

**NEW MEXICO OFFICE OF THE STATE ENGINEER
APPLICATION FOR PERMIT TO CHANGE LOCATION OF WELL**

1. WATER RIGHT OWNER

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

2. PURPOSE OF USE

Domestic: __ Livestock: __ Irrigation: __ Municipal: __ Industrial: __
Commercial: __ Other (specify): _____
Specific use: _____

3. QUANTITY

Consumptive Use: _____ acre-feet per annum
Diversion Amount: _____ acre-feet per annum

4. PLACE OF USE

_____ acres of land described as follows:

Subdivision of Section (District or Hydrographic Survey)	Section (Map No.)	Township (Tract No.)	Range	Acres
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Who is the owner of the land? _____

Do Not Write Below This Line

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5. CHANGE FROM

A. LOCATION OF WELL (Location a, b, c, d required, e or f if known)

- a. ___1/4 ___1/4 ___1/4 Section:___ Township:___ Range:___ N.M.P.M.
in _____ County.
- b. X = _____ feet, Y = _____ feet, N.M. Coordinate System
_____ Zone in the _____ Grant.
U.S.G.S. Quad Map _____
- c. Latitude: _____d _____m _____s Longitude: _____d _____m _____s
- d. East _____ (m), North _____ (m), UTM Zone 13, NAD __ (27 or 83)
- e. Tract No. _____, Map No. _____ of the _____ Hydrographic Survey
- f. Lot No. _____, Block No. _____ of Unit/Tract _____ of the
_____ Subdivision recorded in _____ County.
- g. Other: _____
- h. Give State Engineer File Number of existing well: _____
- i. On land owned by (required): _____
- j. Is well to be plugged or capped? ___ If not, state for what use
retained: _____

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6. CHANGE TO

A. LOCATION OF WELL (Location a, b, c, d required, e or f if known)

- a. ___1/4 ___1/4 ___1/4 Section:___ Township:___ Range:___ N.M.P.M.
in _____ County.
- b. X = _____ feet, Y = _____ feet, N.M. Coordinate System
_____ Zone in the _____ Grant.
U.S.G.S. Quad Map _____
- c. Latitude: _____d _____m _____s Longitude: _____d _____m _____s
- d. East _____ (m), North _____ (m), UTM Zone 13, NAD __ (27 or 83)
- e. Tract No. _____, Map No. _____ of the _____ Hydrographic Survey
- f. Lot No. _____, Block No. _____ of Unit/Tract _____ of the
_____ Subdivision recorded in _____ County.
- g. Other: _____
- h. Give State Engineer File Number of existing well: _____
- i. On land owned by (required): _____
- j. If new well, give approximate depth(if known) ___ feet; Outside
diameter of casing ___ inches. Name of driller and license number
(if known) _____.

7. REASON FOR CHANGE

Application is made to change location of well for the following reasons:

8. ADDITIONAL STATEMENTS OR EXPLANATIONS:

Do Not Write Below This Line

