Lincoln-Lancaster County Health Department

ENVIRONMENTAL HEALTH DIVISION
3140 N STREET · LINCOLN, NE 68510-1514 (402) 441-8000

Permit

WATER WELL
NEW WATER WELL CONSTRUCTION

Permit # 00400087501

Issued 01/25/00
Expires 07/25/00
Revenue Code 3162

FEES: $75.00

Establishment

PATRICIA H KAY
T9N R7E SEC 28
COUNTRY LANE ESTATES BLK 7 LOT 1
6525 VANDERSLICE LN

Permitee

PATRICIA H KAY
7921 THORNVIEW RD
LINCOLN NE 68506

TOTAL: $75.00

Leon F. Vinci, MPH, Health Director

• POST IN A PROMINENT PLACE • NOT TRANSFERABLE

011630

Lincoln-Lancaster County Health Department
Environmental Health Division
3140 "N" Street ● Lincoln, NE 68510-1514
Phone: 402-441-8022

Permit No. 00-CC085

PID # 16-03-205-017-000

Well 75
Septic 150

Request for Site Clearance and Permit for Individual Water Well

The undersigned hereby requests:

- ☒ Site Clearance and Permit to construct a new individual water well - $75.00
- ☐ Annual Permit for an existing well - $50.00
- ☐ Permit to repair or alter existing well involving opening of well - $25.00

1. Well Site Address 6525 Vandeventer Lane City Lincoln, NE Zip _____
(No Rural Route Please)
Legal description of property:
Twp 9N; Range 7E; Section 28; Block 7; Lot 1; Addition County Lane

2. Well use: ☒ Residential; ☐ Commercial; ☐ Other; Describe: _____

3. Distance to Public Water Supply _____ feet.

Signature of Owner Patricia A. Kay

Print Name PATTY KAY
Current Address 7921 THORNVIEW RD
LINCOLN NE. 68506
Current Home Phone 484-5141
Work Phone _____

Signature of Contractor _____

Print Name MIKE MARZLHO
Address 700 LAKEWOOD DRIVE
LINCOLN NE. 68506
Home Phone 489-6031
Work Phone 489-6161
Cellular Phone 450-4525

Sewage Permit Applied for: ☒ Yes ☐ No ☐ Not applicable

Please Submit Permit Fee with This Request
Please Do Not Write Below This Line

Approval Process: Lincoln Municipal Code 8.44

1. Health Department — Date received 1/25/00, Date forwarded 1/25/00 — ACTION ☒ Approved ☐ Disapproved Signature: Jerold C. Hood
2. Building & Safety — Date received 1/25/00, Date forwarded 1/25/00 — ACTION ☐ Approved ☒ Disapproved Signature: _____
3. City Engineer — Date received 1/25/00, Date forwarded 1/25/00 — ACTION ☒ Approved ☐ Disapproved Signature: _____

REMARKS OR REASONS FOR DISAPPROVAL: _____

Site Visits:
Date: 6/23/00 By Jerold C. Hood
Date: ___/___/___ By _____
Date: ___/___/___ By _____

Installation Final Written Approval
By: Jerold C. Hood
Date: 6/26/00

Nitrate Level 0.5 mg/L
Chloride Level _____ mg/L
Bacteriological Analysis Satisfactory
Yes X No ____
Other _____

Business Office Use Only
Date Rec'd: 01/25/00
Amt Paid: $ 75.00
Rec'd By _____ Cash/Check No. 2902

Also Sewage

Distribution:
White - Health Dept. Lt. Green - Engineer Lt. Blue - Bldg Inspector

PID # entered 6/26/00
16-03-205-017-000

MAY 8 2000

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. 0040000875

LINCOLN-LANCASTER COUNTY
HEALTH DEPARTMENT
3140 "N" STREET LINCOLN, NE 68510-1514

DATA SHEET FOR WATER WELL

Legal Description: Sec. 28 T. 9 R. 7 Block 7 Lot 1 Addition 9901 S. 66TH

Owner ROBERT & PATRICIA KAY Address 7921 THORNVIEW RD, LINCOLN, NE 68506

LOG OF WELL	
Depth Ft to:	Description
0- 10	DARK BRN CLAY
10- 50	YEL CLAY
50- 70	SANDSTONE
70- 80	RED SHALE
80-140	BLUE SHALE & SS
140-170	YEL SHALE
179-215	FINE SS
215-230	CRS SS
230-235	SHALE & MED TAN SS
235-261	MED FINE TAN SS
261-270	YEL SHALE & SS

WELL COMPLETION RECORD

Drilling Method: ROTO/WATER

Depth (from ground level). Ft. 261'

Date Completed 3/28/00

Casing: Length, Ft. 241' :Dia. In. 4"

Wall Thickness, Inc. .214 :Type PVC

Screen: Length, Ft. 20' Dia. In. 4"

Type PVC WOP&SLOTTED, Slot Size .025

Drop Pipe: Length, Ft. 180' Dia. In. 1 1/4"

Water Level, Surface to top of water, Ft.:

Static 145', Pumping 155' EST

Yield: 20 gpm, Measured XX. Est.

Chlorination Completed Yes XX No

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

Driller [signature]
(Signed)

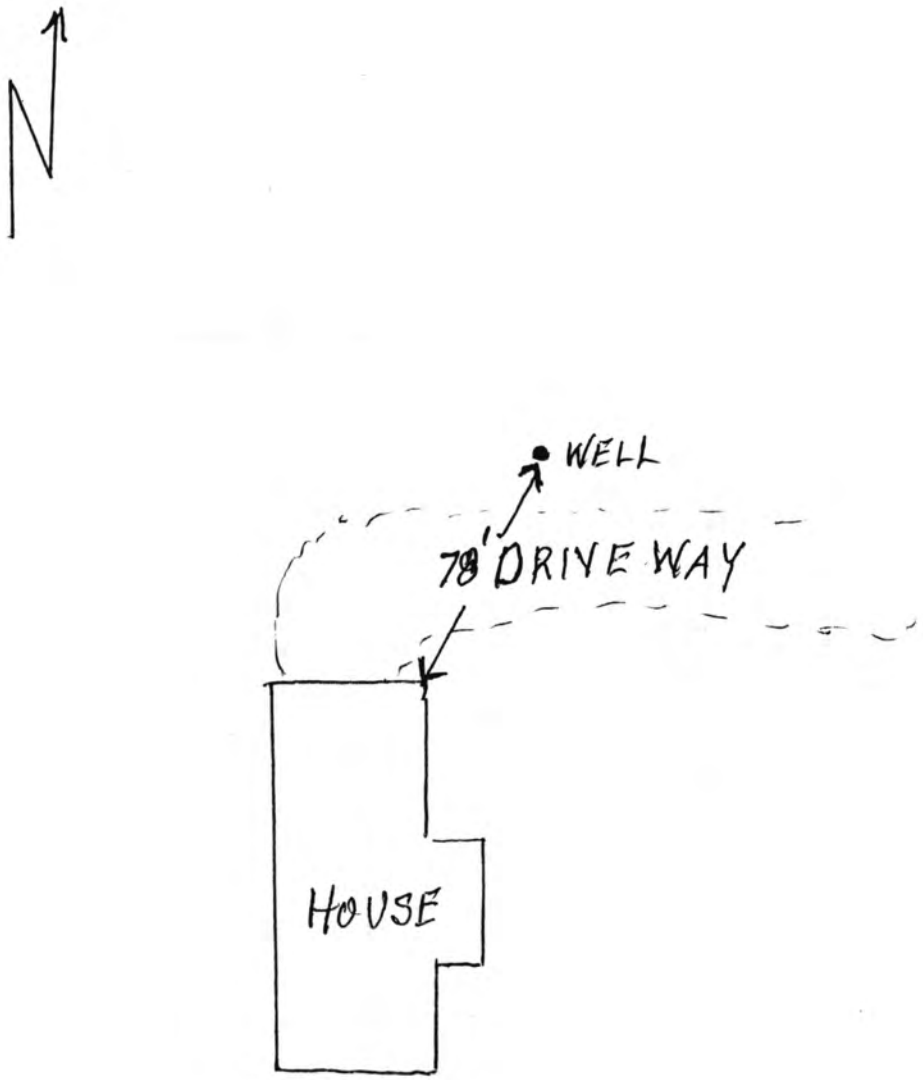
Address: P. O. BOX 308
HICKMAN, NE 68372-0308

Date: 5 MAY 00

Remarks NITRATE NITROGEN 0.5ppm.
BACTERIOLOGICAL O.K.

DO NOT WRITE BELOW THIS DOUBLE LIN

Health Department forwarded copy of record to Nebraska Conservatioin and Survey Department for Scientific Record X


N
WELL
78' DRIVE WAY
HOUSE
AREA OF
SEPTIC SYSTEM