LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

3140 "N" STREET Lincoln, NE 68510-1514 (402) 441-8000

NON TRANSFERABLE

PERMIT

Permit
WATER WELL

No. 95400051601

Issued 11/09/95
Expires 05/09/96
Revenue Code 19851

Establishment
MERLIN LAWSON
T9N R7E SEC 22
PORTSCHE HEIGHTS BLK 1 LOT 2

FEES: $75.00

TOTAL $75.00

Permittee
MERLIN LAWSON
7700 PORTSCHE LN
LINCOLN NE 68516

Issued By M. Jane Ford
Health Director

THIS LICENSE OR PERMIT IS ISSUED SUBJECT TO REVOCATION AS PROVIDED BY LAW "POST IN A PROMINENT PLACE"

NOV 7 1995

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 $ 75.00

FILE NO. _____

DATE: Oct 25, 1995

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 22 NW¼ Block 1 : Lot 2 : Addition PORTSCHE HEIGHTS
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe _____
3. Distance to Public Water Supply: _____ Ft.
4. Intended use of well Residence

Merlin P. Lawson
Signature of Applicant (owner or lessee)

7640
~~7700~~ PorTsche Ln.
Address

Lincoln NE 68516

Sewage Permit Applied For Yes ☐ No ☒ Not Applicable ☒

1. Health Department: Date Rec'd 11/7/95. Date Frwd. 11/9/95. Action: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 11-9-95. Date Frwd. 11-9-95. Action: Approved ☒ Disapproved ☐ Signature: [signature]
3. City or County Engineers: Date Rec'd 11-9-95. Date Frwd. _____. Action: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 10/15/04 by Jerrold Hood
Date: _____ by _____
Date: _____ by _____

Nitrate Level 0.3 PPM
Bacteriological Analysis Satisfactory
Yes ☒ No ☐

INSTALLATION FINAL WRITTEN APPROVAL
Date: OCTOBER 20, 2004 By: J.C. Hood

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

FORM 23-13

NOV 1 9 1997

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13553
FILE NO. _____

Lincoln-Lancaster County
HEALTH DEPARTMENT
3140 "N" STREET LINCOLN, NE 68510-1514

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 22 T. 9 R. 7 Block ____ Lot ____ Addition ~~7700~~ 7640 Portsche Lane

Owner MERLIN LAWSON Address ~~7700~~ 4640 PORTSCHE LANE, LINCOLN, NE 68516

LOG OF WELL	
Depth ft. --to--	Description
0- 5	BRN CLAY
5- 50	YEL CLAY
50-127	BLUE CLAY
127-155	RED & YEL CLAY
155-199	YEL SHALE W/SOME SS
199-235	MED TAN SS
235-250	MED CRS LIGHT YEL SS
250-270	CRS TAN SS W/LITTLE GRAVEL
270-275	RED SHALE

WELL COMPLETION RECORD

Drilling Method: ROTO/WATER

Depth (from ground level), Ft. 270'
Date Completed 5/14/96

Casing: Length, Ft. 260'; Dia.In. 4"
Wall Thickness, Inc. .214 ; type PVC

Screen: Length, Ft. 10' Dia.In. 4"
Type PVC WOP , slot Size .030

Drop Pipe: Length, Ft. 200' Dia.In. 1 1/4"

Water Level, Surface to top of water, Ft.:
Static 175', Pumping 180' EST

Yield: 20 ggm, Measured ☒ , Est. ☐
Chlorination Completed Yes ☒ No ☐

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

Driller _____ (Signed)

P. O. BOX 308
Address Hickman, Nebraska 68372-0308

Date 18 NOVEMBER 1997

REMARKS NITRATE NITROGEN 0.3 P.P.M.
BACTERIOLOGICAL O.K.

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