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)*: Marshall and Marilee Ager

Mailing Address: 7320 Round Lake Rd

City, State, Zip: Klamath Falls, OR 97601

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

Name & Address: ____ Well tag # L146970 placed on well at inspection ___ *– no packet needed –*

City, State, Zip: _____

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

Township: 39 S (North / South) Range: 8 E (East / West) Section: 28 NE 1/4 of the NW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 100 County Klamath

GPS Coordinates: 42.153523, -121.888466

Street Address of Well, City: 7320 Round Lake Rd

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): 1953 Total Well Depth: 80' Casing Diameter: 8"

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

Other Information: ____ Water Right Cert 27011, Permit U-508

SUBMITTED BY *(please print)*: Alyssa Witt

PHONE: 971-375-6919 EMAIL &/or FAX: alyssa.n.witt@water.oregon.gov

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 #:
5-17-2024	KLAM 61887	L-146970

NO ORIGINAL WELL CONSTRUCTION REPORT

Last Update: 5-10-23   Well I.D. Number/2   WCC