

**APPLICATION TO ENROLL IN THE ONE-YEAR RANKED FALLOW PROGRAM
TO
SUBDISTRICT NO. 1, ACTING
BY AND THROUGH ITS WATER ACTIVITY ENTERPRISE**

REQUIRED INFORMATION

Offeror Name: _____

If corporation, Name of registered agent: _____

Farm Unit #: _____

Address: _____

City: _____, State _____ Zip Code: _____

Phone Number: _____

Email Address: _____

PARCEL IDENTIFICATION

Parcel# (PIN):

Field Name:

Legal Description of Land to be Fallowed:

Number of Acres to be Fallowed:

WDID(s) (must include all wells with the legal ability to irrigate this parcel):

Decree(s) (if any):

Permit No.(s) (if any):

Please list any other water rights that may legally be used to irrigate the above-described acres?

Have the lands described above and the associated water rights and/or permits been enrolled in a conservation program, including Subdistrict No. 1 fallow programs, EQIP, or Prevent Plant insurance programs since 2020?

If so, please list the conservation program in the boxes below:

Year	Conservation Program
2020	
2021	
2022	
2023	
2024	

GROUNDWATER WITHDRAWAL INFORMATION

Average Total Groundwater Withdrawals (2020-2024): _____

Meter Serial # (s) for all WDISs listed above: _____

Current Meter Reading (s) for all WDIDs listed above: _____

PLANS FOR IRRIGATION INFORMATION

Do you plan to irrigate this parcel during the fallow year? Yes / No

If No, what cover currently exists on the parcel?

If Yes, please answer the following questions:

1. Please describe your irrigation plan on this parcel:

2. What is the projection of groundwater use you will need based on your planned irrigation (how many inches on how many acres)?

Is there any additional information you would like Subdistrict No. 1 to consider in evaluating this fallow offer?

TOTAL BID PRICE TO FALLOW: \$ _____

(Payment on this Application will be made after the irrigation season.)

[remainder of page left intentionally blank]

I understand that this is a non-revokable offer to reduce groundwater withdrawals during the 2025 ARP from the above listed ground water right(s) and/or ground water permit(s).

I understand that Subdistrict No. 1 is under no obligation to accept this or any other offer to reduce groundwater withdrawals and the acceptance or rejection of any offer is in the sole discretion of Subdistrict No. 1.

I understand that if Subdistrict No. 1 accepts this offer, I will be required to provide verifiable evidence (such as a photograph or report to the Division of Water Resources) of the starting and ending meter readings.

I affirm that I have the legal right to offer to reduce the groundwater withdrawals from the above ground water right(s)

Signature

Date

Print Name

Print Title

**THIS FORM MUST BE RECEIVED BY SUBDISTRICT NO. 1
BEFORE 4:00 PM ON FEBRUARY 21, 2025**

for office use only:

Accepted _____ (Y/N) Dated _____ Signature _____