MONTHLY PUMPAGE REPORT

Submit electronically to: **pumpagereports@water.nv.gov**

Hard copy may be mailed to: State of Nevada, Division of Water Resources, 901 S. Stewart Street, Suite 2002, Carson City, NV 89701

PERMITTEE	**CONTACT INFORMATION**				**REPORTING INFORMATION**
	Name	**Address**	**Phone No.**		**Measurement Period (Month/Day/Year)**
PROJECT NAME			**Fax No.**		From To
			E-mail		**Report Submission** Quarterly ☐ Monthly ☐ Annual ☐

WELL NAME	**PERMIT NO.**	**Basin No.**	**PUMPAGE IN MILLIONS OF GALLONS**												ROW TOTAL	
			JAN	**FEB**	**MAR**	**APR**	**MAY**	**JUN**	**JUL**	**AUG**	**SEP**	**OCT**	**NOV**	**DEC**	MGA	AFA
TOTAL	Pumpage	MGA														
		AFA														

WATER MANAGEMENT INFORMATION SUMMARY - Customize this summary as necessary to fully describe the permitted water management program to include but not limited to: delivery, discharge, infiltration, mining, irrigation, storage, evaporation.