FILE # 2786

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL SEWAGE SYSTEM CONSTRUCTION — TYPE OF LICENSE OR PERMIT

6 MONTHS — THIS LICENSE OR PERMIT EXPIRES

LANCASTER COUNTY ENGINEERING DEPT. 555 SO. 10TH ST., LINCOLN, NE 68508 — LICENSEE OR PERMITTEE / ADDRESS

T9N: R7E: Sec. 31 — NAME OF ESTABLISHMENT, IF ANY / ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ No Fee	018754	$ No Fee

Valid Receipt Only if Machine Receipted In This Space

Serial No. — Date and Amount

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

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: $ NO FEE

FILE NO. 2786

DATE: 12/29/89

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. 9 N ; Range 7 E ; Section 31 ;
   Block N/A. : Lot N/A. : Addition *
   Street Address

2. Property Use: Residential ☐ ; Commercial ☒ Other Use ☐
   No. of Bedrooms None . Describe 1 Bathroom (For A Toilet & Lavatory Only)

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

4. Distance to public sewer: _____ ft.

* The S. 313.07' of The E. 208.71' of Lot 33 I.T. In SE. 1/4, 31-9-7

Virgil Wearman
Signature of Applicant (Owner) or Lessee)
Lancaster County Engineering Dept.
5555 So 10th St.
Address Lincoln, Ne 68508

(Do not write below this double line)

1. Health Department: Date Rec'd. 12/30/88. Date Frwd. 12/30/88. ACTION: Approved ☒ Disapproved ☐ Signature: Gerald E. Hood

2. Supt. Bldg. Insp.: or Village Clerk Date Rec'd. 12/30/88. Date Frwd. 12/30/88. ACTION: Approved ☒ Disapproved ☐ Signature:

3. City or County Engineer: Date Rec'd. 12/29/88. Date Frwd. 12/30/88. ACTION: Approved ☒ Disapproved ☐ Signature: Virgil Wearman Robert D. Maham

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 7-21-89 by: rm
Date: by:
Date: by:

INSTALLATION FINAL WRITTEN APPROVAL
Date: 7-21-89 By: Ron Mangum

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 9 N ; Range R7E ; Section & ¼ Section 31 . SE¼
Property Dimensions: 313.07 ft. x 208.71 ft. Area: 1.5 acres. (Attach Sheet C with sketch of property).
Soil Type: Silty Clay ☐ ; Silty Clay Loam ☒ ; Sandy Loam ☐ ; Silt Loam ☐ ; Clay Loam ☐ . Shapsburg (ShC)
Dates of Tests: 12/22/88 to 12/23/88 . Weather: Precip. None Temp. 16°-40°.

(See Sketches Attached)

OWNER: Lancaster County Engineering Dept.
555 So 10th St.
Address: Lincoln Ne. 68508

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"	12/22	2:00 pm	12/23	7:30 am	12/23	11:00 am	6¼"	11:30 am	10¾"	30	4½"	6.7
2	36"	12/22	2:00 pm	12/23	7:30 am	12/23	11:00 am	5⅛"	11:30 am	9⅜"	30	4¼"	7.1
3	36"	12/22	2:00 pm	12/23	7:30 am	12/23	11:00 am	6⅞"	11:30 am	12"	30	5⅛"	5.9
4	36"	12/22	2:00 pm	12/23	7:30 am	12/23	11:00 am	4½"	11:30 am	8¼"	30	3¾"	8.0
5	36"	12/22	2:00 pm	12/23	7:30 am	12/23	11:00 am	5⅜"	11:30 am	9⅛"	30	3¾"	8.0
6	36"	12/22	2:00 pm	12/23	7:30 am	12/23	11:00 am	3¾"	11:30 am	7⅜"	30	3⅝"	8.3
7	36"	12/22	2:00 pm	12/23	7:30 am	12/23	11:00 am	2⅝"	11:30 am	4½"	30	1⅞"	16.0

Sum of Percolation Rates: 60.0
Average of Rates: 8.6
Mean of Rates: _____

Signature of Person Conducting Test

Address Lancaster County Engineering Dept. 555 So. 10th St. Lincoln Ne. 68508 Phone (402)-471-7681

(Do not write below this line)

REVIEWING ACTION

Remarks: _____

Soil Type (SCS): _____

Date: _____

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

Signature of Reviewing Official

12/27/88

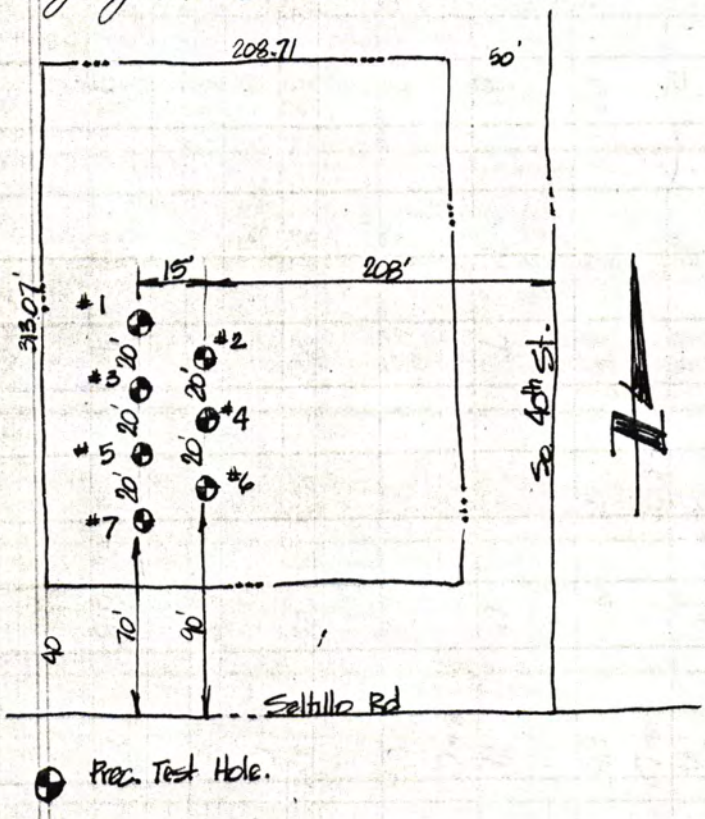
To file.

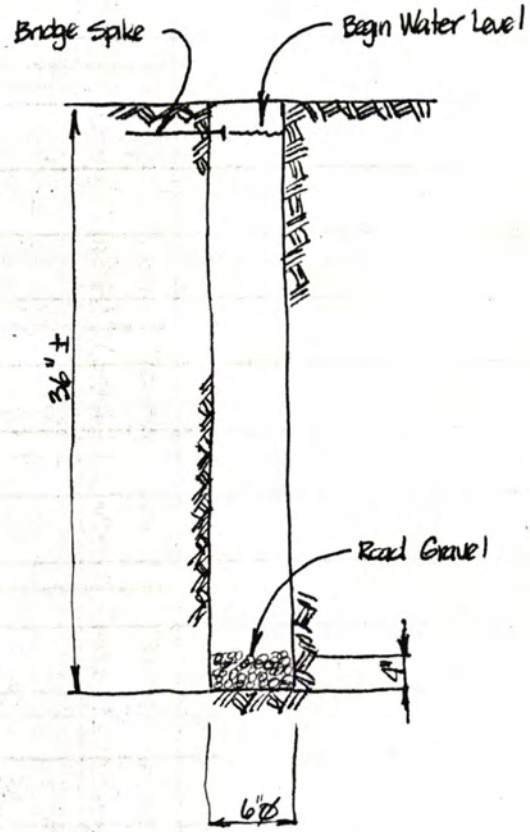
From Vug

Re. 40th & Saltillo Patrol Station

Larry Foose & Steve Skillman run perc test on Dec. 22 and 23, 1988

1. They dug 7 holes situated three on the site.





2. Began Pre-Soak period @ 2:00 P.M on December 22, 1988 all 7 test holes kept full or partially full of water until 7:30 A.M. December 23, 1988.

3. At 7:30 am Dec. 23, 1988 started perc test all 7 holes. Finished at 11:30 am.

Summary of Field Data For Perc. Tests
@ 46th & Saltillo Rd.

12/27/88

Time	Hole #1 Reading (inches)	Hole #1 Loss (inches)	Hole #2 Reading (inches)	Hole #2 Loss (inches)	Hole #3 Reading (inches)	Hole #3 Loss (inches)	Hole #4 Reading (inches)	Hole #4 Loss (inches)	Hole #5 Reading (inches)	Hole #5 Loss (inches)	Hole #6 Reading (inches)	Hole #6 Loss (inches)	Hole #7 Reading (inches)	Hole #7 Loss (inches)
7:30	0"		0"		0"		0"		0"		0"		0"	
8:00	12"	12"	10½"	10½"	11"	11"	8½"	8½"	8"	8"	8"	8"	4"	4"
8:30	20"	8"	17"	6½"	17"	6"	14"	5½"	12"	4"	14"	6"	7"	3"
9:00	** 0" 22¼"	2¼"	** 0" 20⅜"	3⅜"	** 0" 8"	8"	** 0" 5½"	5½	** 0" 6⅜	6⅜"	** 0" 5⅝	5⅝"	** 0" 3"	3"
9:30	8"	8"	7"	7"	15"	7"	17"	11½"	** 0" 10½"	4⅛	11"	5⅜"	7"	4"
10:00	15¼"	7¼"	13⅜	6⅜"	** 0 8⅛"	8⅛"	** 0 6⅛"	6⅛"	6⅜"	6⅜"	** 0" 5⅜	5⅜"	** 0" 3	3"
10:30	** 0" 20⅜"	5⅛"	** 0" 18"	4⅝"	** 0" 13⅜	5¼"	** 0" 10¼	4⅛"	10¼	3⅞	10"	4⅜"	** 0 8¾	5¾"
11:00	** 0" 6¼"	6¼"	** 0" 5⅜"	5⅛"	** 0" 6⅞"	6⅞"	** 0" 4½"	4½"	** 0" 5⅜"	5⅜"	** 0" 3¾"	3¼"	** 0 2⅝	2⅝
11:30	10¾"	4½"	9⅜	4¼"	12"	5⅛"	8¼"	3¾"	4⅛"	3¼"	7⅜	3⅝"	4½	1 7/8"

** Indicates Refilled Hole After Measurement.

FORM 20102-0477
PRELIMINARY PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☒

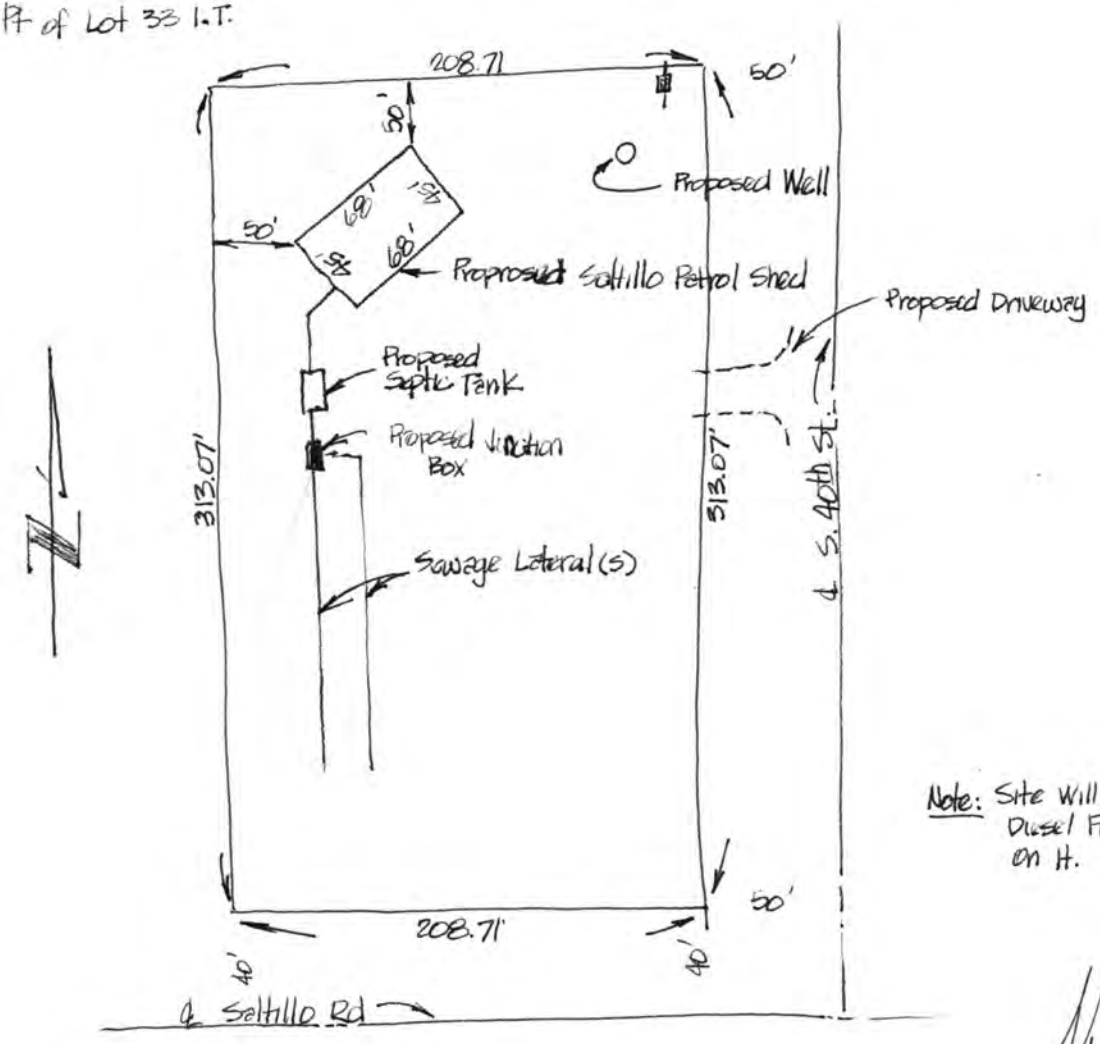
LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 471-7800

C

Sketch of property showing Percolation Test hole locations, well, residence, direction and property line.

FILE NO. _____

Indicate on sketch if residence and well are exisiting or proposed.



Note: Site Will Have 1000 gal. Diesel Fuel Tank Located on It.

12/28/88

REVIEWING ACTION

Remarks: _____

Date: December 30, 1988

Minimum Design Requirement
1. Capacity of Septic Tank 1000 gals.
2. Total Length of Laterals _____ ft.
3. With a Trench Width of _____ in.
4. Total Area of Lateral needed 28 sq.ft.

Jerrold C. Hood
Signature of Reviewing Official

FORM: 20223-0483
REQUEST FOR SITE CLEARANCE AND PERMIT
FOR INDIVIDUAL WATER WELL
CITY ORDINANCE NO. 13558
FILE NO. W-317

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
DIVISION OF ENVIRONMENTAL HEALTH
2200 ST. MARYS AVENUE
LINCOLN NE 68502
Phone: 471-7800

DATA SHEET FOR WATER WELLS

Legal Description: Sec. 31 T. 9N R. 7E Block ___ Lot 33 I.T. Addition S 313.07' OF THE E 208.71' OF

Owner County of Lancaster Address 40th & Saltillo Rd

LOG OF WELL	
Depth Ft. to	Description
0-50	brn / yellc.
50-55	orange Dakota sh.
55-76	red, yell, & orang sh
76-77	hard limestone (not iron stone)
77-98	yell & sandy red sh.
98-99	hard limestone
99-125	sandy red & yell sh.
125-170	fine → med fine yell ss
170-203	med coarse → med fine yell ss
203-204	white / yell sh.
204-214	med ss
214-215	Very coarse dk brn ss
215-226	very coarse ss to very coarse gravel
226-230	yell sh.
230-235+	blue shale

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

WELL COMPLETION RECORD

Drilling Method: Rot Circ
Depth (from ground level), Ft. 183
Date Completed 4-18-89

Casing: Length, Ft. 173; Dia.In. 5
Wall Thickness, Inc. 200#; type PVC

Screen: Length, Ft. 10 Dia.In. 5
Type PVC WOP, slot Size .030

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

Water Level, Surface to top of water, Ft.:
Static 80, Pumping ___

Yield: 100+ gpm, 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 Moser (Signed)

Address ___

Date 7-12-89

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

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 $ NO FEE

FILE NO. W-317

DATE: 12/29/88

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. 9 N : Range 7 E : Section 31
   Block N/A. : Lot N/A. : Addition *
2. Well use: Residential ☐ ; Commerical ☒ ; Other Use ☐
   Describe Potable Drinking Water, To Operate Sanitary Fixtures 1 Toilet, 1 Lavatory
3. Distance to Public Water Supply: 1 Mile ~~Ft~~. Rural Water Dist.
4. Intended use of well (See Above)

* The S. 313.07' of The E. 208.71' of Lot 33 I.T. In SE1/4, 31-9-7

No City Water 40th & Saltillo Rd.

Signature of Applicant (owner or lessee)
Lancaster County ~~Engineering~~ Department
555 So 10th St.
Address Lincoln, Ne. 68508

Sewage Permit Applied For Yes ☒ No ☐ Not Applicable ☐

1. Health Department: Date Rec'd 12/30/88. Date Frwd. 12/30/88. Action: Approved ☒ Disapproved ☐ Signature: Jerrold C. Hood
2. Supt. Bldg. Insp.: Date Rec'd 1/3/89. Date Frwd. 1/3/89. Action: Approved ☐ Disapproved ☐ Signature:
3. City or County Engineers: Date Rec'd 12/29/88. Date Frwd. 12/30/88. Action: Approved ☒ Disapproved ☐ Signature: Dwight L. Hammond / John D. Peterson

REMARKS OR REASONS FOR DISAPPROVAL

Site Visits:
Date: 12/7/89 by J. C. Hood
Date: 12/11/89 by J. C. Hood
Date: 12/27/89 by J. C. Hood Too much cl.
12/28/89 by J. C. Hood Too much cl.
2/14/90 by J. C. Hood cl gone

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

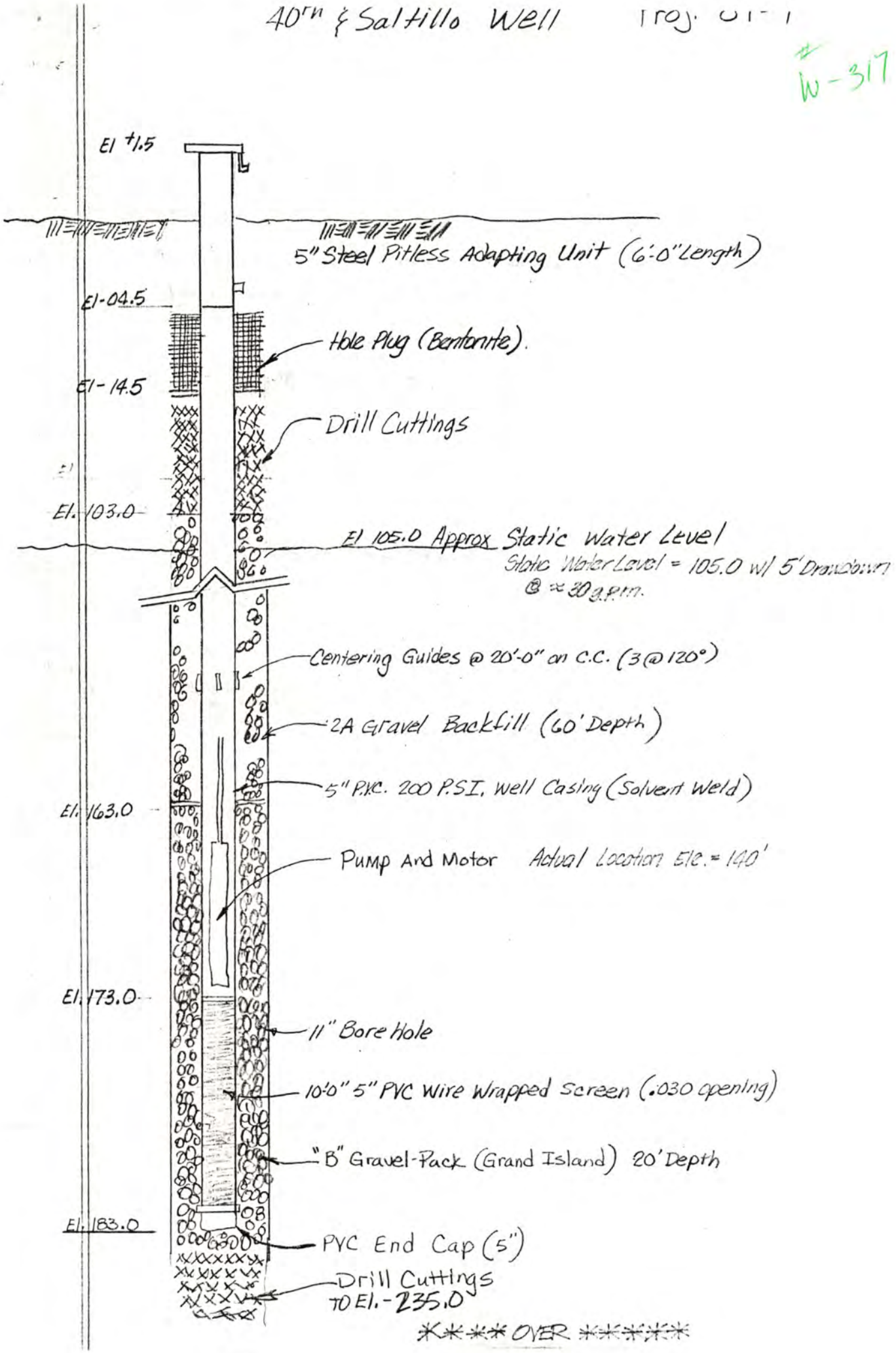
INSTALLATION FINAL WRITTEN APPROVAL
Date: 2/21/90 By: J. C. Hood

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

FORM 23-13

40th & Saltillo Well Proj. 01-1

W-317



**** OVER ****

40" & Saltillo Building Site Well 4/17/89
(Bill Moser - Driller)

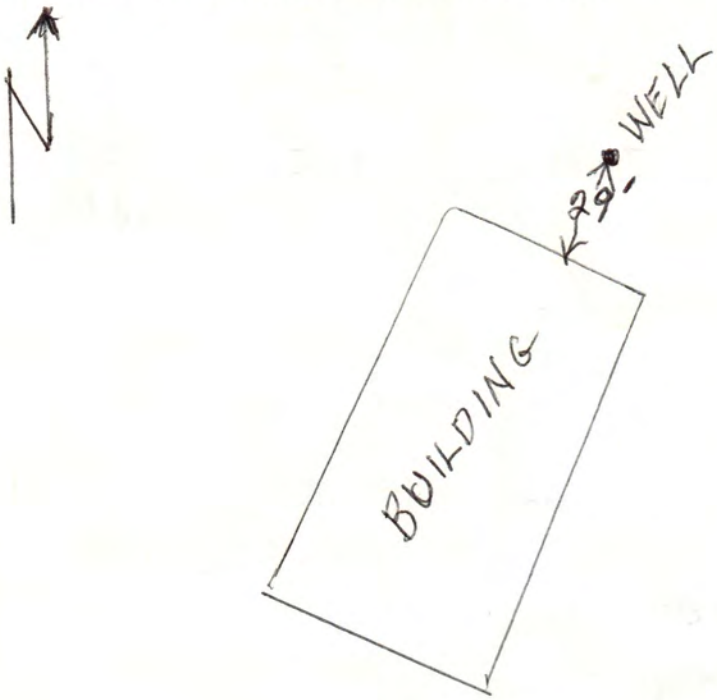
Jim Cunningham - HWS Technologies Geologist
Jim Mc Manigal - Inspector

0'-50'	Brown Yellow Clay
50'-55'	Orange Dakota Clay
55'-65'	Red - Yellow Dakota Clay
65'-70'	Orange Dakota Clay
70'-76'	Yellow Dakota Clay
76'-77'	Layer hard Limestone
77'-80'	Yellow Dakota Clay
80-98'	Sandy Red Dakota Clay
98'-99'	Layer Hard Limestone
99'-105'	Sandy Red Dakota Clay
105'-125'	Sandy Yellow Dakota Clay
125'-150'	Fine Yellow Sandstone
150'-170'	Medium Fine Yellow Sandstone
170'-183'	Medium Coarse yellow Sandstone ***
183'-184'	Layer Dakota Clay
184-203	Medium Fine yellow sandstone
203-204	White-Yellow Shale
204-214	Medium Sandstone
214-215	Very Coarse Dark brown Sandstone
215-226	Very Coarse Sandstone to Very Coarse Gravel
226-230	Yellow Shale
230-+235	Blue Shale

*** Bill Moser & Jim Cunningham Said To Pump Out Of This Stratum

4/20/89

AS BUILT DRAWING OF INSTALLATION IN RELATION TO BUILDINGS, PROPERTY LINES, OTHER WELLS, AND SOURCES OF CONTAMINATION. INDICATE NORTH.



AREA OF
SEPTIC SYSTEM

FILE # W-317

CITY OF LINCOLN NEBRASKA

DEPARTMENT OF LICENSES AND PERMITS

INDIVIDUAL WATER WELL CONSTRUCTION — TYPE OF LICENSE OR PERMIT

6 MONTHS — THIS LICENSE OR PERMIT EXPIRES

LANCASTER COUNTY ENGINEERING DEPT. 555 SO. 10TH ST. LINCOLN, NE 68508 — LICENSEE OR PERMITTEE / ADDRESS

T9N: R7E: Sec. 31 — NAME OF ESTABLISHMENT, IF ANY / ADDRESS

REMARKS: NON TRANSFERABLE NEW CONSTRUCTION

PERMIT	ACCOUNTING NUMBER	TOTAL
$ No Fee	019851	$ No Fee

Valid Receipt Only if Machine Receipted In This Space

Serial No. — Date and Amount

For Dec. 4, 1959

APPLICATION

HEALTH

ISSUING OFFICER OR DEPARTMENT

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