



Well ID:
APN:

Property Address:

WELL REGISTRY FORM

Please fill out one form for each well on your property.

Please return your form(s) by email Montecito GSA
(info@montecitogsa.com) or mail to: 583 San Ysidro Rd
Santa Barbara, CA 93108

1. Do you have a well on the property? Yes (Complete Sections 2-5) No (Proceed to Section 5)

2. Well Status: Active (operational / in use) Inactive (not operational / not in use) Destroyed

3. Primary Contact Information

a. Property Owner

Contact Person: _____ Subscribe to GSA monthly e-newsletter

Phone Number: _____ Email: _____

Mailing Address (if different from Parcel): _____

City: _____ State: _____ Zip Code: _____

b. Well Operator (if not Property Owner)

Contact Person/Business Name: _____ Subscribe to GSA monthly e-newsletter

Phone Number: _____ Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

c. Contact me about participating in a well monitoring program to improve community-wide data Yes No

4. Well Information (if known)

a. Type of Use

Domestic (Indoor use) Irrigation Commercial/Institutional Agricultural Other (Specify): _____

b. Estimated total annual water use from well: _____ Unit: Gallons Cubic-feet Acre-feet

c. Has your well experienced any production or water quality issues in the past? Yes No

If yes, please explain: _____

d. Description of well location (e.g. near larger oak tree at northern property boundary): _____

e. Well Depth (number of feet below the ground): _____

f. Screen Interval (range of depths below ground that groundwater enters the well): _____

g. Who does this well serve: Only the property address listed above. Additional Addresses

Please list additional addresses: _____

h. I have additional well information I'd like to share. Yes No

Type of Information (reports, logs, permits, etc.): _____

5. Signature of Property Owner or Property Owner's Legal Designee

The information provided above is true to the best of my knowledge.

Signature

Print Name

Date