LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

P E R M I T

Permit
SEWAGE INSTALLATION

No. 93380106901

Issued 09/27/93
Expires 03/27/94
Revenue Code 18754

Establishment
GILLIAM CONSTRUCTION
T9N R7E SEC 22
AMBER HILLS 2ND LOT 2
8100 AMBER HILL ROAD

FEES: $150.00

TOTAL $150.00

Permittee
GILLIAM CONSTRUCTION
2020 S 202 ST
EAGLE NE 68347

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"

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: $ 150.00

FILE NO. _____

DATE: 9/23/93

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 _____ : Lot ~~24~~ : Addition ~~Amber Hill addition~~ 3RD ADD.
Street Address 8100 Amber Hill RD., AMBER HILLS

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.

Gilliam Const
Signature of Applicant (Owner or Lessee)

2020 50. 202th
Address EAGLE, NEBR. 68347

(Do not write below this double line)

1. Health Department: Date Rec'd. 9/24/93. Date Frwd. 9/24/93. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 9/27/93. Date Frwd. 9/27/93. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

3. City or County Engineer: Date Rec'd. 9-27-93. Date Frwd. 9-27-93. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL HAS WELL PERMIT

Site Visits:
Date: 10/12/93 by: J.C.H.
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 2/13/95 By: Jerrold C. Hood

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

FORM 23-43

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: 471-7800

B

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township 9N ; Range 7E ; Section & ¼ Section 22 .
Property Dimensions: 450 ft. x 505.50 ft. Area: _____ acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☐ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☒ .
Dates of Tests: _____ to _____. Weather: Precip. _____ Temp. _____.

OWNER: Terry Hutchinson
Address: 8100 Amber Hill Rd

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	36"	9/25	9:00Am	9/26	9:00	9/26					30	1/2"	
2	"	"									"	1/2"	
3	"	"									"	5/8"	
4	"	"									"	1/2"	
5	"	"									"	1/2"	
6	"	"									"	5/8"	

Robert L. Gilliam
Signature of Person Conducting Test

Address 2220 So. 202 Phone 781-2272

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

(Do not write below this line)

REVIEWING ACTION

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

See attached

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

_____
Signature of Reviewing Official

8100
Amber Hill Rd

	1	2	3	4	5	6
1:20	0	0	0	0	0	0
1:50	1/4	5/8	3/4	1/8	1/8	3/4
2:20	3/4	3/8	1/2	1 1/2	1/4	1/2
2:50	1/4	1/2	5/8	3/8	3/8	3/8
3:25	1/2	1/2	3/8	1/4	1/4	1/2
3:55	1/2	1/2	5/8	1/4	1/4	1/2

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

RECEIVED FEB 10 1995

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

D

DATE: _____

FILE NO. _____

SPECIFICATIONS AS BUILT

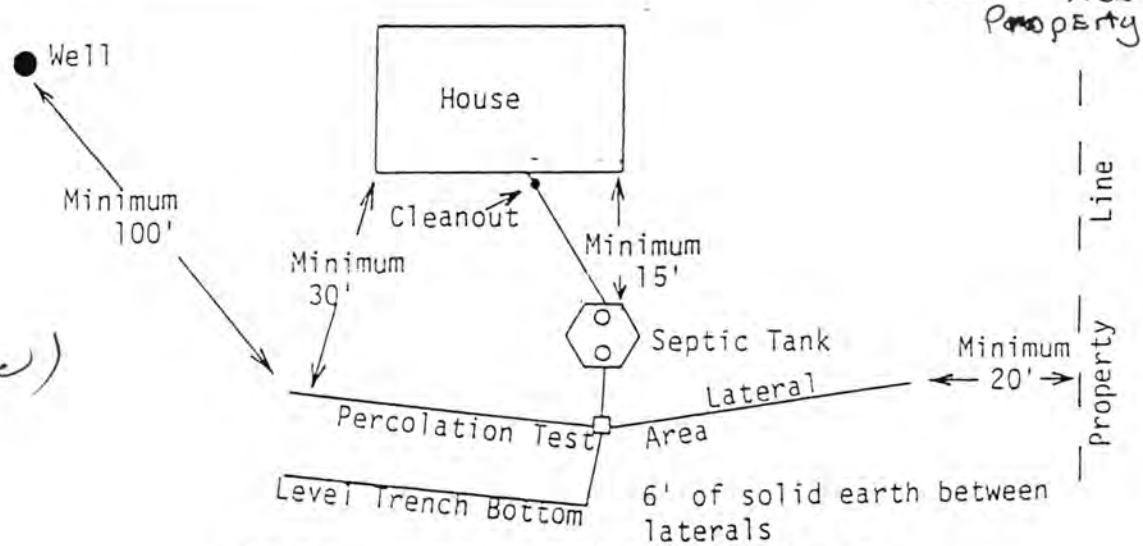
A. BUILDING SEWER:
1. Material plastic; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 55' ft.
4. Number of clean-outs 1.
5. Distances to: Well or Suction Line 100' ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments ____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐ (Company Precast step)
4. Manholes: Over Inlet; diam. 4" in. Over Outlet; diam. 4" in. Riser Above ☐ Below ☒ Grade 12 in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 18" in.
8. Distances to: Well or Suction Line 150 ft.; Stream ~ ft.; Pressure Line ____ ft.; Property Line 100' North ft. 200'-West

C. DISTRIBUTION BOX:
1. Material Concrete; Number - available outlets ____.
2. Factory Built: Yes ☒ No ☐ (Company Precast step)
3. Distance from Septic Tank 10' ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒ Diameter of Half Round ____ or Perforated Pipe ____. Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other ____.
2. Lateral Lines: Number 4 ; Length of each line 100', 100', 100', 50' ft.; Total length of laterals 350' ft.; Distance between lateral lines 12 ft.
3. Trench dimensions: Width 3 ft.; Slope 4"to6" in/100 ft.; Average Depth 36" in.
4. Filter Material: gravel Depth of Material 12" in.
5. Distances to: Well or Suction Line 150 to 200' ft.; Stream ~ ft.; Pressure Line ~ ft.; Property Line 100 to 200 ft.

→ Distance from End of Lateral Fields to North Property Line.



(over)

TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

RECEIVED FEB 10 1995

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: 471-7800

D

DATE: _____

FILE NO. _____

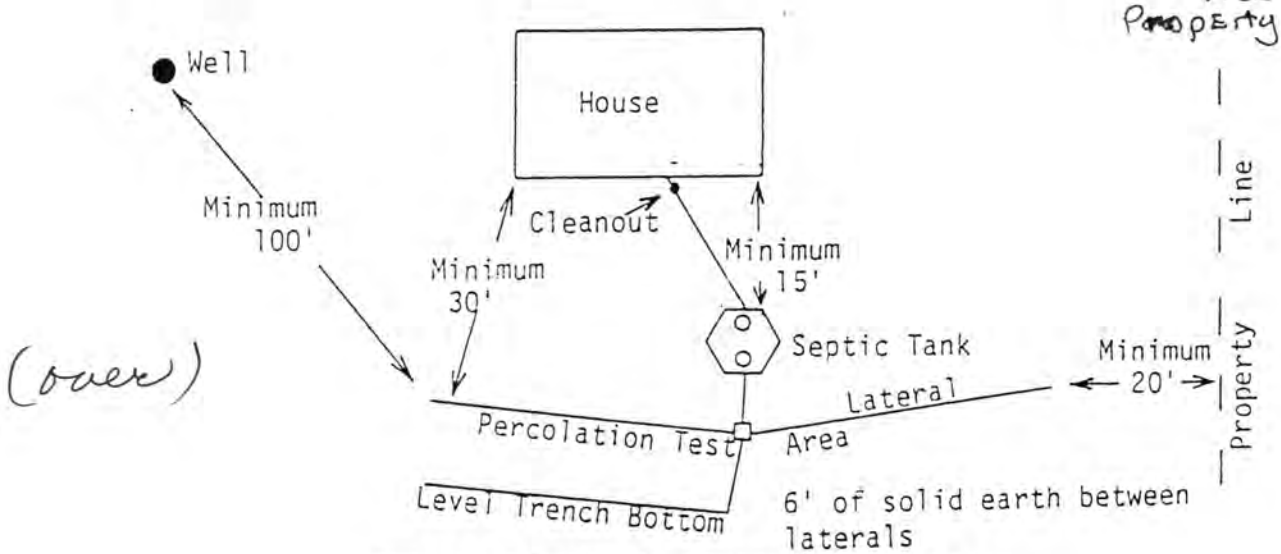
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1. Material plastic; Diameter 4 in.
2. Distance above basement floor ____ in., or below basement floor 12 in.
3. Distance between dwelling and septic tank 55' ft.
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5. Distances to: Well or Suction Line 100' ft.; Stream ____ ft.; Pressure Line ____ ft.; Property Line ____ ft.

B. SEPTIC TANK:
1. Material Concrete; No. of compartments ____.
2. Capacity 1000 gals.;
3. Factory Built: Yes ☒ No ☐ (Company PRECAST STEP)
4. Manholes: Over Inlet; diam. 4" in. Over Outlet; diam. 4" in. Riser Above ☐ Below ☒ Grade 12 in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 18" in.
8. Distances to: Well or Suction Line 150 ft.; Stream ~ ft.; Pressure Line 200'. WEST ft.; Property Line 100' North ft.

C. DISTRIBUTION BOX:
1. Material Concrete; Number - available outlets ____.
2. Factory Built: Yes ☒ No ☐ (Company PRECAST STEP)
3. Distance from Septic Tank 10' ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒ Diameter of Half Round ____ or Perforated Pipe ____. Material: fiberglass ☐ ; plastic ☒ ; concrete ☐ ; other ____.
2. Lateral Lines: Number 4 ; Length of each line 100', 100', 100', 50' ft.; Total length of laterals 350' ft.; Distance between lateral lines 12 ft.
3. Trench dimensions: Width 3 ft.; Slope 4" to 6" in/100 ft.; Average Depth 36" in.
4. Filter Material: gravel; Depth of Material 12" in.
5. Distances to: Well or Suction Line 150 to 200' ft.; Stream ~ ft.; Pressure Line ~ ft.; Property Line 100 to 200 ft. → Distance from End of Lateral Fields to North Property Line.



(over)

TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT

ENVIRONMENTAL HEALTH DIVISION

2200 St. Marys Ave Lincoln, NE 68502-3785 (402) 441-8000

NON TRANSFERABLE

P E R M I T

Permit
WATER WELL

No. 93400039101

Issued 09/13/93
Expires 03/13/94
Revenue Code 19851

Establishment
TERRY HUTCHESON
T9N R7E SEC 22
AMBER HILL LOT 41

FEES: $75.00

TOTAL $75.00

Permittee
TERRY HUTCHESON
8100 AMBER HILL RD
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"

RECEIVED SEP 10 1993

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 $_____

FILE NO._____

DATE: 9/8/93

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 West half of : Lot 41 : Addition Amber Hill
2. Well use: Residential ☒ ; Commerical ☐ ; Other Use ☐
   Describe Household water
3. Distance to Public Water Supply: ? Ft.
4. Intended use of well Drinking + Domestic use.

Jerry D Hutchison
Signature of Applicant (owner or lessee)

8100 amber Hill Road Lincoln NE 68516
Address

Sewage Permit Applied For Yes ☐ No ☒ Not Applicable ☐

1. Health Department: Date Rec'd 9/10/93. Action: Approved ☒ Disapproved ☐
   Date Frwd. 9/13/93. Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 9/13/93. Action: Approved ☒ Disapproved ☐
   Date Frwd. 9/13/93. Signature: Gary Spin
3. City or County Engineers: Date Rec'd 9-13-93. Action: Approved ☒ Disapproved ☐
   Date Frwd._____. Signature: Lekal

REMARKS OR REASONS FOR DISAPPROVAL_____

Site Visits:
Date: 10/13/93 by L. C. Hood
Date: 2/1/94 by L.C.Hood & L.CHESS
Date:_____ by_____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 2/3/95 By: L.C.Hood

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

FORM 23-13

RECEIVED OCT 1 2 1993

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

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 22 T. 9N R. 7E Block____ Lot____ Addition_____

Owner Terry Hutcheson Address 8100 Amber Hill Rd. 68516

LOG OF WELL	
	Description
Depth Ft. To	

WELL COMPLETION RECORD

Drilling Method:

Depth (from ground level), Ft._____
Date Completed_____

Casing: Length, Ft._____; Dia. In._____
Wall Thickness, Inc._____; type_____

Screen: Length, Ft._____ Dia. In._____
Type_____, slot Size_____

Drop Pipe: Length, Ft. 240 Dia. In. 1

Water Level, Surface to top of water, Ft.:
Static 224, Pumping 235

Yield: 12 ggm, Measured ☒, Est. ☐
Chlorination Completed Yes ☐ No ☐

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

Pump Installer
~~Driller~~ Keith Muenchau
(Signed)

REMARKS NITRATE NITROGEN <0.1 ppm. BACTERIOLOGICAL O.K.

Address 7331 Vine ST
LINCOLN Ne 68505

Date 10-8-93

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

Roger Strader
Office: (402) 673-3465

Well Contractor's License
#39022

STRADER'S
BLUE VALLEY DRILLING

Rt. #1 Box 89A
Pickrell, NE 68422

WELL LOG



Name Terry Hutcheson **Date** October 6 , 19 93

Address 8100 Amber Hill Road - Lincoln, NE 68516 **Phone** 423-1583

Location of Water Well County: Lancaster	1/4 | NE 1/4 | SE 1/4	Section 22	Township T 9 N	Range R 7 E
Distance and Direction from nearest town (or) street address (or) Block, Lot and Addition	8100 Amber Hill Road - west of 84th & south of Hwy. #2		Ground elevation ____ ft. Well use Domestic	

Depth of completed well 286 ft.
Method drilled Reverse hydraulic
Bore hole diameter 18 in.
Static water level 223 ft.

Yield		Pumping Water Level	
20-30	gpm at	250	ft. lift
	gpm at		ft. lift
	gpm at		ft. lift

Hrs. Development 4 Method Air

Blank Casing: Length 266 ft.
Inside diameter 5 in. Outside diameter 5½ in.
Type of Material PVC
Wall thickness or grade 200#
Joints: [redacted] / Glued / [redacted]
Guides at ____ ft. & ____ ft.

Screen: Inside Diameter 5 in.
Type of material & grade 200# PVC
Screen interval(s):
266 ft. to 286 ft.
____ ft. to ____ ft.
Slot size .015 Type Saw slot
Trade name ____ Guides @ 284 ft.
Bottom Cap: Type PVC Size 5 in.

Gravel Pack Intreval(s):
200 ft. to 286 ft.
____ ft. to ____ ft.
____ ft. to ____ ft.
Grade size Road gravel Amount 6 yds.

Grout:
6 to 10 ft., with Bentonite
10 to 200 ft., with Clay
____ to ____ ft., with ____

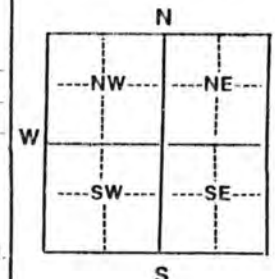
TOP	BOTTOM	FORMATION
0	21	Clay - brown
21	81	Clay - tan & yellow
81	93	Clay - gray & yellow
93	144	Clay - sandy blue
144	150	Sand - fine to medium blue
150	157	Clay - sandy gray
157	163	Sand - fine blue
163	184	Clay - sand blue
184	199	Sandstone - hard fine tan
199	211	Clay - red & white
211	232	Clay - yellow & tan
232	261	Clay - red & white
261	269	Sandstone - soft fine to medium yellow
269	271	Sandstone - fine tan
271	285	Sandstone - fine to medium tan
285	292	Clay - tan

Disinfection:
Completed? Yes X No ____
Was a chemical/bacteriological analysis obtained? Yes ____ No ____
If yes, give Mo./Day/Year ____ Laboratory ____
Recommended pump setting 260 ft. Pump Installer Lincoln Drilling
Remarks ____

Well Location: 2450 ft. from [redacted]/south section line.
500 ft. from east/[redacted] section line

Drillers Signature ____ Drawing on back if needed.

Locate well with an "X" in section block



One Square Mile



AREA OF
SEPTIC SYSTEM

HOUSE
(JUST
BASEMENT
AT THIS
TIME

• WELL