RED RIVER GROUNDWATER CONSERVATION DISTRICT

Groundwater Production Report

Well Owner	Date	
Well Address/Name		
Well Registration No.		
Date Read	Meter Reading	Meter Read By
	-	
	•	•

I hereby certify that the information given herewith is true and accurate to the best of my knowledge.

Signature

Please submit this form to the District by either fax at (903) 786-8211, email at rrgcd@redrivergcd.org or mail at: PO Box 1214

Sherman, TX 75091