Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

A

Permit Number
HS002224

Existing Home

Onsite Wastewater Treatment System Permit Application

Include Form B and C. Submit correct fee with this Application

☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

PLEASE PRINT OR TYPE

A. Onsite System Location

Address* 14905 NW 98th St (no rural route) City Raymond, NE Zip 68428

Legal Description NE 1/4 NE 1/4 4 Section 11N Township 5E Range ____ Subdivison ____ Addition 12 & 13 Block Lot

PID 05-04-200-003-000 *Approx. Address (If to be determined) ____

B. Owner

Name Ronald D Javorsky Signature Ron Javorsky

Address 14905 NW 98th St City/State/Zip Raymond, NE 68428

Home Phone 402-610-6282 Work Phone ____

C. Certified Installer

Name: Lloyd Jakoubek Signature Lloyd L. Jakoubek

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-783-2663

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number: ____

Designer Name ____ Firm ____ Work Phone ____

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 3 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 4.95

Garbage Grinder? ☑ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify ____ Design flow in gallons per day ____

Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process

1. Health Department
Site visits ____ Date rec'd ____ ACTION ☐ Approved ☐ Disapproved
Date frwd ____ Signature ____
Comments ____

2. Supt. Bldg. Insp. or Village Clerk
Comments ____ Date rec'd ____ ACTION ☐ Approved ☐ Disapproved
Date frwd ____ Signature ____

3. City or County Engineer
Comments ____ Date rec'd ____ ACTION ☐ Approved ☐ Disapproved
Date frwd ____ Signature ____

Installation Final Written Approval
By ____
Date ____

Business Office Use Only
Date Received 3-28-21 Amount Paid $440.00
Received By JAO Cash/Check No. 10204

White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated: 2/18

Lincoln-Lancaster County Health Department (LLCHD)
Environmental Public Health Division
3131 "O" Street • Lincoln, NE 68510-1514
Phone: 402-441-8643

B

Permit Number:

Onsite Wastewater Treatment System
Soil Evaluation Report

PLEASE PRINT OR TYPE

Onsite System Location

Address 14905 NW 98th St (no rural route) City Raymond NE, Zip 68428

Owner Ron Javorsky Address 14905 NW 98th St, Raymond, NE 68428

Date of Tests 5/24/21 to 5/25/21 Weather: Precipitation 0 Temperature 82°

Percolation Test Data Table

A.	B.	C. D. E. F. Saturation/Swelling Time				G. H. I. J. K. Last 30 mins of 4 hr or last 10 mins of 1 hr Water Level Drop					L. M. N. Results		
		Start		End		Start		Initial	End				
Hole No.	Hole Depth(in)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Date (Mo/Da)	Time (Hr/Min)	Water Lev (in.)	Date (Mo/Da)	Time (Hr/Min)	Elapsed Time Interval	Water Level Drop(in)	Percolation Rates (Min/in = mpi)
1	36	5/24	9:30a	5/25	8:30a	5/25	2:00p	6	5/25	2:30p	30	1/2	60
2	20	"	"	"	"	"	"	6	"	"	"	9/16	53
3	20	"	"	"	"	"	"	6	"	"	"	1/2	60
5								6					
6								6					
7								6					
8								6					
9								6					

Person Conducting Percolation Test

Name: Terri Jakoubek
Phone: 402-783-2663 or 402-890-3870
Address 13800 NW 70th St, Raymond, NE 68428

Sum of Percolation Rates: 173
Average of Rates: 58
Rate Used for Calculation: 58

Soil type (NRCS Maps/Other) Judson SL
Groundwater Depth >8'

DO NOT WRITE BELOW THIS LINE

Reviewing Action

Comments (Soil type, groundwater, floodplain, etc.)

Signature of Reviewing Official Date

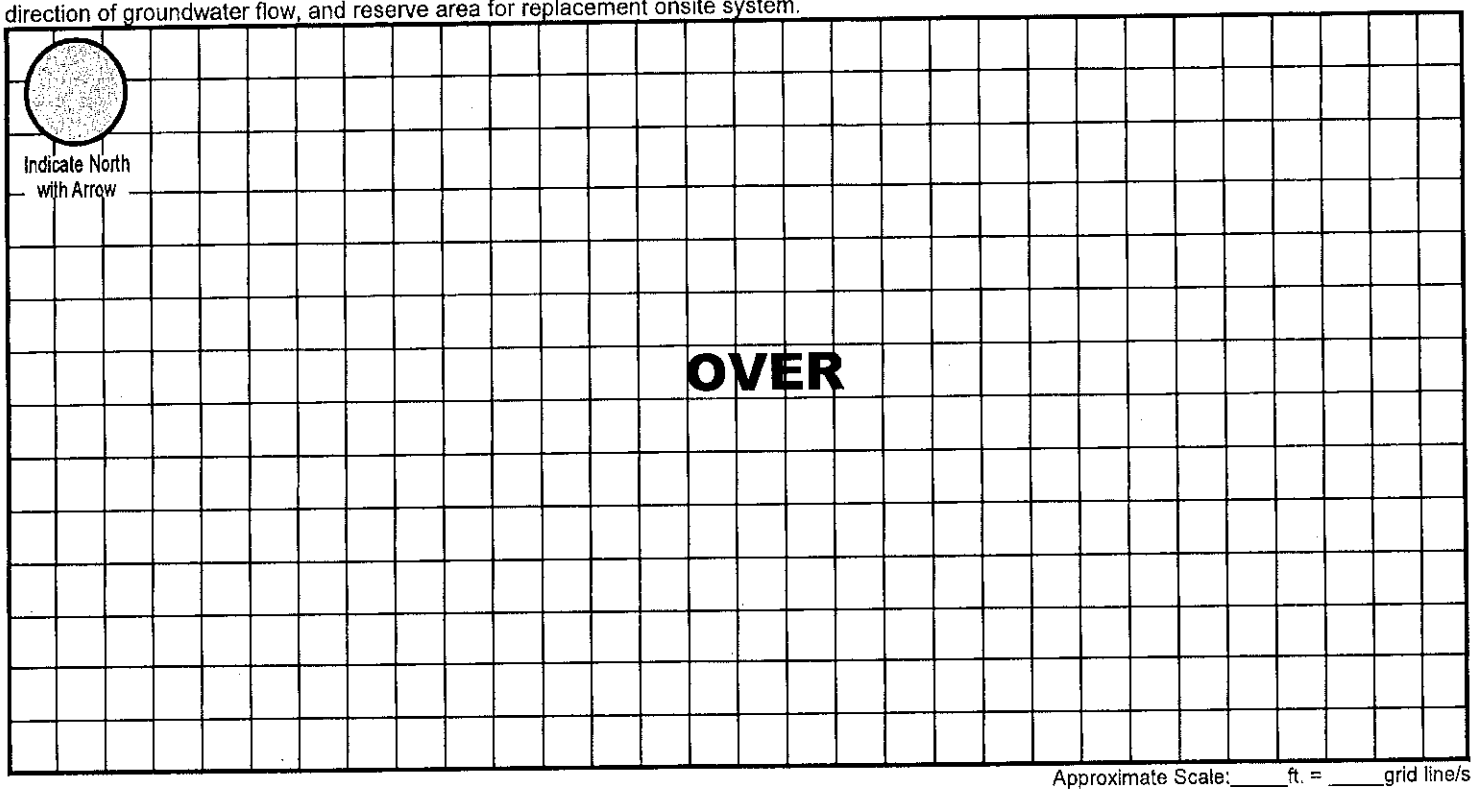
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

C

Permit Number

Onsite Wastewater Treatment System
Preliminary Plan Specification

Draw a plot plan showing onsite system sewer lines, tank, drop or distribution boxes, drainfields, percolation test holes, well, residence, direction of groundwater flow, and reserve area for replacement onsite system.



Approximate Scale: ____ ft. = ____ grid line/s

A. Onsite System Location

Address (no rural route) 14905 NW 98th St City Raymond NE, Zip 68428

B. Proposed Septic Tank/s

Septic Tank Cap. 1500 gals Tank Material: ☑ Concrete ☐ Plastic ☐ Other _____ ☐ Lagoon (Max. Seepage 1/8"/day)

C. Reserve Area for Replacement Onsite System

☐ Drainfield Absorption Area (percolation test required) ☑ Lagoon

D. Drainfield Absorption System

Percolation Rate 58 (min/inch = mpi) No. of Bedrooms 3 Soil Type Judson SL Land Slope ____ %

☑ Trench ☐ Bed ☐ Non-standard (engineer-designed and NDEQ approved) Total square feet of drainfield 1080 Sq. Ft.

Total length of laterals 240' Type of Distribution: ☐ Perforated Pipe ☐ Half-Round ☐ Chambers ☑ Other EZFlow 1203H

No. of Absorption Trenches 4 Width 38" No. of Drop Boxes 1 Distribution Box _____

No. of Absorption Beds _____ Width _____ No. of Distribution Lines per Bed _____

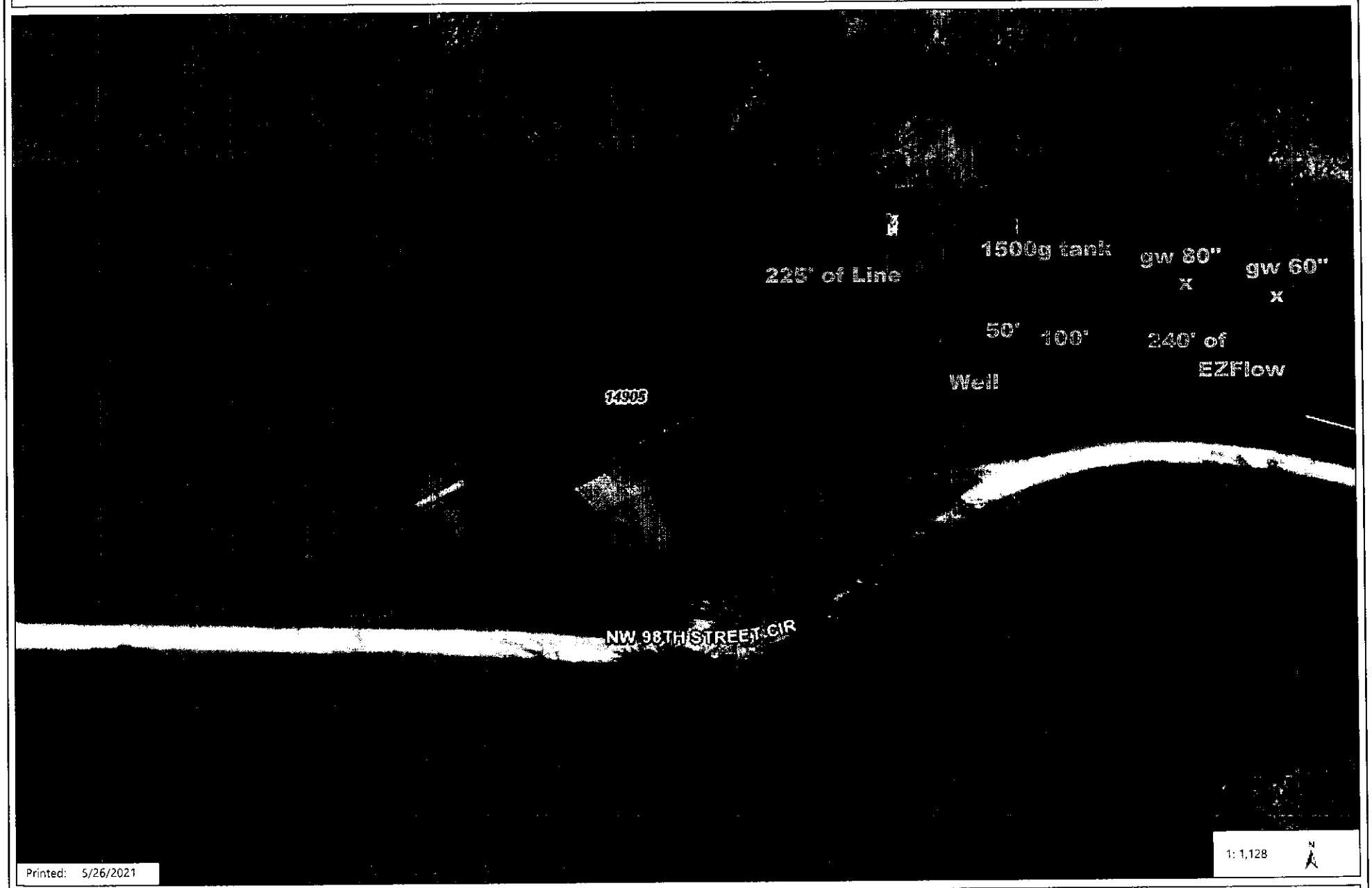
Installer Ken L. Jahnke Date: 5/28/21

Updated 2/18

14905 NW 98th St Cir, Raymond, NE 68428

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map



Printed: 5/26/2021

1: 1,128

Disclaimer: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email assessor@lancaster.ne.gov and you will be directed to the appropriate department.

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3131 O Street Lincoln, Nebraska 68510-1514

ON-SITE WASTE WATER SYSTEM
CONSTRUCTION - INSTALLATION PERMIT
No. HS002224

System Type: Standard

Situs: No Site Address Specified

Issued: 6/1/2021

Expires: 6/1/2022

Description: S4, T11, R5, 6th Principal Meridian, LTS 12 & 13 NE

Owner: JAVORSKY, RONALD DEAN & LINDA GAIL
14905 NW 98 ST
RAYMOND, NE 68428-4067

Patricia D. Lopez

Patricia D. Lopez, RN, MSN, Interim Health Director

Dear Applicant:

The above document is your permit to construct a new On-site Waste Water System at the location listed. Please contact this office once the sytem is complete in order to schedule a final inspection before use.

Patricia D. Lopez

Patricia D. Lopez, RN, MSN
Health Director

RAYMOND CONTRACTING INC
13800 NW 70TH ST
RAYMOND, NE 68428

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 O Street • Lincoln NE 68510-1514
Phone: 402-441-8643

SCANNED

A

Permit Number
HS002224

Existing Home

Onsite Wastewater Treatment System Permit Application

Include Form B and C. Submit correct fee with this Application

☑ Septic System ☐ Lagoon ☐ Other (Refer to Form C)

PLEASE PRINT OR TYPE

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Legal Description NE 1/4 NE 1/4 4 Section 11N Township 5E Range ____ Subdivison 12 & 13 Addition ____ Block ____ Lot

PID 05-04-200-003-000 *Approx. Address (If to be determined) ____

B. Owner

Name Ronald D Javorsky Signature Ron Javorsky

Address 14905 NW 98th St City/State/Zip Raymond, NE 68428

Home Phone 402-610-6282 Work Phone ____

C. Certified Installer

Name: Lloyd Jakoubek Signature Lloyd L. Jakoubek

Address 13800 NW 70th St City/State/Zip Raymond, NE 68428

Work Phone 402-783-2663

D. Engineer ☐ Check and complete if engineer designed system P.E. License Number: ____

Designer Name ____ Firm ____ Work Phone ____

E. This system will serve a

☑ Residential Dwelling Number of Bedrooms 3 Whirlpool Bathtub? ☐ Yes ☑ No Total Acres 4.95
Garbage Grinder? ☑ Yes ☐ No

☐ Commercial Establishment/Other Facility Specify ____ Design flow in gallons per day ____
Type of Wastewater ☐ Domestic ☐ Non-Domestic

DO NOT WRITE BELOW THIS LINE

Approval Process

1. Health Department
Site visits ____
Comments ____
Date rec'd 6/1/21
Date frwd 6/1/21
ACTION ☑ Approved ☐ Disapproved
Signature ____

2. Supt. Bldg. Insp. or Village Clerk
Comments ____
Date rec'd ____
Date frwd ____
ACTION ☐ Approved ☐ Disapproved
Signature ____

3. City or County Engineer
Comments ____
Date rec'd ____
Date frwd ____
ACTION ☐ Approved ☐ Disapproved
Signature ____

Installation Final Written Approval
By ____
Date 6/9/21

Business Office Use Only
Date Received 5-28-21 Amount Paid $440.00 cw
Received By JAO Cash/Check No. 1052490

White - Health Department Yellow - Engineer Pink - Building & Safety

Form A Updated: 2/18

* System Replacement

Lincoln-Lancaster County Health Department
Environmental Public Health Division
3131 N Street • Lincoln NE 68510-1514
Phone: 402-441-8643

D

Permit Number: HS002224

Onsite Wastewater Treatment System
As-Built Description and Drawing

Type of Onsite Wastewater System: ☐ Lagoon (Skip to Back Page) ☑ Subsurface Septic ☐ Mound

Onsite Wastewater System Location PID = 05-04-200-003-000

Address or Legal Description or Parcel Identification Number (PID) 14905 NW 98th St, Raymond, NE 68428

Owner: Ronald D Javorsky Address 14905 NW 98th St, Raymond, NE 68428

A. Wastewater Piping

1. Material: SDR26 Diameter: 4 in.
2. Distance between dwelling and septic tank: 233 ft. (tied onto cast iron coming out of house)

B. Septic Tank

1. Material Concrete
2. Capacity: 1,500
3. Depth to top of tank, below unfinished grade: 18 in.
4. Distance to:
   Well 86 ft. +
   Pressure line N/A ft +
   Property Line 20 ft. +
   Foundation 150 ft. +

C Distribution Box or Drop Box

Distance **and** Direction from septic tank: 73 ft. E
(Drainfield Control Valve)

D. Drainfield/Absorption Field

☑ Trench ☐ Bed

1. Type: ☐ Perforated Pipe ☐ Chamberless ☑ Other
   Material brand and inside width of Chamberless: EZFlow 1203H Bundles
2. Number of Laterals: 4 Depth: 20 to 24 in.
3. Length of each lataral (linear): ft. 60 ft. 60 ft. 60 ft. 60
4. Drainfield size: 1,080 sq. ft.
5. Distance to:
   Well 130' ft. +
   Pressure line N/A ft. +
   Property line 40 ft. +
   Depth of Groundwater 80"

Was the Onsite Wastewater System covered prior to LLCHD inspection? ☑ Yes (Partially) ☐ No

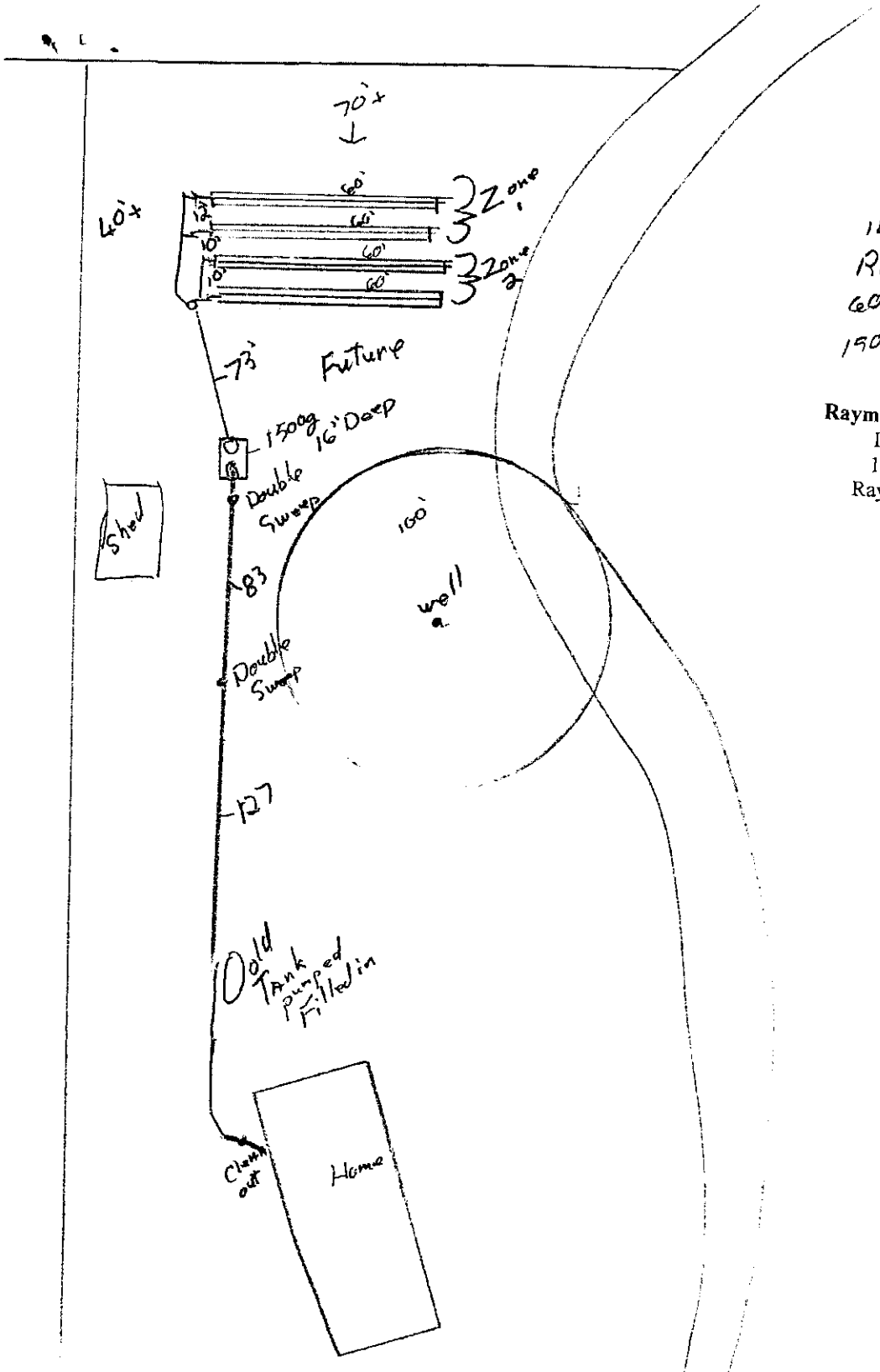
If Yes, the Certified Professional must sign below for final approval:

I swear and affirm that the system complies with Lincoln Municipal Code (LMC) 24.38 and/or County Resolution R-13-0062 requirements and that the information and documentation submitted are true and accurate.

Certified Professional Signature: Neil L. Jahnke Date: 6/9/21

Complete As-Built drawing on the back of this form.

Updated 2/18



3 Bed/Room yes/No

6/9/21
14905 NW 98th.
Raymond NE. 68428
60 mpi 240 EZ Flow.
1500g Tank 16" Deep

Raymond Contracting, Inc.
Lloyd J Jakoubek
13800 NW 70th St
Raymond, NE 68428
402-783-2663

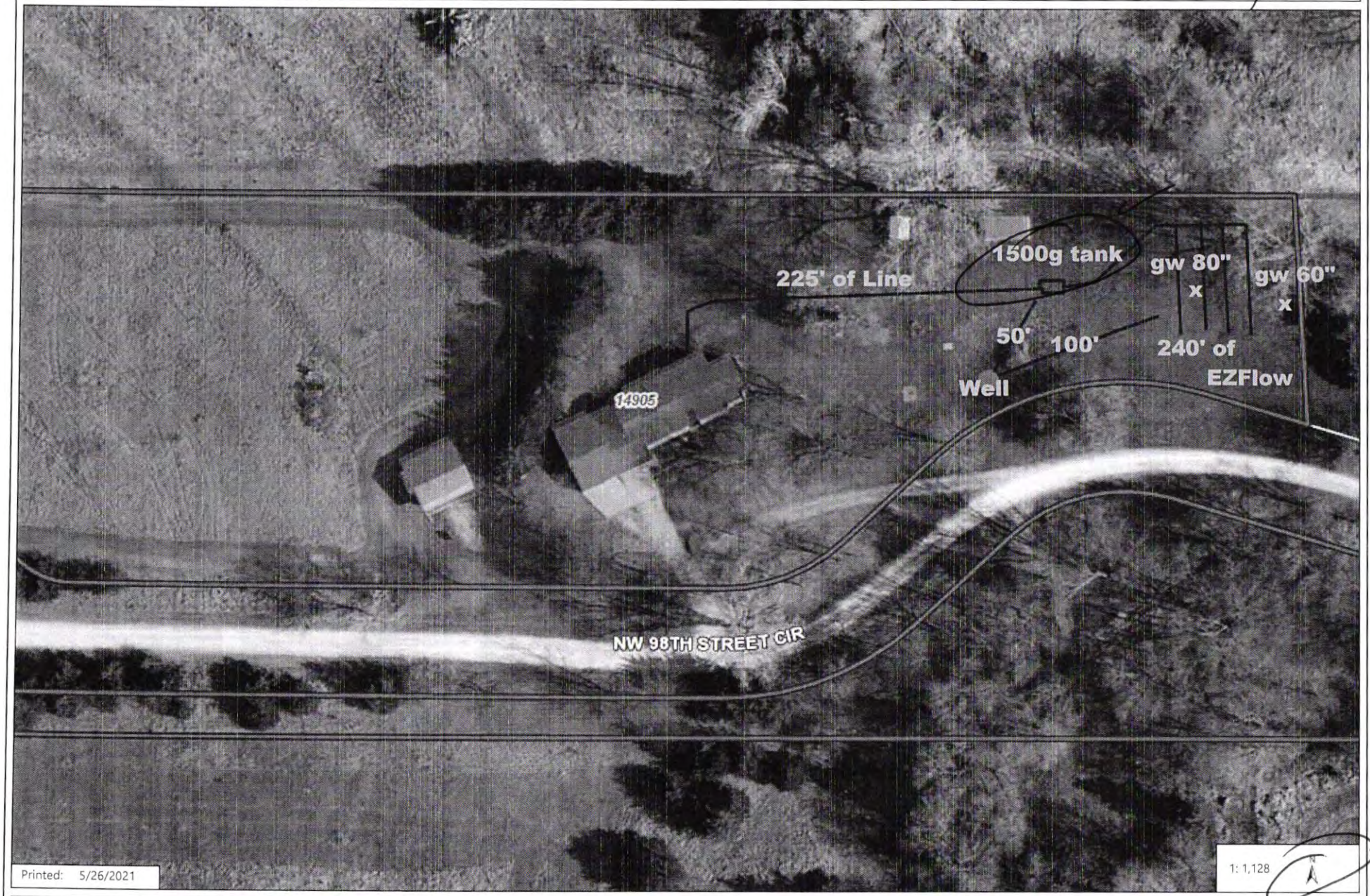
14905 NW 98th St Cir, Raymond, NE 68428

GIS Viewer
CITY OF LINCOLN - LANCASTER COUNTY, NE

City of Lincoln\Lancaster County GIS Map

9

✓ almost exactly this!



4x60

SCANNED

Disclaimer: The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments. If you have questions or comments regarding the data displayed on this map, please email assessor@lancaster.ne.gov and you will be directed to the appropriate department.

1080 Sq Ft installed (4050 Req'd)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

FILE NO. 1451-C

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF PERMIT

May 6, 1979 — THIS PERMIT EXPIRES

Paul van Gillern — ISSUED TO

Goehner, NE 68364 — ADDRESS

T11N, R5E, Section 4, Lot 12 & 13 I.T. — LEGAL DESCRIPTION

REMARKS: NON-TRANSFERABLE

PERMIT	INSPECTION FEE	OCCUPATION TAX	TOTAL
$ 30.00	$	$	$ 30.00
ACCOUNTING NO.	ACCOUNTING NO.	ACCOUNTING NO.	CODE
	110.16	148.14	6-2

RECEIPTED BY	DATE	AMOUNT
Frank Golden	11.6.78	30.00

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

HEALTH — ISSUING OFFICER

THIS PERMIT IS ISSUED AS PROVIDED BY COUNTY RESOLUTION NO. 2832

20109-0977

FORM 20103-0477
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL SEWAGE DISPOSAL SYSTEM
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

A

FILING FEE: $ 30.00

FILE NO. 1451-C

DATE: October 10, 1978

The undersigned hereby requests SITE CLEARANCE and PERMIT to construct an Individual Sewage Disposal System in conformance with appropriate resolution or ordinance, as described herein:

1. Legal description of property: Twp. 11N ; Range 5 E ~~6 PM~~; Section 4 ;
   Block ____ : Lot Pt 13 I.T. : Addition ____ Lan
   Street Address Box 7 Lancaster County

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 2 . Describe ____

3. Type of Individual Sewage Disposal System: Septic Tank ☒ ; Other ☐

4. Distance to public sewer: ____ ft.

Paul Thomas Schumacher
Signature of Applicant (Owner or Lessee)

Dakota Nebraska 68764
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 10/25/78. Date Frwd. 10/26/78. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hook

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 11/6/78 Date Frwd. ____. ACTION: Approved ☐ Disapproved ☐ Signature: Carlyn Sherwood

3. City or County Engineer: Date Rec'd. 11-6-78. Date Frwd. 11-6-78. ACTION: Approved ☐ Disapproved ☐ Signature: Henry Graff

REMARKS OR REASONS FOR DISAPPROVAL ____

Site Visits:
Date: 11/29/78 by: L.C.H.
Date: ____ by: ____
Date: ____ by: ____

White: Health Dept. Copy
Yellow: Engineers Copy
Pink: Bldg. Inspector's Copy

INSTALLATION FINAL WRITTEN APPROVAL
Date: 12/1/78 By: Jerrold C. Hook

FORM 20105-0477
SOIL ABSORPTION TEST DATA REPORT
(Annex to Application)
(Reference: City Ordinance No. 9150 and County Resolution No. 2832)

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 11 N ; Range N-S, E 6th P.M. Section & ¼ Section 4.
Property Dimensions: _____ ft. x _____ ft. Area: 5.13 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ .
Dates of Tests: 10/5/78 to 10/6/78. Weather: Precip. _____ Temp. _____.

OWNER: Dallas G. Bird
Address: Box 7 Bethune Nebraska 68337

PERCOLATION TEST DATA TABLE

a.	b.	c.	d.	e.	f.	g.	h.	i.	j.	k.	l.	m.	n.
		Pre-Saturation Period				Percolation Readings						Results	
		Start		End		Start			End				
Hold No.	Hole Depth (in.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Date (Mo./Day)	Time (Hr./Min.)	Water Level (in.)	Time (Hr./Day)	Water Level (in.)	Elapsed Time (Min.)	Water Level Drop (in.)	Percolation Rates (Min./in.)
1	24	10/5	830PM	10/6	900AM	10/6	350PM		750 PM	3 3/4	4 hrs	2 1/4	2 1/4 30 min
2										3 1/2		2 1/2	2 1/2
3										5		~~2~~ 1	1
4										4 1/2		1 1/2	1 1/2
5										4 1/2		1 1/2	1 1/2
6										3 3/4		2 1/4	2 1/4
7										2 1/2		3 1/2	3 1/2
8										4 1/2		1 1/2	1 1/2
9										4 3/4		1 1/4	1 1/4
10										4		2	2

Paul von Gillern
Signature of Person Conducting Test

Sum of Percolation Rates: _____
Average of Rates: _____
Mean of Rates: _____

Address 3308 North Cotney Blvd Phone 467-4792

(Do not write below this line)

REVIEWING ACTION

Remarks: _____
Soil Type (SCS): _____
Date: _____

Approved Percolation Rate (a)
A. 15 min./inch
B. _____ min./inch
C. _____ min./inch

Paul von Gillern
Signature of Reviewing Official

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO._____

Indicate on sketch if residence and well are exisiting or proposed.

REVIEWING ACTION

Remarks:_____

Date: October 25, 1978

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals 95 ft.
3. With a Trench Width of 48 in.
4. Total Area of Lateral needed ____ sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

D

DATE: 11-29-78

FILE NO. Dallas A. Bird

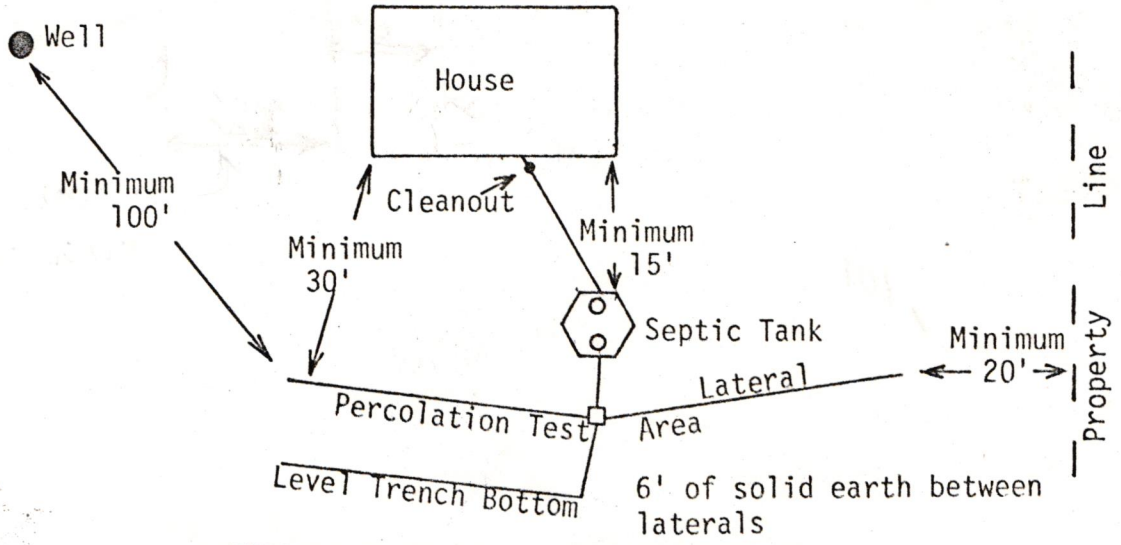
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material Plastic; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 15 in.
3. Distance between dwelling and septic tank 22 ft.
4. Number of clean-outs 2.
5. Distances to:
Well or Suction Line 150 ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

B. SEPTIC TANK:
1. Material Fiberglass; No. of compartments 1.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Lewis-A-Shed)
4. Manholes: Over Inlet; diam. 16 in.
Over Outlet; diam. 8 in.
Riser Above ☐ Below ☐ Grade ~~4~~ in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☒
7. Depth of top of tank below finished grade 24 in.
8. Distances to:
Well or Suction Line 120 ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

C. DISTRIBUTION BOX:
1. Material Plastic; Number - available outlets seven.
2. Factory Built: Yes ☒ No ☐
(Company ____)
3. Distance from Septic Tank 5 ft 11 ft.

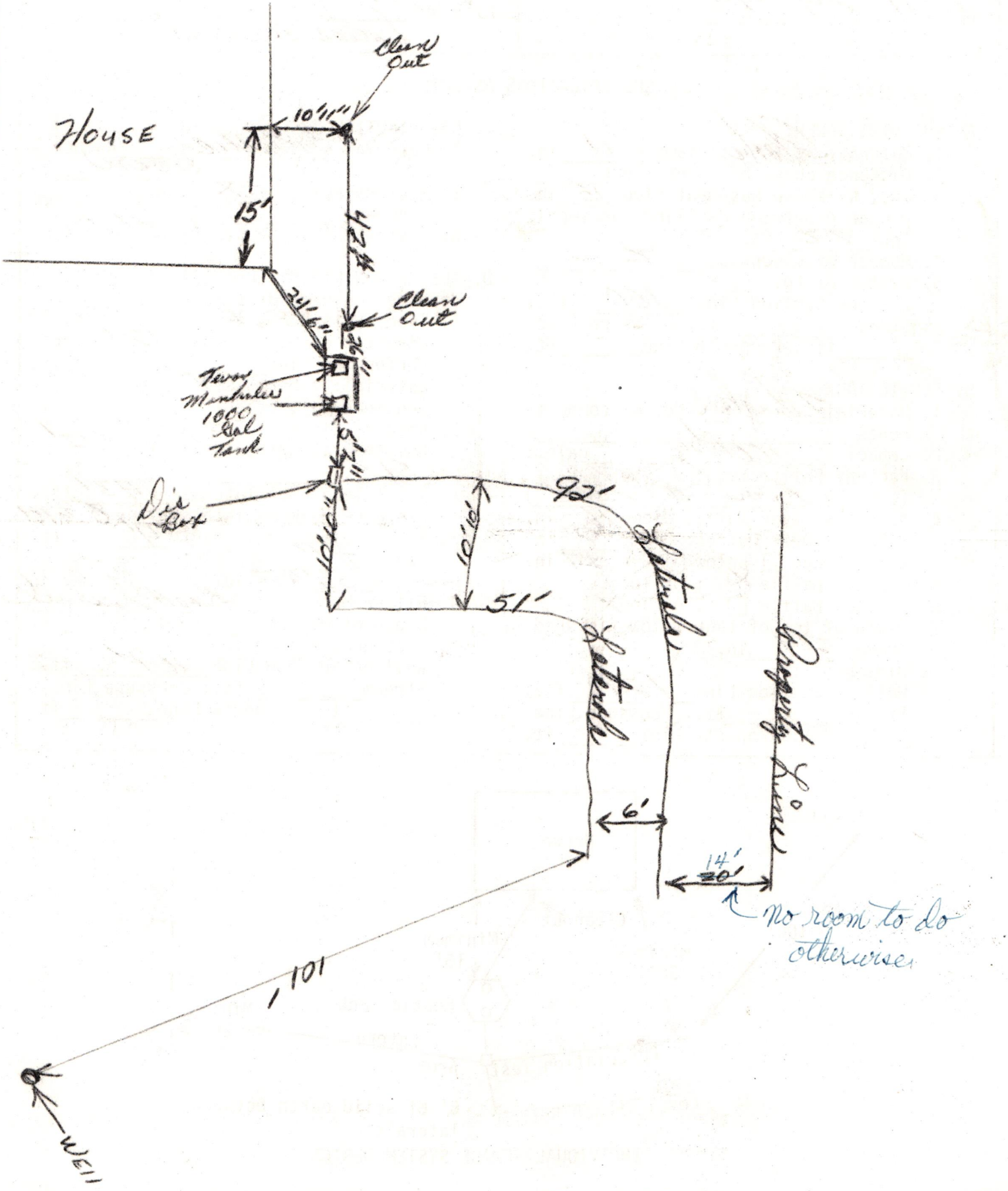
D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☒ Perforated Pipe ☐
Diameter of Half Round 12" or Perforated Pipe ____.
Material: fiberglass ☒ ; plastic ☐ ; concrete ☐ ; other ____.
2. Lateral Lines:
Number 2 ; Length of each line 92', 51', ____, ____, ____ ft.;
Total length of laterals 143' ft.;
Distance between lateral lines 6' 10"
3. Trench dimensions: Width 4' ft.;
Slope 4" in/100 ft.; Average Depth 3½ to 22 in.
4. Filter Material: Road Gravel
Depth of Material 16" in.
5. Distances to:
Well or Suction Line 101' ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

AS BUILT DRAWING OF SYSTEM

DATE 11-29-78 INSTALLER Raymond Gilbert



$15.00 check to: Lincoln-Lancaster Co. Health Dept.

APPLICATION FOR WELL REGISTRATION AND SAMPLING

DATE:

Legal Description of Property: Lot one (1), in Section 4, Township 11 North, Range 5 East of the 6th P.M., Lancaster County, Nebraska

Directions to Property: Take I-180 to US 34 West, 5 miles to State Highway 79; turn north on SH 79; 5 miles to Raymond Rd. Turn left at blinking yellow light, go 3 miles to NW 98th. Turn left on NW 98th; go 50 yds to dead end lane running west. Our house is approximately ¼ mile west of NW 98th. (Apricot colored house - rust roof.)

Land Owners
Name: Dallas A & Betty E Bird
Address: RR 1, Box 69, Raymond, NE 68428
Phone: 783-2154

Send Results to:
Name:
Address:
Phone: SAME

Land Owners Signature: Dallas A. Bird

I hereby authorize the Health Department to inspect, sample, and register the well on the above property.

Well Data: Please fill in the following information as thoroughly as possible. Leave blank any areas that are unknown.

Location of well: Aproximately 100 ft east of house
Approximate Depth of well: 220 ' - pumping from 110 '
Casing Material:
Casing Diameter:
Is well located in a pit: No
Type of pump:

POINT SOURCES - DISTANCE WITHIN 1/2 MILE OF WELL FROM: UPHILL/DOWNHILL FROM WELL

HOUSE FOUNDATION	100 (distance)	FEET	(U)/D
CESSPOOL		FEET	U/D
SEPTIC TANK	125	FEET	(U)/D
SEWAGE DISTRIBUTION FIELD		FEET	U/D
WASTE STABILIZATION LAGOON		FEET	U/(D)
BARN YARD	75	FEET (no stock)	U/(D)
NEAREST WELL	¼ mile	#####	(U)/D
NEAREST PASTURELAND	75	FEET	U/(D)
NEAREST CROPLAND	¼ mile	#####	U/D
SHOP		FEET	U/D
GRAINERY		FEET	U/D
FUEL TANKS		FEET	U/D
OTHER POTENTIAL CONTAMINATION SOURCE		FEET	WHAT?

ADM.0002/34

top of well at ground level x
corral too close.