



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.

RECEIVED

OCT 27 2022

I. OWNER INFORMATION

OWRD

Current Owner Name (please print): Rocky Mountain Agronomics, Inc.

Mailing Address: 1912 W. Main St.

City, State, Zip: Burley, ID 83318-1638

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: 24S (North / South) Range: 32E (East / West) Section: 12 NW 1/4 of the SW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 1200 County HARNEY

GPS Coordinates: 43.502544 -118.839818

Street Address of Well, City: 36100 HUTCHENSEN RD BURNS, OR 97720

If the property had a different street address in the past: _____

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): IRRIGATION

Date Well Constructed (or property built): 10/20/1978 Total Well Depth: 430' Casing Diameter: 12"

Owner at time the well was constructed (if known): ITTERSCHAGEN Well Report # (if known): HARN 921/52140

Other Information: L-108096 tag was attached to well but has been destroyed- new tag needed

SUBMITTED BY (please print): BRYCE WITHERS / WATER RIGHT SERVICES, LLC

PHONE: 541-408-1400 EMAIL &/or FAX: brycewrs@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:

10-27-22

Well Report Number:

HARN 921 (original)
HARN 52140 (alter)

Well Identification #:

L-149815



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for Well ID Number

well ID
L108096
lost
Repl: L149815

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

I. OWNER INFORMATION

Current Owner Name (please print): T. K. and Donna L. Giesbrecht
Mailing Address: 445 E. Washington St
City: Burns State: OR Zip: 97720
Mailing Address (to send Well I.D.): 445 E Washington St.
City: Burns State: OR Zip: 97720

II. WELL INFORMATION (Do not complete this section if the well report is attached.)

Township: _____ (North/South) Range: _____ (East/West) Section: _____
Tax Lot: _____ County: _____ 1/4 _____ 1/4
Street Address of Well: _____ City: _____
Owner at time the well was constructed, (if known): _____
If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION (Do not complete this section if the well report is attached)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): _____
Date Well Constructed: _____ Total Well Depth: _____ Casing Diameter: _____
Other Information: _____

SUBMITTED BY (please print): Donna Giesbrecht
PHONE: 541-573-2136 FAX: 541-573-1449
(Cell: 208-599-4454)

Re: App G 17490

Send application to Oregon Water Resources Department; 725 Summer St NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Wednesday.

HARN 921

L108096 lost!

For Official Use Only by the Oregon Water Resources Department:		
Received Date: _____	Well Log Number: _____	Well Identification #: _____

RECEIVED