



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): Diamond Peaks @ Leisure Wood
 Mailing Address: PO Box 122
 City: Crescent Lake State: OR Zip: 97124
 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: 24s (North/South) Range: 7E (East/West) Section: 7C
 Tax Lot: 1101 County: Klamath NE 1/4 SW 1/4
 Street Address of Well: _____ City: _____
 Owner at time the well was constructed, (if known): On well log
 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: Jeremy Griffin matched the well log with the correct well, summer of 2010

SUBMITTED BY (please print): David Bates, Assistant Watermaster, Dist 11
 PHONE: 541-388-6669 FAX: 541-388-5101

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.

<i>For Official Use Only by the Oregon Water Resources Department:</i>		
Received Date: _____	Well Log Number: <u>Klam 340</u>	Well Identification #: <u>694624</u>