



802 9TH Street
Wellington, Texas 79095
Phone (844) 445-2800
Fax (806) 419-1035
manager@mesquitegcd.org

FLOWMETER COST-SHARE REQUEST & AGREEMENT

1. Applicant Information (Owner)

Individual Partnership Corp/Gov Entity Estate/Trust/Guardianship

Name: _____ Title: _____

Mailing Address: _____

Telephone: _____ Email Address: _____

Operator Name: (if different from above) _____

Operator Mailing Address: _____

Operator Telephone: _____

2. Payment Information

The equipment covered by this agreement is being funded by: Owner Operator Other _____

3. Flowmeter Location

This property is located in the (MARK THROUGH) NW $\frac{1}{4}$, NE $\frac{1}{4}$, SW $\frac{1}{4}$, SE $\frac{1}{4}$ of Section _____,

Block _____, _____ Survey, _____ County, Texas.

Latitude: _____ Longitude: _____

Place Name: _____

This property is located _____ miles (N or S) and _____ miles (E or W) of the town of _____, Texas, and contains _____ irrigated and _____ total contiguous acres.

Property Security: (MARK THROUGH) Open Key Lock Combination _____

Groundwater Production Unit ID: _____

