle package must be recorded as well as a beginning reading for the new nozzle package.

4. Well Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email Address\*: \_\_\_\_\_

\*Not required for registration purposes, but will be required to interact with web-based databases being developed.

**I HEREBY CERTIFY THAT THE INFORMATION GIVEN IN THIS FORM IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND AS THE PERSON SIGNING THIS FORM, THAT I HAVE THE APPROPRIATE AUTHORIZATION TO FURNISH THIS INFORMATION.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Phone number:

\_\_\_\_\_  
Email Address (optional):