OREGON WATER RESOURCES DEPARTMENT
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.oregon.gov/owrd

Application for
Well ID Number

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name *(please print)*: Revere Jacobson

Mailing Address: 745 SE Garner St

City, State, Zip: Prineville, OR 97754

Mail Well ID to: ☑ SAME AS ABOVE ☐ In Care Of (C/O)

Name & Address: _____

City, State, Zip: _____

II. WELL LOCATION INFORMATION *(Please fill out as completely as possible)*

Township: 15S (North / South) Range: 16E (East / West) Section: 5 NE 1/4 of the SW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 8600 County Crook

GPS Coordinates: 44.2953221 -120.8401716

Street Address of Well, City: 745 SE Garner St, Prineville OR, 97754

If the property had a different street address in the past: {Lot 4 Blk 2 2nd Fairview Sub}

III. GENERAL WELL INFORMATION *(Please fill out as completely as possible, AND attach copy of Well Report, if available)*

Use of Well (domestic, irrigation, commercial, industrial, monitoring): domestic

Date Well Constructed (or property built): 1950 Total Well Depth: — Casing Diameter: —

Owner at time the well was constructed (if known): — Well Report # (if known): —

Other Information: —

SUBMITTED BY *(please print)*: Revere Jacobson

PHONE: 541-408-1724 **EMAIL &/or FAX:** Revere.jacobson@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301. Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:	Well Report Number:	Well Identification #:
3-3-2026	CR005001	L-161705

NO ORIGINAL WELL CONSTRUCTION REPORT

Received
MAR 03 2026
OWRD