



**APPLICATION FOR WESTERN AREA WATER  
SUPPLY PROJECT INDUSTRIAL SALES**  
NORTH DAKOTA DEPARTMENT OF WATER RESOURCES  
PLANNING DIVISION  
SFN 60438 (8/2023)

Office Use Only  
No.

I, the undersigned, submit the following information to the Secretary of the North Dakota State Water Commission for use in approving the planning, location, and water supply contracts for western area water supply authority depots, laterals, taps, turnouts, and risers for industrial sales for oil and gas exploration and production in accordance with North Dakota Century Code § 61-40-10.

GENERAL INFORMATION					
<i>This Application must include a map from an actual survey, aerial photo, or topographic map. The size of the map shall be 8½ by 11 inches. The map shall have a north arrow and approximate scale. If, in the opinion of the Secretary, the map does not contain information to properly evaluate the project, it will be returned.</i>					
Proposed Type: <input type="checkbox"/> Depot <input type="checkbox"/> Lateral <input type="checkbox"/> Tap <input type="checkbox"/> Turnout <input type="checkbox"/> Riser			<input type="checkbox"/> Temporary <input type="checkbox"/> Permanent		
Is this Application for modification of a prior approval? <input type="checkbox"/> Yes <input type="checkbox"/> No			If Yes, Date of Prior Approval		
Name of Customer:					
Customer Address:			City	State	ZIP Code
Legal Description:	¼	¼	Section	Township	Range
Start Date:			End Date:		
Water Requested (Gallons):			Flow Rate (Gallons per Minute):		
System Capacity at Location (Gallons per Minute):		Current Contracts at Location (Gallons per Minute):		Current Use at Location (Gallons per Minute):	
WAWS Capital Cost for this contract:					
ADDITIONAL INFORMATION AND SIGNATURE					
Additional Information and Comments:					
<i>Filing this Application does not relieve the applicant or customer from any responsibility or liability resulting from the construction or operation of the project.</i>					
WAWSA Personnel (print):					
Address:			City	State	ZIP Code
Telephone Number:					
Signature:			Date:		
SECRETARY CONSIDERATION					
Approval: <input type="checkbox"/> Yes <input type="checkbox"/> No					
Signature:			Date:		
<i>This application was considered and approved based on Authority assurances of continued supply for domestic use, sufficient system capacity existing at the location, and the cost of granting the connection having no impact on the finances of the Authority.</i>					
<i>In the event of a water shortage, the Authority will satisfy all of the needs of all customers for domestic purposes before supplying any water for any other purpose.</i>					
<i>Notification of any change that affects the continued supply for domestic use, system capacity at the location, or impacts the finances of the Authority requires prior approval by the Secretary.</i>					