



1986 ANNUAL IRRIGATION WATER USE REPORT
State Water Commission
SFN 3160 (9-86)

RUHLAND, LEO E.
HCR BOX 67

GARRISON

PERMIT NO. ==> 03453

ND 58540

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I. WATER USAGE (If no usage, explain why not)

Source: Surface Water _____ Ground Water X

Pt. of Withdrawal (well or pump site)

* NE 1/4 NE 1/4 Sec. 15 Twp. 148 Rng. 87W

* How many acres total irrigated from this pump site this year 140

Location of irrigated acres:

_____ 1/4 NE 1/4 Sec. 15 Twp. 148N Rng. 87W

_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

* Pumping Rate 700 Pump H.P. 70

No. of hrs. pumped _____ (circle: hr. meter, estimated, calculated)

End of season meter reading 95305000

Beginning of season meter reading 75495900

* Total water use 19809100 (circle: gallons, acre-feet, etc.)

If you do not have an operating water meter please estimate the number of inches of water you applied _____

If no water was used, is your irrigation system operable? _____

THE AREAS ABOVE WITH AN (*) ARE VERY IMPORTANT TO FILL OUT.

FOR ADDITIONAL PTS. OF WITHDRAWAL

Source: Surface Water _____ Ground Water _____

Pt. of Withdrawal (well or pump site)

_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

How many acres total irrigated from this pump site this year _____

Location of irrigated acres:

_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

Pumping Rate _____ Pump H.P. _____

No. of hrs. pumped _____ (circle: hr. meter, estimated, calculated)

End of season meter reading _____

Beginning of season meter reading _____

Total water use _____ (circle: gallons, acre-feet, etc.)

If you do not have an operating water meter please estimate the number of inches of water you applied _____

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Pt. of Withdrawal (well or pump site)

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How many acres total irrigated from this pump site this year _____

Location of irrigated acres:

_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

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_____ 1/4 _____ 1/4 Sec. _____ Twp. _____ Rng. _____

Pumping Rate _____ Pump H.P. _____

No. of hrs. pumped _____ (circle: hr. meter, estimated, calculated)

End of season meter reading _____

Beginning of season meter reading _____

Total water use _____ (circle: gallons, acre-feet, etc.)

If you do not have an operating water meter please estimate the number of inches of water you applied _____



II. TYPE OF SYSTEM: Sprinkler X Waterspreading _____ Gravity _____

III. INCLUDE ANY ADDITIONAL INFORMATION OR COMMENTS BELOW:

Please return to:

North Dakota State Water Commission
State Office Building
900 East Boulevard
Bismarck, North Dakota 58505

Signature

Leo E. Ruhland

Date

10-1-86

ORIGINAL - Water Commission

YELLOW - your copy