





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

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

I. OWNER INFORMATION

Current Owner Name (please print): Rogue Community College
Mailing Address: c/o Mike Paines, 3345 Redwood Hwy
City: Grants Pass State: OR Zip: 97527
Mailing Address (to send Well I.D.):
City: State: Zip:

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

Township: 36 S (North/South) Range: 6 W (East/West) Section: 27
Tax Lot: 1000 County: Josephine SW 1/4 NW 1/4
Street Address of Well: City:
Owner at time the well was constructed, (if known): Rogue Community College
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): Domestic
Date Well Constructed: 7/24/1974 Total Well Depth: 166' Casing Diameter: 6"
Other Information: well by Gazebo (South Well), well # 3,
State Observation Well #256
SUBMITTED BY (please print): Jen Woody, OWRD
PHONE: 503-986-0855 FAX:

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.

For Official Use Only by the Oregon Water Resources Department:
Received Date: Well Log Number: Well Identification #:
JOSE 4436 4 103078