



FOX CANYON GROUNDWATER MANAGEMENT AGENCY

800 S. Victoria Avenue | Ventura, CA 93009-1610 | (805) 645-1372 | FCGMA.Report@ventura.org | FCGMA.org | Database: FCGMAonline.org

OPV Additional Reporting Requirements Allocation Ordinance for Agricultural Wells

Water Year: October 1, 2023 - September 30, 2024

FCGMA CombCode:

COMPLETED FORM MUST BE LEGIBLE

Agricultural Operators in the Oxnard and Pleasant Valley Basins **shall provide all APNs irrigated with: 1) groundwater from wells, 2) water received from purveyors, or 3) any other source**, in accordance with the Ordinance to Establish an Allocation System for Oxnard and Pleasant Valley Groundwater Basins, [Article 7.1](#) for Agricultural Well Operators. This information is required to be reported at the end of each Water Year. List one APN and corresponding water sources per row. Should additional Water Sources require more rows leave APN field blank. List Irrigated Acres for each APN only once. Attach additional sheets as necessary. Fillable forms are available at [FCGMA.org/public-documents/forms/](https://fcgma.org/public-documents/forms/). Assessor information is available at assessor.countyofventura.org/assessor-data/property-search/.

Assessor's Parcel Number (APN)			Water Sources Per APN				
			State Well Number (SWN):	Water Purveyor:		Other Groundwater Sources:	
List all APNs with irrigated acres. Use first nine (9) digits of each APN, omitting last digit.	Irrigated Acres (per APN)	List SWN(s) under CombCode entered above, supplying water to corresponding APN.	List Purveyors supplying water to corresponding APN.	Acre Feet (per Purveyor) Provide multiple turnout/meter breakdown separately.	List wells supplying water to corresponding APN (i.e.: neighbors well). List N/A if not applicable.	Acre Feet (per SWN)	
			List Turnout / Meter # to corresponding Purveyor.				
Example: #1	050-0-060-23	267.00	02N68W42V09	VC Water Works District 1 389, 748	26.832	01N54W78Z02	10.670
#2	060-0-051-10	76.278	02N68W43W10	VC Water Works District 19 P53	7.495	01N54W78Z02m2	4.358
			02N68W43W10m3	PVCWD M-81, X-35	3.298		



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Assessor's Parcel Number (APN)		Water Sources Per APN				
		State Well Number (SWN):	Water Purveyor:		Other Groundwater Sources:	
	Irrigated Acres		Purveyor Turnout / Meter #	Acre Feet		Acre Feet

Complete documentation, including APNs and all water sources for the current Water Year, is required to be submitted by an authorized representative of the Well Owner or designated Well Operator on record with the Agency. Failure to submit complete documentation may result in assessment of civil penalties in accordance with [Resolution No. 2019-01](#).

I declare under penalty of perjury under the laws of the State of California that the information contained within this document is true and correct.

Name of Authorized Well Owner / designated Well Operator

Business Name

Date

Signature of Authorized Well Owner / designated Well Operator

Street Address / Suite City State Zip

I have supplemental reporting information, and it will be compiled electronically and emailed along with this signed, completed form to FCGMA.Report@ventura.org.

Well Owner

Well Operator

Phone Number

Email Address