

**NEW MEXICO OFFICE OF THE STATE ENGINEER
TOTALIZING METER REPORT**

1. PERMITTEE

Name: _____ Work Phone: _____
Contact: _____ Home Phone: _____
Address: _____
City: _____ State: __ Zip: _____

2. WELL INFORMATION

OSE Well Number: _____
a. ____1/4 ____1/4 ____1/4 Section:____ Township:____ Range:____ N.M.P.M.
b. _____ Subdivision
c. Latitude: ____d ____m ____s Longitude: ____d ____m ____s
d. East _____(m), North _____(m), UTM Zone 13, NAD ____ (27 or 83)

3. TOTALIZING METER

Serial Number: _____ Make: _____
of Dials: _____ Model: _____
Multiplier: _____ Units: _____

4. METER READING

Reading Date: _____ Meter Reading: _____

5. ADDITIONAL STATEMENTS OR EXPLANATIONS:

Submitted by: _____

INSTRUCTION:

Specific questions should be answered as follows:

- (4) Please submit readings of figures on the meter and the date of the reading;
- (5) Under comments, give any pertinent information concerning repair of meter and dates out of service, etc.

Do Not Write Below This Line