

Oil Well Addressing Application

Please fill out as applicable. Some information will only be available if the well already exists.

Company Name: _____

Applicant Name: _____

Phone Number: _____

Description of Facility: _____

Well Name & Number: _____

NDIC File Number: _____

GPS Coordinates: _____
(Decimal Degrees)

Legal Description: _____

Site Plan (Use this area to show the location of the well/facility within the parcel; Please feel free to use a separate sheet of paper)

Office Use Only

Address Assigned: _____