



Abalone Coast Analytical

Groundwater Monitoring Permission Form for Laboratory GeoTracker EDF Upload

* Client Name and Address: _____

Abalone Coast Analytical Lab Code (Lab Use Only): ACBS

* Field Point ID (Name of your Well, **10 Characters or Less**, Ex: DW1): _____

* Well Class Identification (Please Circle One): Agricultural Domestic Drinking Water

* Well Matrix for EDF (Please Circle One): **W** - OR- **WP** *W=Ag Water **WP=Domestic Water

Is your Well Active OR Inactive?: Active

* GPS Latitude: _____

* GPS Longitude: _____

* Elevation of Well: _____

* Depth to Water (If Accessible): _____

Log Code (Lab Use Only): ACBS

* Global ID# (Or AW Number found on Permit): _____

* I, (client name) _____, am a farmer/grower enrolled in Agricultural Order R3-2012-0011 and give permission to Abalone Coast Analytical to upload my EDF file for Groundwater Monitoring requirements directly to GeoTracker on my behalf. I have provided the necessary information above required to create said EDF file on this date, (dd/mm/yy) _____.

* Client Signature X _____

Abalone Coast Employee Signature X _____