

WATER SOURCE INSPECTION & MAINTENANCE FORM Revised April 2019

Please **PRINT**

Name: _____ Date of Visit: _____ Drinker (BGG #) _____

Address: _____ Zip: _____ Phone: _____

Water Source Name (Drinker): _____ Type: BGDrinker ___ SGDrinker ___ Spring ___ Other _____

General Location: _____ USGS Quad: _____ 7.5" _____ 15" _____

Small Game Escape Ramp existing? Yes ___ No ___ Cell Phone Signal at Water Source? Yes ___ No ___ Cellular Service Name: _____

Camera/s: Date Replaced batteries _____ Date Replaced Memory Card/s _____ Condition of Camera/s _____

Please Circle Which Directional Photos Were Taken While Standing at the Drinker Box to Document Forage Available to Wildlife: **N NE E SE S SW W NW**

BIG GAME DRINKER DATA

DESCRIPTION	Good	Fair	Poor	COMMENTS (Please Take Photos of Any Damage)	DESCRIPTION	Good	Fair	Poor
Check Dam					Tank # 1			
Pipe / Valves					Tank # 2			
Rain Apron/Mat					Tank # 3			
Drinker Box					Gabions			
Parabolic					Fence			
Wire Loom					Solar Panel			
Battery					Antenna			

PLEASE Report Actual Gallons in Tanks, **NOT** Percentages.

TANK	ARRIVAL	DEPARTURE	PELLET TRANSECTS READINGS 1 group = about 1 cup = about 70-100 pellets	
# 1	Water: _____ gal	Water: _____ gal	# 1	# 2
Cap:	Valve open / closed	Valve open / closed		
# 2	Water: _____ gal	Water: _____ gal	# 3	# 4
Cap:	Valve open / closed	Valve open / closed		
# 3	Water: _____ gal	Water: _____ gal	RAIN GAUGE _____ in.	
Cap:	Valve open / closed	Valve open / closed		
Parabolic	Inches: _____	Inches: _____		

DATA ON WATER SOURCES OTHER THAN Big Game Drinkers

TYPE: Spring ___ Tank ___ Catchment ___ Tinaja ___ Stream ___ Small Pool ___ Adit ___ Other _____

WATER CONDITION: Accessible ___ Not Accessible ___ Clean ___ Dirty ___ Invasive Vegetation (type) trees ___ vines ___ other _____

Comments on water/ drinker conditions _____

MAINTENANCE/WORK PERFORMED: _____

MAINTENANCE/WORK REQUIRED: _____

WILDLIFE USE: Bighorn ___ Deer ___ Burro ___ Cattle ___ Quail ___ Chukar ___ Dove ___ Coyote ___ Other (name/s) _____

ABUNDANCE: High ___ Med ___ Low ___ METHOD: Calls ___ Feces ___ Tracks ___ Sight ___ Other Evidence _____

COMMENTS: _____

COMBINED MILES DRIVEN BY ALL VEHICLES _____ miles COMBINED MAN HOURS OF ALL PARTICIPANTS (include travel time) _____ hours

GROUP OR AGENCY REPRESENTED: SCBighornSheep ___ CA Dept.FishWildlife ___ Nat'IParkServ ___ Other _____

Keep the original report in your journal and send a copy to the following Area Captain Coordinator who will send a copy to the Dept. of Fish & Wildlife.
Scott Gibson; 57716 Juarez Drive; Yucca Valley, CA 92284; Cell phone: 909-210-0548; email: water4sheep@gmail.com

Please rake out last 100 feet of vehicle tracks before leaving Wilderness Area

If you find bighorn carcass/remains please take photo and a GPS point BUT DO NOT TAKE ANY PART WITH YOU!