

Submit to:
Department of Natural Resources
301 Centennial Mall South
P.O. Box 94676
Lincoln, Nebraska 68509-4676
Phone (402) 471 2363

STATE OF NEBRASKA
DEPARTMENT OF NATURAL RESOURCES
WATER WELL REGISTRATION MODIFICATION
OWNER USE ONLY

FOR DEPARTMENT USE ONLY

Date Filed 5/1/17 Owner Code No. 113554 Registration No. G-047049
05012017 - 54478 - MOD F (2) CP NRD
WELL ID NO CHANGE IN OWNERSHIP FROM FORM 667

ALL ITEMS IN SECTION 1 AND SIGNATURE IN SECTION 3 ARE REQUIRED

SECTION 1: ☒ Check here if: This form is also to be used to change the ownership of this well.

A. Well Owner's First Name _____ Last Name _____
OR Company Name MERRICK FOUNDATION INC
Attention Name _____
Address PO BOX 206
City CENTRAL CITY State NE Zip 68826 Telephone _____
Email _____

B. Well Registration No. G-047049 (Only one number per form)

C. State Reason for Change: UPDATE WELL LOCATION AND ACRES IRRIGATED

CORRECTIONS NEEDED

Complete only those items being modified

SECTION 2:

A. If location of well needs to be corrected, fully complete the Legal description of the well including GPS Coordinates (latitude and longitude). Footage may be provided. (1 & 2 REQUIRED)

- Well location: SE $\frac{1}{4}$ of the NW $\frac{1}{4}$ of Section 19, Township 12 North, Range 7 East/West, MERRICK County.
- Latitude Degree: 40 Minute: 59 Second: 49 12 Longitude Degree: 98 Minute: 09 Second: 50 42 (NAD 83)
- The well is _____ feet from the (North or South) section line and _____ feet from the (East/West) section line.
(circle one) (circle one)

B. Location of water use (give complete legal description) PT SE 1/4 NW 1/4 & SW 1/4 NE 1/4 & NW 1/4 SE 1/4 SECTION 19-12N-7W

For Irrigation Wells: Number of acres irrigated: 90.23

If the location of use is different than what is currently registered, and/or the number of acres irrigated is more than what is currently registered, and you are located in an area that has stays or a moratorium on newly irrigated acres, you **MUST** obtain the written approval of the Natural Resources District **PRIOR TO FILING THIS FORM**. This approval can be the submission of a separate Natural Resources District Approval form by the NRD.

Central Platte
(Natural Resources District)

Sandra Naisch
(Signature of NRD Staff)

3/22/2017
(Date)

C. Pump information.

- Pumping rate: _____ gallons per minute.
- Drop Pipe diameter: _____ Inches.
- Length of drop pipe: _____ feet.
- Pumping equipment installed: (m) _____ / (d) _____ / (y) _____.
- Brand/Type: _____
- Static Water Level: _____ feet.
- Pumping water level: _____ feet.
- Amount of time pumped: _____

RECEIVED

MAY 01 2017

DEPARTMENT OF
NATURAL RESOURCES

D. Change of use, complete items 1, 2 and 3. Identify use from this Listing: Dewatering (over 90 days), Domestic, Ground Heat Exchanger, Ground Water Source Heat Pump, Industrial, Injection, Irrigation, Livestock, Monitoring, Observation, Public Water Supply (with spacing (46-638), Public Water Supply (without spacing), Recovery, Other (if well use falls in this category – add specific use).

1. Well was used for: _____
(if necessary, please provide updated pump information)
2. New well use is: _____
3. Date of Change: _____

E. Active to Inactive (please check A or B) with or without pump

On _____, 20____, the water well is ____a) altered from active to inactive by removing the _____ inch pump and pumping column and properly capping the water well according to state standards or ____b) no longer in use but pump still in place with a water tight seal according to state standards. (§46-1207.02)

F. I certify that the well has been modified according to information given in section 2 C, E, or J, such that it will pump 50 gallons per minute or less. Pumping Rate: _____

Change to use (Check one of the following): ☐ Livestock ☐ Monitoring ☐ Observation

☐ nonconsumptive or de minimus use approved by the applicable natural resources district. State use: _____

G. Wells in a Series.

1. Is this well a part of a series? _____ Yes.
2. How many total wells in the series? _____
3. If one or more of the wells in the series is currently registered, give all well registration numbers: _____

H. Well Construction Information.

1. Total well depth: _____ feet.
2. Static water level: _____ feet.
3. Pumping water level: _____ feet
4. Well Construction began: (m)____/(d)____/(y)____
5. Well Construction completed: (m)____/(d)____/(y)____
6. Bore hole diameter in inches: Top____ Bottom ____
7. Casing and Screen Joints are: Welded____, Glued____, Threaded____, Other____
8. Total Estimate Capacity of Well _____ gallons per minute (to be used to determine sustainability of aquifer)

I. Replacement and decommissioned/modified well information.

Department of Natural Resources Decommission/Modification Certification form or Notice of Decommissioning form is Required for replacement wells

1. Is this well a replacement well? ____ Yes ____ No
2. Registration number of original well: ____ If original well is not registered, date well construction completed (m)____/(d)____/(y)____
3. Original well last operated (m)____/(d)____/(y)____
4. Completion of original well decommission/modification on (m)____/(d)____/(y)____
5. Complete location of water use of original well: _____

J. Well Construction Modification.

1. Total well depth: _____ feet.
2. Static water level: _____ feet.
3. Pumping water level: _____ feet
4. Well Modification began: (m)____/(d)____/(y)____
5. Well Modification completed: (m)____/(d)____/(y)____
6. Casing diameter in inches: Top____ Bottom ____
7. Casing and Screen Joints are: Welded____, Glued____, Threaded____, Other____
8. Total Estimate Capacity of Well _____ gallons per minute (to be used to determine sustainability of aquifer)

SECTION 3:

I hereby certify that the information provided on this form is true and accurate to the best of my knowledge.

Charles Griffiths - Exec. Director
Water Well Owner's Signature

4-27-17
Date

The Department reserves the right to request verification of information provided.

STATE OF NEBRASKA



E. Benjamin Nelson
Governor

DEPARTMENT OF WATER RESOURCES
J. Michael Joss
Director

September 27, 1994

IN REPLY REFER TO:

G-9149
G-11059
G-47046
G-47047

G-47049
G-73091
G-73165

Bob Dwyer
Norwest Bank
P.O. Box 1768
Grand Island, NE 68802

Dear Mr. Dwyer:

According to the information supplied to the Department, the well registration information has been changed to indicate that the Merrick Foundation, Inc. is the owner of the wells identified below. The wells are located in Township 12, Merrick County.

<u>Registration Number</u>	<u>Location</u>	<u>Previous Owner & Filing Date</u>
G-9149	NE½SE¼ of S14, R8W	George Glause 9-13-57
G-11059	NE½SE¼ of S14, R8W	Alfred W. Bader 9-18-57
G-47046	NE½SE¼ of S14, R8W	Alfred W. Bader 9-30-75
G-47047	NW½NE¼ of S23, R8W	Alfred W. Bader 9-30-75
G-47049	NW½SE¼ of S19, R7W	Alfred W. Bader 9-30-75
G-73091	SE½SW¼ of S23, R8W	Alfred W. Bader 10-31-90
G-73165	NW½SW¼ of S23, R8W	Robert V. Clark 11-27-90

Sincerely,

Adrienne Dankleff
Staff Assistant, Ground Water

AD:gs
Enclosure
cc/enc: Central Platte Natural Resources District
Conservation & Survey Division - UNL

STATE OF NEBRASKA
DEPARTMENT OF WATER RESOURCES
NOTICE OF CHANGE OF OWNERSHIP

1. Name, address and telephone number of individual completing this form:

Bob Dwyer
Newest Bank
P.O. Box 1768
Grand Island, NE

Zip Code 68802 Telephone Number: (781) 788-4201

For Department Use Only

Surface Water Appropriation(s)

Changed: _____

Ground Water Well(s) Changed:

G-47049 NWSE
#54478 9-20-75
prev. Alfred Bader

2. Name, address and telephone number of all present owner(s) if different than above:

Memick Foundation INC
1530 17th
Central City NE
708-946-7707

13822

NRD-18

3. Legal description of property owned. (This description may be provided by attaching a copy of the document transferring ownership.)

SE 1/4 NW 1/4 & SW 1/4 NE 1/4 Section 19-T 12N-R 7W
Memick Co. NE

4. This change is filed concerning the following:

☐ a. List surface water appropriation numbers:

☒ b. List ground water well registration numbers:

1-8" Irrig. Well
G 47049

5. The above information is true and accurate to the best of my knowledge.

9-20-94
 Date

Bob Dwyer
 Signature

Return to:

State of Nebraska
 Department of Water Resources
 301 Centennial Mall South
 P.O. Box 94676
 Lincoln, Nebraska 68509-4676
 Phone (402) 471-2363

RECEIVED

SEP 21 1994

DEPARTMENT OF
 WATER RESOURCES

DEPARTMENT OF WATER RESOURCES
M. E. BALL
Director



MAILING ADDRESS
P. O. BOX 94607
Lincoln, NE. 68509

LOCATION
1420 P Street

TELEPHONE
(402) 471-2363

State of Nebraska

J. JAMES EXON, Governor

October 30, 1975

IN REPLY REFER TO
G-47049

Mr. Alfred Bader
Route 4, Box 16
Grand Island, Nebraska 68801

Dear Mr. Bader:

You will please find enclosed receipt No. 43699 in the amount of \$7.50 covering the registration fee on an irrigation well located in the NW 1/4 of Section 19, Township 12 North, Range 7 of the 6th P.M., Nerrick County, Nebraska. This registration, identified as No. G-47049, was filed upon our records on the 30th day of September, 1975.

We should like to suggest that this letter and the receipt be placed in your permanent files for the reason it is your official record of this registration.

Very truly yours,

DEPARTMENT OF WATER RESOURCES

(Miss) Sandi Miller, Clerk

SJM
Enclosure

Registration No. G-47049 County of Merrick Date Filed September 30, 1975

STATE OF NEBRASKA
CERTIFICATE OF WELL DRILLER

I, LeRoy Lauer of Chapman
(Name of Driller) (Postoffice Address)

County of Merrick State of Ne, do hereby certify that:

1. I am the driller of a well located on the _____ Quarter, Section No. 19
Township 12 North, Range 7, owned by Alfred Bader
whose postoffice address is Grand Island State of Ne

2. That the drilling was begun on the 27 day of July, 1967 and completed on
the 24 day of July, 1967

3. That the well is cased and screened in the following manner: 1 - 32 - galvanized
(Give kind of casing, lengths and position of pipe and
32 - 64 screen
screen casing, weight of metallic casing, etc.)

4. That the diameter of drilled hole is 36 inches.

5. That Penner rotary type of drilling machinery was used.

6. That the drilled hole is/is not sealed, as follows: _____

7. That the following is an accurate log of the depth, thickness and character of the different strata penetrated, and the location of water-bearing strata:

DEPTH IN FEET		MATERIAL DRILLED
FROM	TO	
<u>1</u>	<u>4</u>	<u>topsoil</u>
<u>4</u>	<u>32</u>	<u>gravel</u>
<u>32</u>	<u>40</u>	<u>fine gravel</u>
<u>40</u>	<u>52</u>	<u>gravel</u>
<u>52</u>	<u>57</u>	<u>sand</u>
<u>57</u>	<u>62</u>	<u>gravel</u>
<u>62</u>	<u>64</u>	<u>clay</u>

Date Signed 9-16-75

LeRoy Lauer
Driller

(If more space is required please use reverse side of this page.)

Registration No. G-47049 County of Merrick Date Filed September 30, 1975

STATE OF NEBRASKA
IRRIGATION WELL REGISTRATION

I, Alfred Bader of Grand Island R4 Box 16
(Name of Person registering well) (Postoffice Address)

County of Merrick State of Nebraska, do hereby certify:

1st. That the name of the owner of the land upon which the irrigation well is located is Alfred Bader of Grand Island Street, R4 Box 16 County of Merrick State of Nebraska
(City or Village)

2nd. That the irrigation well is located on the NW Quarter of the SE Quarter of Section 19 Township 12, Range 7 of the Sixth P. M., Merrick County, and is 660 feet from the South line and 20 feet from the west line of said tract.

3rd. That the well was installed with the intention of irrigating all or parts of the following described land: NW 1/4 19-12-7E
(Give Quarter, Section, Township and Range)

amounting in all to approximately 6.0 acres.

(If installation consists of a battery of wells with one outlet, give details on a sheet to be attached hereto.)

4th. That the capacity of said well under normal operating conditions is 1000 gallons per minute.

5th. That the depth of the well is 64 feet, measured from the surface of the ground.

6th. That the inside diameter of the casing is 1 1/2 inches.

7th. That the static water level in the well is 8 feet below ground surface.

8th. That the depth to water under normal pumping conditions is 45 feet below ground surface.
(Pumping Level)

9th. That the diameter of the pump column is 8 inches. That the diameter of the bowl or bowls is 1 1/2 inches.
(Give number of bowls)

10th. That the type and size of impeller is as follows:

Western Special Roller Type H

11th. That the well was completed on or about the 17 day of Aug, 1975.

12th. That attached hereto are three copies of the log of the well certified to by the driller of the well.

13th. That the driller of this well is Leroy Lavin, whose address is

Chapman Neb

14th. That the name of the tenant or operator, if other than the owner, is Stano Kengurberg

whose address is Chapman Neb

16th. That the relation which the subscriber to this instrument bears to said registrant is that of

Alfred Bader

(State whether owner, tenant or agent for land on which well is located)

and that he is authorized to sign this instrument in behalf of the interest affected.

Signed: Alfred Bader

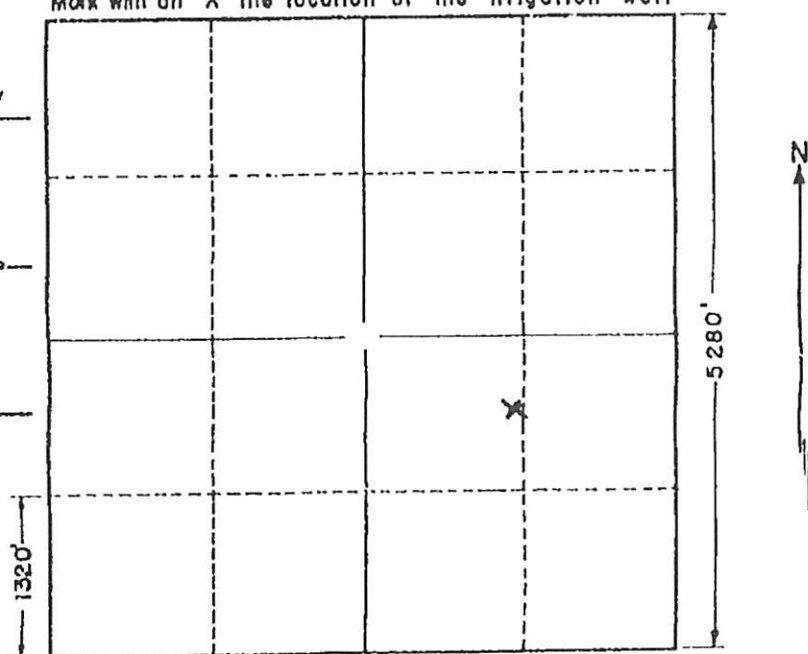
Dated: Sept 29, 1975

This drawing represents one Section
Mark with an "X" the location of the Irrigation well

Section No. 19

Township 12

Range 7



Each small subdivision is a 40-acre tract.

State of Nebraska

Department of Water Resources

} RS.

This instrument was filed for record at 10 o'clock A.M., on the 30th day of September, 1975.

M.E. Ball
Director of Water Resources

Bakker, Anita

From: Sandy Noecker <noecker@cpnrd.org>
Sent: Friday, May 19, 2017 9:31 AM
To: Bakker, Anita
Subject: Well Modification

Hi Anita,

I evidently got those turned around when I did the paperwork.

G-047049 – is in the SW ¼ of the NW ¼ of Section 19-12N-07W GPM 40 59 49.12 -98 09 50.42

G-017061 – is in the SE ¼ of the NW ¼ of Section 19-12N-07W GPM 40 59 51.25 -98 09 35.67

Thank you for making that correction.



Sandy Noecker
Data & Compliance Officer

Central Platte Natural Resources District
215 Kaufman Ave Grand Island NE 68803
Tele: 308 385-6282 www.cpnrd.org

Protecting Lives • Protecting Property • Protecting the Future

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301 Centennial Mall South
P.O. Box 94676
Lincoln, Nebraska 68509-4676
Phone (402) 471 2363

STATE OF NEBRASKA
DEPARTMENT OF NATURAL RESOURCES
WATER WELL REGISTRATION MODIFICATION
OWNER USE ONLY

FOR DEPARTMENT USE ONLY

Date Filed 5/1/17 Owner Code No. 113554 Registration No. G-017061
05012017-28895 -MOD F(2) CP NRD
WELL ID C00 F(2) Verdick Merrick Co. Assessor

ALL ITEMS IN SECTION 1 AND SIGNATURE IN SECTION 3 ARE REQUIRED

SECTION 1: ☒ Check here if: This form is also to be used to change the ownership of this well.

A. Well Owner's First Name _____ Last Name _____
OR Company Name MERRICK FOUNDATION INC
Attention Name _____
Address PO BOX 206
City CENTRAL CITY State NE Zip 68826 Telephone _____
Email _____

B. Well Registration No. G-017061 (Only one number per form)

C. State Reason for Change: UPDATE WELL LOCATION AND ACRES IRRIGATED

CORRECTIONS NEEDED

Complete only those items being modified

SECTION 2:

A. If location of well needs to be corrected, fully complete the Legal description of the well including GPS Coordinates (latitude and longitude). Footage may be provided. (1 & 2 REQUIRED)

- Well location: SE 1/4 of the NW 1/4 of Section 19, Township 12 North, Range 7 East/West, MERRICK County.
- Latitude Degree: 40 Minute: 59 Second: 51.25 Longitude Degree: 98 Minute: 09 Second: 35.67 (NAD 83)
- The well is _____ feet from the (North or South) section line and _____ feet from the (East/West) section line.
(circle one) (circle one)

B. Location of water use (give complete legal description) PT SE 1/4 NW 1/4 SECTION 19-12N-7W

For Irrigation Wells: Number of acres irrigated: 16.28

If the location of use is different than what is currently registered, and/or the number of acres irrigated is more than what is currently registered, and you are located in an area that has stays or a moratorium on newly irrigated acres, you **MUST** obtain the written approval of the Natural Resources District **PRIOR TO FILING THIS FORM**. This approval can be the submission of a separate Natural Resources District Approval form by the NRD.

Central State (Natural Resources District) Andrew Fischer (Signature of NRD Staff) 3/22/2017 (Date)

C. Pump information.

- Pumping rate: _____ gallons per minute.
- Drop Pipe diameter: _____ Inches.
- Length of drop pipe: _____ feet.
- Pumping equipment installed: (m) _____ / (d) _____ / (y) _____.
- Brand/Type: _____
- Static Water Level: _____ feet.
- Pumping water level: _____ feet.
- Amount of time pumped: _____.

RECEIVED

MAY 01 2017

DEPARTMENT OF
NATURAL RESOURCES

D. Change of use, complete items 1, 2 and 3. Identify use from this Listing: Dewatering (over 90 days), Domestic, Ground Heat Exchanger, Ground Water Source Heat Pump, Industrial, Injection, Irrigation, Livestock, Monitoring, Observation, Public Water Supply (with spacing (46-638), Public Water Supply (without spacing), Recovery, Other (if well use falls in this category – add specific use).

1. Well was used for: _____
(if necessary, please provide updated pump information)
2. New well use is: _____
3. Date of Change: _____

E. Active to Inactive (please check A or B) with or without pump

On _____, 20____, the water well is ____ a) altered from active to inactive by removing the _____ inch pump and pumping column and properly capping the water well according to state standards or ____ b) no longer in use but pump still in place with a water tight seal according to state standards. (§46-1207.02)

F. I certify that the well has been modified according to information given in section 2 C, E, or J, such that it will pump 50 gallons per minute or less. Pumping Rate: _____

Change to use (Check one of the following): ☐ Livestock ☐ Monitoring ☐ Observation

☐ nonconsumptive or de minimus use approved by the applicable natural resources district. State use: _____

G. Wells in a Series.

1. Is this well a part of a series? _____ Yes.
2. How many total wells in the series? _____
3. If one or more of the wells in the series is currently registered, give all well registration numbers: _____

H. Well Construction Information.

1. Total well depth: _____ feet.
2. Static water level: _____ feet.
3. Pumping water level: _____ feet
4. Well Construction began: (m)____/(d)____/(y)____
5. Well Construction completed: (m)____/(d)____/(y)____
6. Bore hole diameter in inches: Top____ Bottom____
7. Casing and Screen Joints are: Welded____, Glued____, Threaded____, Other____
8. Total Estimate Capacity of Well _____ gallons per minute (to be used to determine sustainability of aquifer)

I. Replacement and decommissioned/modified well information.

Department of Natural Resources Decommission/Modification Certification form or Notice of Decommissioning form is Required for replacement wells

1. Is this well a replacement well? ____ Yes ____ No
2. Registration number of original well: _____ If original well is not registered, date well construction completed (m)____/(d)____/(y)____
3. Original well last operated (m)____/(d)____/(y)____
4. Completion of original well decommission/modification on (m)____/(d)____/(y)____
5. Complete location of water use of original well: _____

J. Well Construction Modification.

1. Total well depth: _____ feet.
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SECTION 3:

I hereby certify that the information provided on this form is true and accurate to the best of my knowledge.

Chuck Griffith Exec. Director
Water Well Owner's Signature

4-27-17
Date

The Department reserves the right to request verification of information provided.

Submit to:
Department of Natural Resources
301 Centennial Mall South
P.O. Box 94676
Lincoln, Nebraska 68509-4676
Phone (402) 471 2363

STATE OF NEBRASKA
DEPARTMENT OF NATURAL RESOURCES
WATER WELL REGISTRATION MODIFICATION
OWNER USE ONLY

FOR DEPARTMENT USE ONLY

Date Filed 5/1/17 Owner Code No. 113554 Registration No. G-017061
05012017-28895 -MOD F(2) CP NRD
WELL ID C00 F(2) Verified Merrick Co. Assessment

ALL ITEMS IN SECTION 1 AND SIGNATURE IN SECTION 3 ARE REQUIRED

SECTION 1: ☒ Check here if: This form is also to be used to change the ownership of this well.

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Central State
(Natural Resources District)

Andrew G. Fisher
(Signature of NRD Staff)

3/22/2017
(Date)

C. Pump information.

- Pumping rate: _____ gallons per minute.
- Drop Pipe diameter: _____ Inches.
- Length of drop pipe: _____ feet.
- Pumping equipment installed: (m) _____ / (d) _____ / (y) _____. 5. Brand/Type: _____
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- Pumping water level: _____ feet.
- Amount of time pumped: _____

RECEIVED

MAY 01 2017

DEPARTMENT OF
NATURAL RESOURCES

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☐ nonconsumptive or de minimus use approved by the applicable natural resources district. State use: _____

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1. Is this well a replacement well? ____ Yes ____ No

Department of Natural Resources Decommission/Modification Certification form or Notice of Decommissioning form is Required for replacement wells

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5. Well Modification completed: (m)____/(d)____/(y)____
6. Casing diameter in inches: Top____ Bottom ____
7. Casing and Screen Joints are: Welded____, Glued____, Threaded____, Other____
8. Total Estimate Capacity of Well _____ gallons per minute (to be used to determine sustainability of aquifer)

SECTION 3:

I hereby certify that the information provided on this form is true and accurate to the best of my knowledge.

Chuck Griffith Exec. Director
Water Well Owner's Signature

4-27-17
Date

The Department reserves the right to request verification of information provided.

Registration No. 9-17061

County of Merrick

Date Filed

DEC 30 1958

STATE OF NEBRASKA
IRRIGATION WELL REGISTRATION

I, D. A. Kneelbeck
(Name of Person registering well)

of Chapman Neb
(Postoffice Address)

County of Merrick State of Nebraska, being first duly sworn upon my oath say:

1st. That the name of the owner of the land upon which the irrigation well is located is Nance
of _____ Street, _____ County of _____
(City or Village)

State of _____

2nd. That the irrigation well is located on the 1/4 Quarter of the N. E. 1/4 Quarter of Section 17
Township 12, Range 7 of the Sixth P. M., Merrick County, and is _____
feet from the 720 North line and 250 feet from the East line line of said tract.

3rd. That the well was installed with the intention of irrigating all or parts of the following described
land: 12-12-7
(Give Quarter, Section, Township and Range)

amounting in all to approximately 80 acres.

(If installation consists of a battery of wells with one outlet, give details on a sheet to be attached hereto.)

4th. That the capacity of said well under normal operating conditions is 500 gallons per minute.

5th. That the depth of the well is 32 feet, measured from the surface of the ground.

6th. That the inside diameter of the casing is 18 inches.

7th. That the static water level in the well is 12 feet below ground surface.

8th. That the depth to water under normal pumping conditions is 12 feet below ground
surface. (Pumping Level)

9th. That the diameter of the pump column is 5 inches. That the diameter of the
bowl or bowls is _____ inches. (Give number of bowls)

10th. That the type and size of impeller is as follows:

11th. That the well was completed on or about the 15 day of Nov, 19 40.

12th. That attached hereto are three copies of the log of the well certified to by the driller of the well.

13th. That the relation which the subscriber to this affidavit bears to said registrant is that of

owner

(State whether owner, tenant or agent for land on which well is located)

and that he is authorized to make this affidavit in behalf of the interest affected.

W. L. Harkness

STATE OF Nebr } ss.
Merrick County }

I hereby certify that the foregoing was signed in my presence and sworn to before me this 29th day
of December 19 58

ae. Rasmussen
Notary Public

State of Nebraska } ss.
Department of Water Resources
Department of Water Resources

This instrument was filed for record at 8 o'clock A. M., on the 20 day of Dec 19 58

Samuel J. Rasmussen T.P.
Director of Water Resources