FILE #W-118

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL WATER WELL CONSTRUCTION — TYPE OF LICENSE OR PERMIT

FEBRUARY 26, 1986 — THIS LICENSE OR PERMIT EXPIRES

ALEX HOGG — LICENSEE OR PERMITTEE

6801 PINE LAKE RD. ROUTE #9 LINCOLN, NE. 68516 — ADDRESS

T9N; R7E; Sec 21; Lot 29 NE — NAME OF ESTABLISHMENT, IF ANY

ADDRESS

REMARKS: NON TRANSFERABLE NRW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ 45.00	019851	$ 45.00

Valid Receipt Only if Machine Receipted In This Space

Serial No. Date and Amount

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW

FORM: 20222-0483
REQUEST FOR SITE CLEARANCE AND PERMIT FOR INDIVIDUAL WATER WELL

LINCOLN LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN, NEBRASKA 68502
PHONE: 471-7800

FILING FEE $45.00

FILE NO. W-118

DATE: AUGUST 21, 1985

The undersigned hereby requests: Site Clearance and Permit to construct a new individual water well ☒ ; Permit existing well ☐ ; well repair or alteration involving opening of well ☐ ; in conformance with appropriate ordinance, as described herein:

1. Legal description of property: Twp. 9N : Range 7E : Section 21
   Block _____ : Lot 29 NE : Addition _____
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe _____
3. Distance to Public Water Supply: 1 mile ft.
4. Intended use of well Residential Water Supply

Alex Hogg
Signature of Applicant (owner or lessee)

6801 PINE LAKE RD. Rt 9, LINCOLN, NE. 68516
Address

Sewage Permit Applied For Yes ☐ No ☐ Not Applicable ☒

1. Health Department: Date Rec'd 8/23/85. Action: Approved ☒ Disapproved ☐
   Date Frwd. 8/26/85. Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 8/26/85. Action: Approved ☒ Disapproved ☐
   Date Frwd. 8/26/85. Signature: [illegible]
3. City or County Engineers: Date Rec'd 8/26/85. Action: Approved ☒ Disapproved ☐
   Date Frwd. 8/26/85. Signature: Jerome G. Obrist

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 8/27/85 by J.C.H
Date: _____ by _____
Date: _____ by _____

Nitrate Level <0.1 PPM
Bacteriological Analysis Satisfactory
Yes ☒ No ☐

INSTALLATION FINAL WRITTEN APPROVAL
Date: 8/28/85 By: J. C. Hood

Health Department copy: White
Engineers Copy: Light Green
Building Inspectors Copy: Light Blue

FORM 23-13

FORM: 20223-0483 RECD AUG 23 1985
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. W-118

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN NE 68502
Phone: 471-7800

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 21 T. 9N R. 7E Block ____ Lot 29IT Addition ____

Owner Alex Hogg Address ~~70th & Hiway #2~~ 68th & Pine Lake Rd. RFD 9

LOG OF WELL	
Depth Ft.	Description
0 to 15	dk. brn. c.
15-30	dk. sand / very sandy c.
30-40	blue c.
40-50	red / pink shale
50-60	yell. sh.
60-80	dk. red / white sh.
80-85	whi. / yell. sh
85-110	red / pink sh.
110-135	whi. / yell. sh.
135-167	very fine ss
167-180	coarse ss
180-184	very coarse ss - fine gravel
184-185	shale
185-186+?	coarse ss

WELL COMPLETION RECORD

Drilling Method: Rot. Circ.

Depth (from ground level), Ft. 184'
Date Completed 8-14-85

Casing: Length, Ft. 174; Dia.In. 4"
Wall Thickness, Inch 200+; type ~~SDR 21~~ PVC

Screen: Length, Ft. 10 Dia.In. 4"
Type Keystone wire wrap slot Size .030

Drop Pipe: Length, Ft. ____ Dia.In. ____

Water Level, Surface to top of water, Ft.:
Static 95', Pumping ____

Yield: 50 ggm/min, Measured ☐ , Est. ☐
Chlorination Completed Yes ☑ No ☐

The above information including "Log of Well" is a true record of the job performed by me.

Driller Bill Moser
(Signed)

REMARKS NITRATE NITROGEN < 0.1 p.p.m.
BACTERIOLOGICAL O.K.

Address ____

Date 8-20-85

DO NOT WRITE BELOW THIS DOUBLE LINE

Health Department forwarded copy of record to Nebraska Conservation and Survey Department for Scientific Record ☒

FORM 23-4

980331001

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☐ Enclosed is $150.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 6801 Pine Lake Rd Lincoln Ne

CR 3591 Twp 9N Range 7E Section 21 1/4 NE 1/4 Block ___ Lot 29 Addition ___

Directions to Property Go to 70 Pine Lake Rd thaw West to 6801 Pine Lake Rd. Woods Bros Sign in front South Side

Location of Well 1985 By driveway East side of House Tap Location: Inside ☐ Outside ☐

Location of Sewage System South 22 Year Installed 2

	NAME	ADDRESS	PHONE
CR 28203 Present Owner:	Alex Hogg 68106-3313	OMAHA	558-4922
ACR 71967 Tenant/Buyer:	2206 S 46 Ave Dan & Nadean Spaulding	513 Skyway Rd Lin Ne	486-1356
Return to:	Bernie Divis Homa Real Estate	2855 So 70th Lin Ne	432-8723

Signature of Applicant Bernie Divis Address " " Date 3/16/98

HEALTH DEPARTMENT USE ONLY

RECEIVED
Date 3/17/98
Initials ___
Amount $150.00
Check No. 5894

DATA ENTRY
Date ___/___/___
Case No. ___
Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 3/20/98

WATER SYSTEM:	Approved	Disapproved
Construction	☑	☐
Bacteria	☑ 0 /ml	☐ ___ /ml
Nitrate	☑ 0.1 ppm	☐ ___ ppm

SEWAGE SYSTEM
Approved ☐
Provisional ☑
Disapproved ☐

Additional Site Visits
Date 3/26/98 by J.C.H.
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: WATER NOT TURNED ON. 3/26/98 On now J.C.H IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. SYSTEM APPARENTLY PREDATES REGULATIONS HENCE APPROVAL IS PROVISIONAL. See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved ☑ **SEWAGE DISPOSAL SYSTEM:** Approved ☐ Provisional Approval ☑

Approved by Jerrold C. Hood R.E.H.S. Date 3/30/98

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 10-95

Note: CALL Bernie Divis 432-8723 if need to get into the House

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☑ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 6801 Pine Lake Rd Lincoln, NE

Parcel ID 16 - 21 - 200 - 007 - 000 (i.e. 99-99-999-999-999)

NE Twp 21 Range 9 Section 7 1/4 ___ 1/4 ___ Block ___ Lot 29 Addition ___

Directions to Property South side of Pine Lake Road, just west of 70th Street - mailbox w/ 6801 cut front.

Location of Well West side of house Tap Location: Inside ☑ Outside ☐

Location of Sewage System Behind (south) side of house Year Installed 1966

Site Hazards (dogs, etc.) none

	NAME	ADDRESS	PHONE
Present Owner:	Don Spaulding	6801 Pine Lake Rd Lincoln, NE 68516	420-2529
Tenant/Buyer:	Ventures for Excellence Inc.	1422 Kingston Rd Lincoln, NE 68506	483-2844
Return to:	Don Spaulding	6801 Pine Lake Rd Lincoln, NE 68516	420-2529 (Fax)

Signature of Applicant Don Spaulding Address same Date 7/25/03

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 07/28/03 Amount 200.00 Check No. 5809 Initials ___

DATA ENTRY Date ___/___/___ Case No. ___ Initials ___

PRELIMINARY STATUS--By Ron Marquart **DATE:** 7/28/03

WATER SYSTEM:	Approved	Disapproved
Construction	☑	☐
Bacteria	☑ 0 /ml	☐ ___ /ml
Nitrate	☑ 1.5 ppm	☐ ___ ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☑
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___

Date ___/___/___ by ___

Date ___/___/___ by ___

Comments: Installation of septic system predates regulations. There is no record of a permit or inspection of this system. This is a provisional approval. There was no visible malfunction at the time of inspection. Recommend checking to see if septic tank needs pumping and if septic tank is watertight. See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved ☑ **SEWAGE DISPOSAL SYSTEM:** Approved ☐ Provisional Approval ☑

Approved by Ron Marquart R.S. Date 7/30/03

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

White - Applicant after approval Yellow - Environmental Health

Revised/Reprint: 9-00

sale 8-28-03 P23041-20

P26797-55

Lincoln-Lancaster County Health Department

3140 "N" Street, Lincoln, Nebraska 68510 Phone: 441-8022

REAL ESTATE TRANSFER/LOAN APPROVAL FORM

FOR PROPERTY IN **LANCASTER COUNTY** ONLY

This form must be completed and returned with payment to request a real estate transfer inspection.

MAKE CHECK PAYABLE TO: "Lincoln-Lancaster County Health Department" or "LLCHD"

☐ Enclosed is $200.00. Allow two weeks for processing. Incomplete information will delay processing.

Legal Description of Property: Street Address 6801 Pine Lake Rd. Lincoln, NE

Parcel ID 16 - 21 - 200 - 007 - 000 (i.e. 99-99-999-999-999)

NE Twp 9N Range 7E Section 19 1/4 1/4 Block Lot 29 Addition

Directions to Property South Side of Pine Lake Rd. - Just west of 70th St.

Location of Well west side of house + NE OF HOUSE Tap Location: Inside ☐ Outside ☒

Location of Sewage System Behind south side of house by Deck steps Year Installed 1966

Site Hazards (dogs, etc.)

	NAME	ADDRESS	PHONE
Present Owner:	Ventures to Excellence / Vic Cottrell, Pres.	1422 Kingston Rd. Lincoln	483-2844
Tenant/Buyer:	Brian Benson		489-3564
Return to:	Vic Cottrell		483-2138 (Fax)

Signature of Applicant Vic Cottrell Address Same Date 1/24/05

HEALTH DEPARTMENT USE ONLY

RECEIVED Date 1/24/05 Amount $200.00 Check No. 1045 Initials

DATA ENTRY Date / / Case No. Initials

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 1/24/05

WATER SYSTEM:	Approved	Disapproved
Construction	☒	☐
Bacteria	☒ 0 /ml	☐ /ml
Nitrate	☒ 0 ppm	☐ ppm

SEWAGE SYSTEM	
Approved	☐
Provisional	☒
Disapproved	☐

Additional Site Visits

Date / / by

Date / / by

Date / / by

Comments: THE SEWAGE SYSTEM PREDATES REGULATIONS + INSPECTIONS HENCE APPROVAL IS PROVISIONAL. NO EVIDENCE OF MALFUNCTION. IF THE SEPTIC TANK HAS NOT BEEN PUMPED RECENTLY IT SHOULD BE CHECKED TO SEE IF IT IS NEEDED. See Attached Letter ☐

FINAL STATUS

WATER SYSTEM: Approved ☒ **SEWAGE DISPOSAL SYSTEM:** Approved ☐ Provisional Approval ☒

Approved by Jerrold C. Hood R.E.H.S. Date 1/26/05

Approval or disapproval is based on State and local standards for construction, location and water quality. Inspection is based on visible construction and operation at the time of inspection. Approval or provisional approval does not imply or express a guarantee of system operations.

White - Applicant after approval Yellow - Environmental Health Pink - Business Office

Revised/Reprint: 9-00

AS BUILT DRAWING OF INSTALLATION IN RELATION TO BUILDINGS, PROPERTY LINES, OTHER WELLS, AND SOURCES OF CONTAMINATION. INDICATE NORTH.

