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. 92380081701

Issued 04/03/92
Expires 10/04/92

ESTABLISHMENT

CHRIS GRABENSTEIN
T9N R7E SEC 29
KENSINGTON ESTATES BLK 4 LOT 1

FEES: Permit 018754 $150.00

Total $150.00

PERMITTEE

CHRIS GRABENSTEIN
4630 ANTELOPE RD
APT 110
LINCOLN NE 68506

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE

DATE	AMOUNT
4/3/92	PAID

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

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: 3/23/92

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 29 ;
   Block 4 : Lot 1 : Addition [redacted] KENSINGTON ESTATES
   Street Address ~~5400 HWY 6 LN~~ NOW 8801 SOUTH 55TH ST.

2. Property Use: Residential ☑ ; Commercial ☐ Other Use ☐
   No. of Bedrooms 4 . Describe _____

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

4. Distance to public sewer: 2 MILES ft. ~~WILL INSTALL WHATEVER SOIL PERCOLATION TEST INDICATES~~

Chris Eckhardt
Signature of Applicant (Owner or Lessee)

4630 [redacted] ANTELOPE CRK. #110
Address
LINCOLN NEB. 68506

(Do not write below this double line)

1. Health Department: Date Rec'd. 3/23/92. Date Frwd. 3/24/92. ACTION: Approved ☒ Disapproved ☐ Signature: Jerrold C. Nord

2. Supt. Bldg. Insp.: or Village Clerk: Date Rec'd. 3/24/92. Date Frwd. 3/24/92. ACTION: Approved ☒ Disapproved ☐ Signature: M. Goddard

3. City or County Engineer: Date Rec'd. 3-24-92. Date Frwd. 3-24-92. ACTION: Approved ☒ Disapproved ☐ Signature: [signature]

REMARKS OR REASONS FOR DISAPPROVAL _____

Site Visits:
Date: 9-22-92 by: P.D
Date: _____ by: _____
Date: _____ by: _____

INSTALLATION FINAL WRITTEN APPROVAL
Date: 5-15-96 By: [signature]

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

B

RECEIVED JUL 17 1992

FILE NO. _____

PROPERTY WHERE SOIL TESTED:

Location: Township _____; Range _____; Section & ¼ Section _____.
Property Dimensions: _____ ft. x _____ 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: 3/23/92 to 3/24/92. Weather: Precip. Ø Temp. 65°F

GRABENSTEIN COURT. LOT 1 - BLK 4
5400 MUSIC LANE 29-9-7
(ILELISHGTON ESTATES) 488-3221 & 500-6825

OWNER: GRABENSTEIN
Address: 4630 ANTELOPE CREEK DR.
LINC. Nebr. 68506

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"	3/23	10:30	3/24	9:00	3/24	9:00	6"	9:30	5 1/4"	30min	3/4"	
2	36"	3/23	10:30	3/24	9:00	3/24	9:00	6"	9:30	4 3/4	30min	1 1/4"	
3	36"	3/23	10:35	3/24	9:05	3/24	9:05	6"	9:35	4 1/8"	30min	1 7/8"	
4	36"	3/23	10:35	3/24	9:05	3/24	9:05	6"	9:35	5 3/8"	30min	5/8"	
5	36"	3/23	10:40	3/24	9:10	3/24	9:10	6"	9:40	5 1/8"	30 min	1/4"	
6	36"	3/23	10:40	3/24	9:10	3/24	9:10	6"	9:40	5 3/8"	30 min	1/4"	
7	36"	3/30	5:00	3/31	5:30	3/31	5:30	6"	6:00	5 1/4"	30 min	3/4"	
8	36"	3/30	5:00	3/31	5:30	3/31	5:34	6"	6:00	5 3/8"	30 min	5/8"	
9	36"	3/30	5:35	3/31	5:35	3/31	5:35	6"	6:05	5"	30 min	1"	

Daniel E Grabenstein
Signature of Person Conducting Test

Address 1376 Chautauqua Ave. Phone 476-3313

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

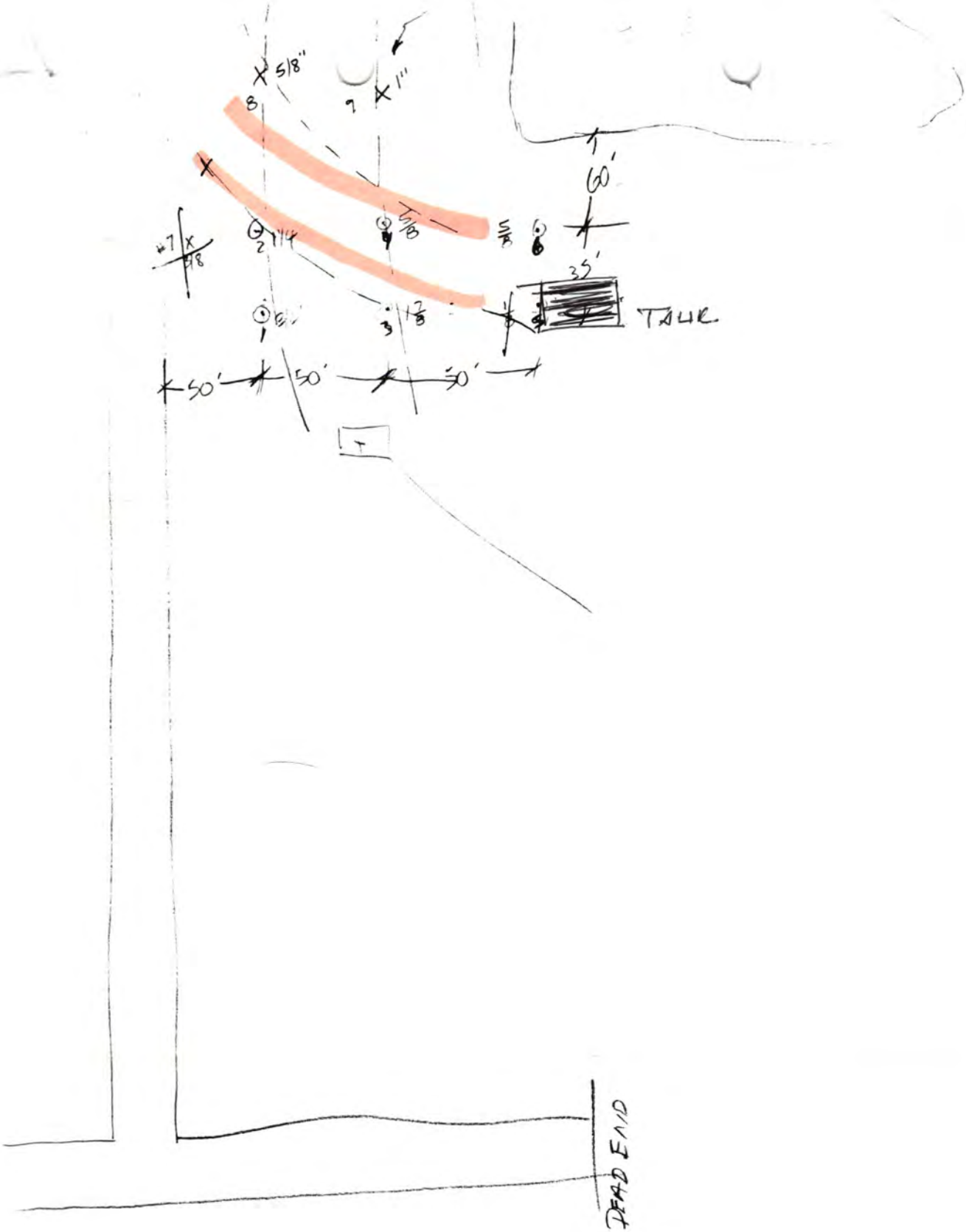
(Do not write below this line)

REVIEWING ACTION

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

Approved Percolation Rate (a)
A. 37 min./inch
B. _____ min./inch
C. _____ min./inch

Gerrold C. Hood
Signature of Reviewing Official


5/8"
1"
60'
35'
TALL
50'
50'
50'
DEAD END

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

Lincoln-Lancaster County Health Dept.
3140 "N" Street
Lincoln, NE 68510

D

DATE: _____

FILE NO: _____

Graberstein Court So 55 & Rush Lane

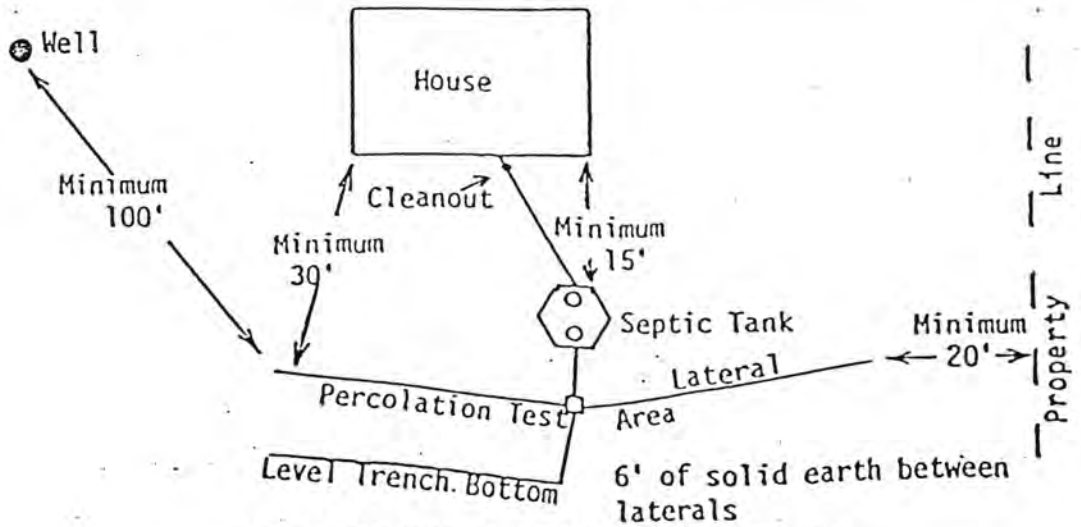
SPECIFICATIONS AS BUILT by Southwick Sewer & Drain

A. BUILDING SEWER: Sch 40
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor 16 in.
3. Distance between dwelling and septic tank 133 ft.
4. Number of clean-outs 1 .
5. Distances to:
Well or Suction Line >100 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line >20 ft.

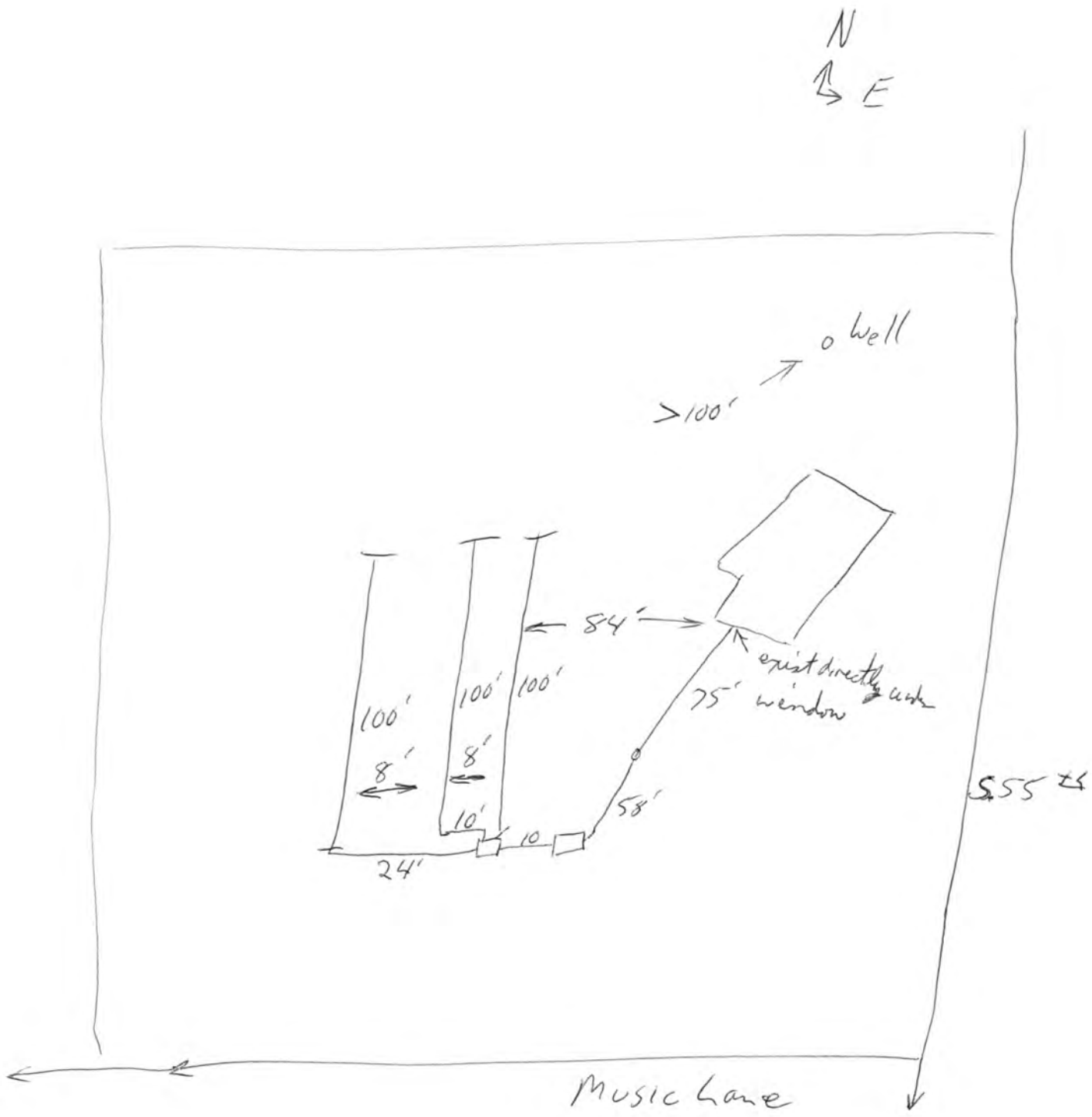
B. SEPTIC TANK:
1. Material C-Crete ; No. of compartments 1 .
2. Capacity 1 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre Cast Steps)
4. Manholes: Over Inlet; diam. 9 in.
Over Outlet; diam. 15 in.
Riser Above ☐ Below ☐ Grade ___ in.
5. Inlet: Baffle ☒ ; or Tee ☐
6. Outlet: Baffle ☒ ; or Tee ☐
7. Depth of top of tank below finished grade 16 in.
8. Distances to:
Well or Suction Line >500 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line >20 ft.

C. DISTRIBUTION BOX:
1. Material PVC ; Number - available outlets 5 .
2. Factory Built: Yes ☒ No ☐
(Company _____)
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 12 or Perforated Pipe _____.
Material: fiberglass ☒ ; plastic ☐ ; concrete ☐ ; other _____.
2. Lateral Lines:
Number 3 ; Length of each line 100 , 100 , 100 , _____ , _____ ft.;
Total length of laterals 300 ft.;
Distance between lateral lines 8 ft.
3. Trench dimensions: Width 4 ft.;
Slope 4 in/100 ft.; Average Depth 39 in.
4. Filter Material: Road Gravel .
Depth of Material 16 in.
5. Distances to:
Well or Suction Line >100 ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line >20 ft.



TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN


N
E
well
>100'
84'
100'
100'
100'
8'
8'
10'
10
24'
75'
existing window
58'
555
Music Lane

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. 92400030901

Issued 04/03/92
Expires 10/03/92

ESTABLISHMENT

CHRIS GRABENSTEIN
T9N R7E SEC 29
KENSINGTON ESTATES BLK 4 LOT 1

FEES: Permit 019851 $75.00

Total $75.00

PERMITTEE

CHRIS GRABENSTEIN
4630 ANTELOPE RD
APT 110
LINCOLN NE 68506

Issued By COUNTY HEALTH

VALID RECEIPT ONLY IF RECEIPTED IN THIS SPACE	
DATE	AMOUNT
4/3/92	PAID

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: 471-8000

FILING FEE $ 75.00

FILE NO. 924000309

DATE: 3/23/92

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 29
   Block 4 : Lot #1 : Addition KENSINGTON ESTATES
2. Well use: Residential ☑ ; Commerical ☐ ; Other Use ☐ { ~~5400 MUSTANG~~ NOW 8801 SOUTH 55TH ST
   Describe
3. Distance to Public Water Supply: ____ Ft. 2-3 MILES
4. Intended use of well 1-FAMILY RESIDENCE

CHRIS GRABENSTEIN
Signature of Applicant (owner or lessee)

4630 ANTELOPE CREEK DRIVE #110
Address
LINCOLN NEBR 68506

City Water Yes ☐ No ☑

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 3/23/92. Date Frwd. 3/24/92. Action: Approved ☒ Disapproved ☐ Signature: Leroy C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 3/24/92 Date Frwd. 3/24/92. Action: Approved ☑ Disapproved ☐ Signature: Mel Goddard
3. City or County Engineers: Date Rec'd 3/24/92. Date Frwd. ____. Action: Approved ☒ Disapproved ☐ Signature: L E Rech

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 10/13/92 by L. C. Hood
Date: ____ by ____
Date: ____ by ____

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

INSTALLATION FINAL WRITTEN APPROVAL
Date: 10/19/92 By: L. C. Hood

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

FORM 23-13

RECEIVED MAY 13 1992

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13553
FILE NO. 9240000309

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. 29 T. 9 R. 7 Block 4 Lot 1 Addition KENSINGTON ESTATES
Owner Builda Grabenstein Address around 56th & Yankee Hill Rd.

LOG OF WELL	
	Description
Depth Ft. to	

WELL COMPLETION RECORD

Drilling Method: Rot Circ
Depth (from ground level), Ft. 197'
Date Completed 5-15-92

Casing: Length, Ft. 187 : Dia. In. 4"
Wall Thickness, Inc. 200# : type PVC

Screen: Length, Ft. 10 Dia. In. 4
Type Wop Pvc , slot Size .030

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

Water Level, Surface to top of water, Ft.:
Static 135 , Pumping ____

Yield: 100 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 Bill Meyer (Signed)

REMARKS NITRATE NITROGEN < 0.1 P.P.M. BACTERIOLOGICAL O.K.

Address ____

Date 5-18-92

DO NOT WRITE BELOW THIS DOUBLE LINE

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

WATER WELL DATA SHEET

LOCATION: Jack Irons Development 56th and Yankee Hill rd.

OWNER: Builder Grabenstein WELL # 34-92

DRILLER: Bill DATE: 5-15-92 STATIC WATER LEVEL: 135

G.P.M.: 15 w/air DEPTH: 197' BORE SIZE: 8"

CASING SIZE: 4" SCREEN: (LENGTH 10' DIAM. 4"

SLOT .030 TYPE WOP) GRAVEL: B

0- 10 Brown clays	
10- 45 Yellow clay	
45- 70 Blue clay	
70- 80 Blue/gray shale	
80-110 Yellow shale w/ sandstone @ 90'	
110-125 Blue shale	
125-150 Medium yellow sandstone	
150-175 Medium fine yellow sandstone	
175-197 Medium to medium coarse yellow sandstone	
197-215 Red shale and limestone	
	Lancaster / Grant
	T. 9 N., R. 7 E., Sec. 29

~~6/16/98~~ 11-19-98

LLCHD -- Well Data Entry

Permit Number: 92400309 ID Number: Date Abandoned:

Lat Deg: Min: Sec: Lng Deg: Min: Sec: Elev:

Township: 9N Range: 7E Section: 29 Quarter: Quarter/Quarter:

Blk: 4 Lot: 1 Addition: Kensington Estates

House No: 8801 Dir: SO St. Name: 55th St. Type: ST Suf:

Well Use: Res Applicant: Chris Grabenstein

Owner: Chris Grabenstein Drlr: Mosea Well Drilling

Drl Method: Rot Date Cmpltd: 05/15/92 Well Depth: 197' Cs Lngth: 187' Cs Dia: 4"

Cs. Type: PVC Screen Length: 10' Static Lvl: 135' Pumping Lvl: — Yield: 100 gpm

Requested 3-9-07

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

Permit No. HW000243

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 - ~~$150~~ $160
- ☐ Bi-Annual Permit for an existing well - $100
- ☐ Permit to repair or alter existing well involving opening of well - $75

1. Well Site Address 8801 So. 55th City Lincoln, NE Zip 68516
(No Rural Route Please)
Township 9 Range 7E Section 29 1/4 Section NE
Block 4 Lot 1 Addition Kensington Estates
Parcel ID 16 - 29 - 206 - 001 - 000 (i.e. 99-99-999-999-999)

2. Well use: ☐ Residential ☐ Commercial ☒ Other Describe Pond

3. Distance to Public Water Supply X feet.

Signature of Owner _____ Print Name Scott McGrew
Current Address Same as above
Current Home Phone 421-3059 Work Phone _____

Signature of Contractor _____ Print Name Moser Well
Address PO Box 308 Hickman 68372
Home Phone _____ Work Phone 7922515 Cellular Phone _____

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

Please Submit Permit Fee with This Request

Fee must be included before the application will be processed. Incomplete information will delay processing.

HEALTH DEPARTMENT USE ONLY

Approval Process: Lincoln Municipal Code 8.44

1. Health Department	Date received 3/7/07 Date forwarded 3/8/07	ACTION Signature:	☒ Approved	☐ Disapproved	
2. Building & Safety	Date received 3/8/07 Date forwarded 3/8/07	ACTION Signature:	☒ Approved	☐ Disapproved	
3. City Engineer	Date received 3/8/07 Date forwarded ___/___/___	ACTION Signature:	☒ Approved	☐ Disapproved	

REMARKS OR REASONS FOR DISAPPROVAL: _____

Site Visits
Date: 11/2/09 By jm
Date: ___/___/___ By _____
Date: ___/___/___ By _____

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

Installation Final Written Approval unable to sample well as no sample point existed,
Date: 11/4/09 By jm

Business Office Use Only
Received: Date: 3/7/07 Amount 160.00 Check No. 35026 Initials CW

Distribution: White - Health Department Lt. Green - Engineer Lt. Blue - Building Inspector

LW0002463 Scanned 9-9-07

FORM 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 12558
FILE NO._____

LINCOLN-LANCASTER COUNTY
HEALTH DEPARTMENT

3140 "N" STREET LINCOLN, NE 68510-1514

Legal Description Sec. 29 TN. 9 R. 7E Block____ Lot____ Addition KENSINGTON ESTATES

Well location address or nearest road intersection 8801 S. , Lincoln, NE. This is in Kensington Estates, the S.W. corner of S. 56th & Yankee Hill Rd. The well is located about 150' N.W. of the house & used to fill the pond.

Owner SCOTT MC GREW Address 8801 S. 55TH, LINCOLN, NE 68516

LOG OF WELL	
Depth Ft to:	Description
0- 25	Brown clay
25- 56	Blue clay
56- 59	Sandy rubble
59- 70	Blue clay
70- 80	Red shale
80- 88	Yellow shale & fine sandstone
88-107	Red & black shale
107-125	Sandy yellow shale, little red shale
1125-170	Fine tan sandstone
170-185	Medium fine to medium tan sandstone
185-193	Medium coarse to very coarse brown sandstone
193-215	Red, gray shale, some hard limestone

Remarks: _____

WELL COMPLETION RECORD

Drilling Method ROTO / WATER

Depth (from ground level). Ft. 193'

Date Completed 12/14/06

Casing: Length, Ft. 183' : Dia. In. 4"

Wall Thickness, .214" : Type PVC 200 #

Screen: Length, Ft. 10' : Dia. In. 4"

Type PVC WOP , Slot size .032

Well tested capacity 15 GPM W/AIR

Static water level [redacted] 128' Measured XX Est. ____

Pumping water level 150' at [redacted] 45 gpm.
Measured ____ Est. XX

Drop pipe: Length, Ft. 180' Dia. In. 2" Type. PVC 80

Pump model & H.P. [redacted] 5hp-45gpm

Gpm Yield of pump. [redacted] 45 Measured XX Est. ____

Chlorination Completed Yes XX No ____

The above information 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

Date: 2 MARCH 2007

DO NOT WRITE BELOW THIS DOUBLE LINE

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

014

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 8801 South 55th St

Twp 9N Range 7E Section 29 1/4 ___ 1/4 ___ Block 4 Lot 1 Addition Kensington Estates

Directions to Property 56th St south to Rebel Dr. Turn Right-go 1 block to 55th St Turn right-go to dead end your house is the blue house

Location of Well in landscaping by the driveway Tap Location: Inside ☐ Outside ☒

Location of Sewage System 50' south of house Year Installed 92

	NAME	ADDRESS	PHONE
Present Owner:	Walter McGrew	8801 S 55th St Lincoln Ne 68516	421-2059
Tenant/Buyer:	Same		
Return to:	Same		DAN SEARCY FAX 464-3865

Signature of Applicant Walter Scott McGrew Address 8801 S 55th St Lincoln Ne 68516 Date 5/4/96

HEALTH DEPARTMENT USE ONLY

RECEIVED

Date 05/07/96
Initials ss
Amount 150.00
Check No. 7334

DATA ENTRY

Date ___/___/___
Case No. ___
Initials ___

PRELIMINARY STATUS--By Jerrold C. Hood **DATE:** 5/9/96

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

SEWAGE SYSTEM	
Approved	☒
Provisional	☐
Disapproved	☐

Additional Site Visits

Date ___/___/___ by ___
Date ___/___/___ by ___
Date ___/___/___ by ___

Comments: SHOULD FILL IN LITTLE PLACES THAT HAVE SUBSIDED OVER THE UPHILL SEWAGE LATERAL.

See Attached Letter ☐

FINAL STATUS

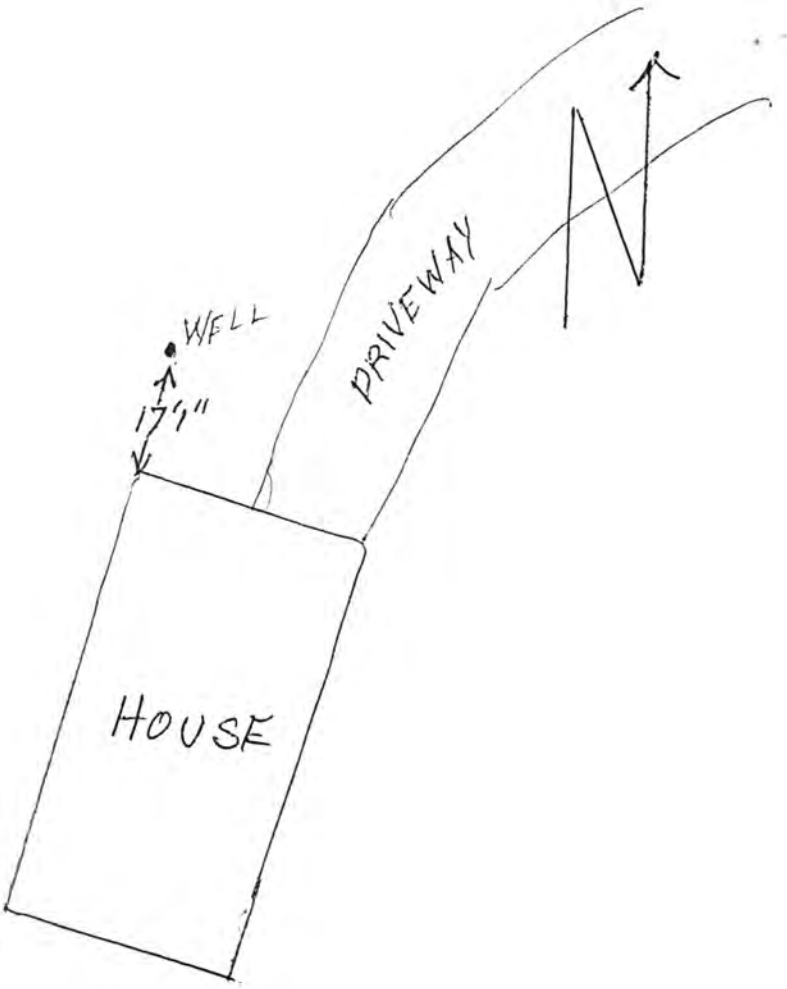
WATER SYSTEM: Approved ☒ **SEWAGE DISPOSAL SYSTEM:** Approved ☒ Provisional Approval ☐

Approved by Jerrold C. Hood R.E.H.S. Date 5/13/96

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



AREA OF
SEPTIC SYSTEM