

APPLICATION FOR A PERMIT TO CONSTRUCT A WATER WELL (50 GPM OR MORE) IN THE LOWER LOUP NATURAL RESOURCES DISTRICT

1. TYPE OF PERMIT REQUESTED: Check appropriate item(s)

New Late

2. NAME AND ADDRESS OF WELL OWNER:

Phone () _____ - _____

FOR OFFICE USE ONLY
Permit No. _____
Reg. No. _____
Quantity Area No. _____

3. PURPOSE OF WELL (Circle one): Irrigation Domestic Livestock Public Water Supply
 Dewatering (over 90 days) Geothermal Ground Heat Exchanger Industrial Recovery Ground
 Water Source Heat Pump Monitoring Aquaculture Wildlife Habitat
 Other (specify) _____

**Mark Well Location
With an (X)**

4. IDENTIFY THE LOCATION OF THE PROPOSED WELL:

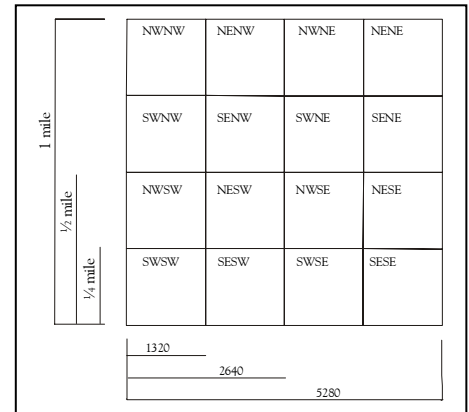
Section _____, Township _____ North, Range _____ East/West, _____ County.

State Registration No. _____ (Required for late or Upgrade only).

The box at the right represents one square mile, (section). Indicate with an "X", the proposed location of the well. Outline the proposed water use area, if water is to be used outside the above written legal description. Give legal description of water use area.

Section _____, Township _____ North, Range _____ East/West, _____ County.

The well will be located _____ feet from the North/South section line and will be _____ feet from the East/West section line.



5. IRRIGATION WELLS:

How many acres will be irrigated? _____
 Will a flow meter be used on proposed well? Yes No
 Type of irrigation system? Center pivot Gravity Other (specify) _____
 Will the well be connected to an irrigation system with other wells? Yes No How many? _____

6. REPLACEMENT AND ABANDONMENT WELL INFORMATION:

Is this a replacement well? Yes No
 Registration number of well to be replaced: _____
 Well to be replaced was last operated on _____ 20____
 Replacement well will be _____ feet from original well.
 Will the replacement well irrigate the same tract of land as the decommissioned well? Yes No

7. SPECIFICATIONS OF INTENDED WELL AND PUMP:

Pump column diameter: _____ inches. Estimated total well depth: _____ feet. Estimated pumping capacity: _____ gallons per minute.
 Well casing diameter: _____ inches. **Please attach test hole log, if available**

8. NAME AND ADDRESS OF WELL DRILLER: _____

 _____ Phone _____

Continue on other side

PERMIT RESTRICTIONS

1. This permit shall remain valid for one year following the date of approval.
 2. This well must be constructed in accordance with the Water Well Standards and Contractor Licensing Act and rules and regulations adopted pursuant thereto.
 3. If the well authorized by this permit has a capacity of fifty (50) gallons per minute or more, it must be constructed at least six hundred (600) feet from any existing well with a capacity of fifty (50) gallons per minute or more that is under different ownership.
 4. Management Area rules and regulations are subject to change. Prior to construction or operation, the permittee should contact the NRD office concerning compliance with these regulations.
 5. This well following construction must be registered with the Nebraska Department of Natural Resources.
 6. This well will be subject to the rules and regulations of any integrated management plan developed by the NRD and/or the Nebraska Department of Natural Resources.
 7. This permit will be subject to any stays on well drilling resulting from a declaration by the Nebraska Department of Natural Resources that water in the Loup River Basin is fully appropriated.
 8. Check Local Zoning Regulations.
 9. Additional Comments:
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WELL OWNER CERTIFICATION: I certify that I am familiar with the information contained in this application and its restrictions, rules and regulations and, that to the best of my knowledge and belief, such information is true, complete and accurate.

Date _____ Signature of well owner _____

PERMIT APPROVAL:

Date Approved _____ NRD Representative _____

This form must be completed in full and be accompanied by a non-refundable \$50.00 filing fee payable to the Lower Loup NRD P.O. Box 210 Ord NE 68862-0210

Lower Loup NRD

