



REASON FOR VERIFICATION (CHOOSE ONLY ONE) Verify TFM (3.1) Re-seal TFM (3.1) Verify PCC (3.2)

METER LOCATION AND ASSOCIATED WELL INFORMATION: Well Description 20174FP, SW, SW, Sec. 18, 9N, 43W, Dirks #7
WDID 1: 6505470 WDID 2: WDID 3: WDID 4:

TAMPER RESISTANT SEAL INFORMATION
Meter Seal No.: New Seal No.: Other: Seal No. New Seal No.
Register Seal No.: New Seal No.: Other: Seal No. New Seal No.

REPLACEMENT OF EXISTING TFM (TFM ONLY): Date New TFM Installed: Date Previous TFM Removed:
Removed Meter Serial No: Removed Register Serial No.: Prev. TFM: Reading Estimate

NEW METER INFORMATION
Manufacturer: Model: Multiplier: No. Digits: Initial TFM Reading:

INSTALLED TFM (TFM ONLY) Units: Ac-Ft Gal Ac-In Cu-Ft
Meter Serial No: Register Serial No.: K-Factor (if adjusted):

TEST METER LOCATION AND DISCHARGE PIPE INFORMATION: OD: 8.020 " Wall Thickness: 0.110 " ID: 7.800 "

TEST METER (COLLINS TUBE): Standard Overhung

GPM Factor: Stop Clamp Settings:

	1	2	3	4	5	6	7	8	9	10
Front:										
Back:										
	2-Point		2-Point		2-Point		10-Point			
Avg. of F/B:										
Avg. Collins:	x GPM factor									
Avg. QT (gpm):	(0,000.0)									

INSTALLED FLOW METER (TFM ONLY)

	Totalizer Readings	Elapsed Time (min:sec)	Instantaneous (gpm) (Min. 10)
Stop:	<u> </u>	<u> </u> :	<u> </u>
Start:	<u> </u>	<u>0</u> : <u>00</u>	<u> </u>
Total:	<u> </u>	<u> </u> (Dec. Min.)	<u> </u>
		Avg. QI (gpm) (0,000.0)	<u> </u>

TEST METER (VOLUMETRIC OR ULTRASONIC)

	Reading (gal)	Elapsed Time (min:sec)	Spacer Setting:	Scale Factor:
	<u> </u>	<u> </u> :	<u>5.96</u>	<u>1</u>
Stop:	<u>10,832.0</u>	<u>20</u> : <u>00</u>	Test Material:	<u>STEEL</u>
Start:	<u>0.0</u>	<u>0</u> : <u>00</u>	Avg. QT (gpm) (0,000.0)	<u>541.6</u>
Total:	<u>10,832.0</u>	<u>20.00</u> (Dec. Min.)		

CALIBRATION COEFFICIENT (TFM ONLY)

QT = 541.6 = (to 0.000)
QI =

For CC greater than 1.050 or less than 0.950, Owner/Agent is REQUIRED to complete Owner/Agent Info and Variance Request.

STABILIZATION (PCC ONLY)

	Time (24:00)	Pumping Level or Discharge Rate (ft)	Discharge Rate (gpm)	Pressure (psi)
1	<u>11:15</u>	<u> </u>	<u>541.56</u>	<u>42.0</u>
2	<u>11:30</u>	<u> </u>	<u>541.00</u>	<u>42.0</u>
3	<u>11:45</u>	<u> </u>	<u>541.33</u>	<u>42.0</u>
4	<u>1200</u>	<u> </u>	<u>542.13</u>	<u>42.0</u>
5	<u>1245</u>	<u> </u>	<u>540.50</u>	<u>42.0</u>

DETERMINATION OF PD AND PCC (PCC ONLY)

No. Revs.	Time (sec)	Rate (rev/sec)	Avg. Rate (0.0000)
1	<u>8</u>	<u>66.53</u>	<u>0.1202</u>
2	<u>8</u>	<u>66.27</u>	<u>0.1207</u>
3	<u>8</u>	<u>66.55</u>	<u>0.1202</u>
4	<u>8</u>	<u>66.43</u>	<u>0.1204</u>
5	<u>8</u>	<u>66.26</u>	<u>0.1207</u>

Pt: 100.0
Ct: 1.0
Kh: 1.8

PD = Avg. Rate x 3.6 x Pt x Ct x Kh = 78.02 kW (to 0.00)
PCC = (5433 x PD) ÷ (QT) = 782.6 kWh/af (to 0.0)

Sprinkler End Gun: On Off None

OWNER/AGENT VARIANCE REQUEST (IF REQUIRED)
As Owner or Owner Agent, I hereby request a variance to Measurement Rules for use of a Correction Coefficient or Power Conversion Coefficient as represented on this test. I understand that this Coefficient (TFM or PCC) will be utilized to calculate diversions associated with this meter.
Requester Name:

POWER METER INFORMATION (PCC ONLY):
Serial No. 031 209 641 Reading 001281
Power Company HEA Multiplier: 100

USER CONTACT: Name/Entity: David Dirks Phone No.: 970-520-4144

TESTER STATEMENT: I hereby state that I am currently a person approved by the State Engineer to conduct well tests pursuant to the appropriate Rules Governing the Measurement of Ground Water Diversions. I have personally conducted measurement verification (TFM or PCC) of the above-described measurement device as required by the Rules/Program Standard. I understand that falsifying this test can subject me to a fine of up to \$500.

Tester Name: Zachary Karg Date of Well Test: 06/19/2025 Test Meter Serial No.: A1B8149T



COMMENTS:

