

WATER DISTRICT 140
MEASUREMENT PLAN SUBMITTAL FORM FOR IRRIGATION WELLS
Please fill out a form for each well

Well Name: _____
IDWR site tag: _____
Legal description: _____
Owner/Operator: _____

Check one of the following measurement options for this well:

Please note: this plan must be approved before you may install a flow meter or use any alternate measurement method.

A. I plan to install a magnetic flow meter on my well pursuant to IDWR's Order and criteria: _____

Manufacturer and Model of flow meter you have selected _____

I have not selected a meter _____

Please complete section #10, then sign and submit this form to the address provided.

B. I am requesting a variance of the magnetic meter requirement: _____

Please indicate the method of measurement you wish to use and have approved:

_____ Existing operating flow meter

_____ Non-magnetic flow meter

_____ Hour Meter / Time Clock

_____ Power Consumption Coefficient (PCC)

If you are requesting a variance, you must answer the following questions:

1. Please describe the irrigation equipment used with this well (*example: center pivot with hand lines, 1/4 mile wheel lines, solid set hand lines, etc.*) _____

Do your pivot systems operate with corner machines? _____yes _____no _____N/A

Approximate number of acres irrigated by this well: _____ acres

2. Does the well open discharge into a pond or ditch? _____yes _____no

3. Is there a flow meter presently installed on your well? _____yes _____no

Type: _____

Manufacture: _____

Installation date: _____

Is the meter operable? _____

4. Are there multiple pumps wired to the same electrical demand meter? _____yes _____no

If yes, how many pumps are surface water boosters that would increase the power use when the deep well is not in operation? _____

How many are in-line pressure boosters? _____

Do in-line boosters always run with the well? _____yes _____no

over

5. Pressure Changes:
 Do you throttle the main well pump? ____yes ____no
 Do you throttle the in-line booster pumps? ____yes ____no
 Additional explanation/information regarding pump throttling or pressure changes: _____

6. Does the system operate with a variable frequency drive? ____yes ____no
 On Well motor: ____
 On Booster motor: ____
 On Both: ____

7. Is the well interconnected to other wells? ____yes ____no
 Does the well supply water for use other than irrigation? (Example: stock water, commercial)
 ____yes ____no If yes, please list: _____

8. Do your cropping patterns differ under pivot systems within the same year (example: one pivot in potatoes, one pivot in wheat and both systems irrigated by the same well)?
 ____yes ____no If yes, please describe: _____

9. Does the well production decrease over the irrigation season? ____yes ____no
 Does pumping water level decrease over the irrigation season? ____yes ____no
 If yes, approximately how much does the level decrease (in feet)? _____

If you answered YES to any of the questions #4 through #8, your system is not likely a candidate for the Power Consumption Coefficient (PCC) method of measurement. You will be required to install a flow meter.

If the system is an OPEN DISCHARGE system (answer to #2 is YES) and well production does not decrease during the irrigation season (answer to #9 is NO), then the system may use an hour meter for measurement.

10. **Required for all systems.** Please attach a diagram or photo of the wellhead and pumping plant. Include or show locations of all proposed or existing flow meters, and the locations of boosters, valves, elbows, chemigation ports, etc., and the spacing between each.

What is the pump discharge line size? _____

PLEASE PROVIDE YOUR SIGNATURE AND A CONTACT PHONE NUMBER, AND RETURN ALL FORMS TO:

WATER DISTRICT 140
 1341 FILLMORE ST STE 200
 TWIN FALLS ID 83301

Name/Title Phone # Date