LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

SEWAGE INSTALLATION

No. 91380075201

Issued 09/20/91
Expires 03/20/92

ESTABLISHMENT

DONNA SHINAUT
T9N R7E SEC 22
AMBER HILL ESTATES BLK 1 LOT 2

FEES: Permit 018754 $150.00

Total $150.00

Issued By COUNTY HEALTH

PERMITTEE

DONNA SHINAUT
RR0001
BOX 00112
BENNET NE 68317

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

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
9/20/91	PAID

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: 471-7800

A

FILING FEE: $_____

FILE NO._____

DATE: 9-20-91

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. 9N ; Range 7E ; Section 22 ;
   Block 1 : Lot 2 : Addition Amber Hill Estates 1st addition
   Street Address 7911 So 70th

2. Property Use: Residential ☒ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 3 . Describe_____

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

4. Distance to public sewer: _____ft. ~~WILL INSTALL WHATEVER SOIL PERCOLATION TEST INDICATES~~ LAGOON

Dona M Smart
Signature of Applicant (Owner or Lessee)

Rt 1 Box 112 Bennet NE 68317
Address

(Do not write below this double line)

1. Health Department: Date Rec'd. 9/20/91. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 9/20/91. Date Frwd. _____. ACTION: Approved ☒ Disapproved ☐ Signature: Mel Gebard
3. City or County Engineer : Date Rec'd. 9/20/91. Date Frwd. 9/20/91. ACTION: Approved ☒ Disapproved ☐ Signature: Dennis Bartels

REMARKS OR REASONS FOR DISAPPROVAL WELL PERMIT APPLIED FOR

Site Visits:
Date: 10/29/91 by: J. C. H. Not a lot of fall possible. Not completely fenced, no warning signs, tree grazing in
Date: 2/6/98 by: _____
Date: _____ by: _____

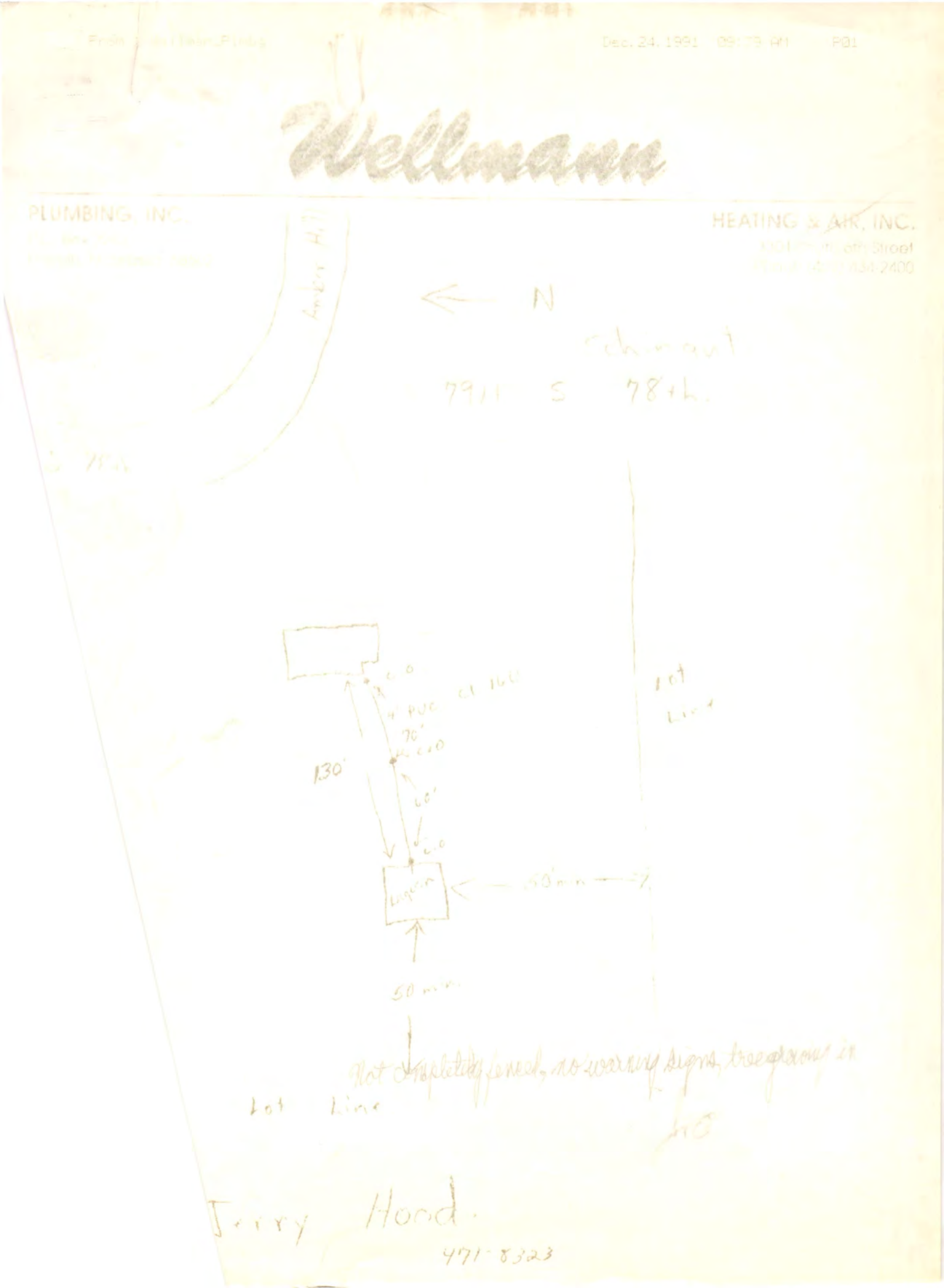
INSTALLATION FINAL WRITTEN APPROVAL
Date: _____ By: _____

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

FORM 23-43

Wellmann

PLUMBING, INC.
HEATING & AIR, INC.



Jerry Hood.
471-8323

Rod

#1 Legal description
T6N R7E Sec 22 Block 1 Lot 2
7911 Se 78th St

#2 262' well 4" Well

#3 266' ~~test~~ hole 4½" 8" Hole to 262'

#4 Depth of Gravel Pack 160' to top of gravel bed

#5 puddled Clay to 20' Bentonite Seal in place 5" thick

#6 ~~25~~ 260' 4" PVC Sch 160 .173 wall thickness on Well Casing. Strainers .214 Wall thickness on 40: 20' .025 Slot 20' .016 Slot on top of the first 20: all PVC

#7 See Paragraph #6

#8 Static Water level 182'

#9 Pumping water level 200'

#10 Yield of Well 20 gpm

#11 Will Send another copy of well log to the owner Kirk Swanchara

What happened to the Standardized forms?

Rod.

the log for 7911 So 28th

0-1 top soil
1-138 gray & yellow clay layers
138-155 white & red clay layers
155-180 white clay some sandstone layers
180-185 yellow clay
185-220 sandstone 40% white clay layers
220-224 gray clay
224-262 sandstone 50% white clay layers
262-266 white clay
Well depth 262' water table 182'
Strainers Johnson slotted pipe 20' .025 20' .016
Well sand used for gravel pack .060-.090 grain
air developed approx 20 gal per minute
Well needed extra pumping to become clear
[illegible] better water

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

Division of Environmental Health
2200 St. Marys Ave Lincoln, NE 68502 (402) 471-8000

NON TRANSFERABLE

PERMIT

WATER WELL

No. 91400026801

Issued 09/20/91
Expires 03/20/92

ESTABLISHMENT

DONNA SHINAUT
T9N R7E SEC 22
AMBER HILL ESTATES BLK 1 LOT 2

FEES: Permit 019851 $75.00

Total $75.00

Issued By COUNTY HEALTH

PERMITTEE

DONNA SHINAUT
RR0001
BOX 00112
BENNET NE 68317

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

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
9/20/91	PAID

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: 471-8000

FILING FEE $ _____

FILE NO. 9140002GB

DATE: _____

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
   Block 1 : Lot 2 : Addition Amber Hill Estates 1st Edition
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe _____
3. Distance to Public Water Supply: _____ Ft.
4. Intended use of well single family residence

1/2M South of 84th & Hwy 2.

Donna M Brandt
Signature of Applicant (owner or lessee)

Rt 1 Box 112 Benner NE 68313
Address

City Water Yes ☐ No ☒

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 9/20/91. Action: Approved ☒ Disapproved ☐
   Date Frwd. 9/20/91. Signature: Jerrold C. Wood
2. Supt. Bldg. Insp.: Date Rec'd 9/20/91. Action: Approved ☐ Disapproved ☐
   Date Frwd. 9/20/91. Signature: Mel Goddard
3. City or County Engineers: Date Rec'd 9-20-91. Action: Approved ☒ Disapproved ☐
   Date Frwd. 9-20-91. Signature: John D. Murray

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 12/31/91 by J. C. Wood Depression around well
Date: 3/25/92 by J. C. Wood Depression filled
Date: _____ by _____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 3/27/92 By: J. C. Wood

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

FORM 23-13

RECEIVED DEC 3 0 1991

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

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN NE 68502
Phone: 471-7300

9140002688

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 22 T. 7N R. 7E Block 1 Lot 2 Addition Amber Hills Addn
Owner Michael Schafer Address 7911 So 78th St
1710 20 2nd St 68502

LOG OF WELL	
Depth Ft.	Description
0 to 1	T S
1-138	Gray & yellow clay
138-155	white, red clay
155-180	white Clay, Sandstone
180-185	Yellow
185-220	Sandstone 40%
220-224	gray clay
224-262	Sandstone 50%
262-266	white Clay

WELL COMPLETION RECORD

Drilling Method: ~~12-18-91~~ rotary

Depth (from ground level), Ft. 266
Date Completed 12-18-91

Casing: Length, Ft 257 Dia. In. 4
Wall Thickness, Inc 160 ; type PVC

Screen: Length, Ft. 20 Dia. In. 4
Type PVC Johnson Slot Size .025

Drop Pipe: Length, Ft 220 Dia. In. 1

Water Level, Surface to top of water, Ft.:
Static 182 . Pumping 200

Yield: 15 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 Keith Muenchau (Signed)

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

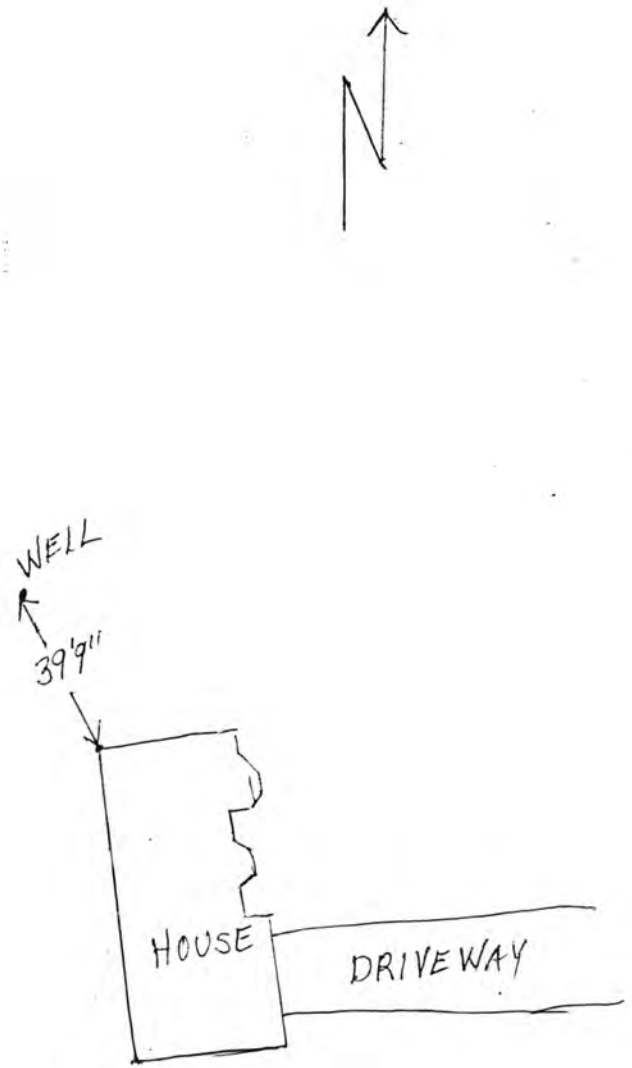
Address 7331 Vine

Date 12-25-91

DO NOT WRITE BELOW THIS DOUBLE LINE

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

Form 11-4


N
WELL
39'9"
HOUSE
DRIVEWAY
SEWAGE SYSTEM