



APPLICATION FOR A PERMIT TO CONSTRUCT A WELL

IN THE LOWER REPUBLICAN NATURAL RESOURCES DISTRICT *Non-Statutory*

NOTICE: The Lower Republican Natural Resources District (LRNRD) has been designated as "fully appropriated." The LRNRD is also subject to the Republican River Compact. The LRNRD may impose future controls and/or restrictions on the development and use of ground water to ensure compliance with the Ground Water Management and Protections Act and the Republican River Compact. Such controls and/or restrictions may be imposed regardless of the date on which this permit was granted.

1. NAME: Tim Schmidt (134467)
ADDRESS: 72442 US 183
Holdrege NE 68949
PHONE: 308 991 1376

DNR & NRD USE ONLY

PERMIT NO.: LR 21460
REGISTRATION NO.: G-194906

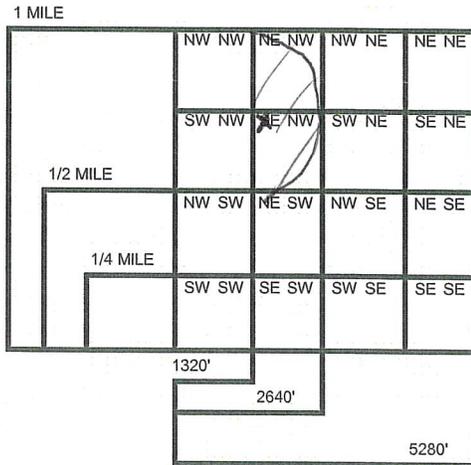
2. PURPOSE OF WELL (Indicate One): Irrigation Livestock (>50 gpm) Public Water Supply Other
 Industrial Dewatering (over 90 days) Aquaculture

3. IDENTIFY THE LOCATION OF THE PROPOSED WELL:

Holdrege County, Township 4 North,
Range, 19 West, Section 35

The box at the right represents one square mile, (section).
Indicate with an "X" the proposed location of the well.
Outline the proposed water use area, if water is to be used
outside the above written legal description, give legal
description of water use area.

Township _____ North, Range _____ West, Section _____



4. NEW IRRIGATION WELLS:

How many acres will be irrigated? 85

Flow meter will be used on proposed well.

Type of irrigation system: Center Pivot Gravity Other (specify) _____

Will system be Electric Fuel Powered?

Will the Well be used in a system with other wells? YES NO If yes, how many? _____

Will fertilizer, chemicals or animal waste be applied through the system? YES NO

5. REPLACEMENT AND ABANDONMENT WELL INFORMATION:

How many acres will be irrigated? 85

A. Is this a replacement well? YES NO

B. Registration number of well to be replaced: _____

C. Well to be replaced was last operated _____, 20 _____

D. Replacement well is 12.8 m.l.s feet (N, S, E or W circle one) from original well. (can not exceed 1,320 feet)

E. Completion of original well decommissioning on _____, 20 _____

F. New well will provide water only to land historically irrigated by the well being replaced, and shall not be used to irrigate any additional acres.

Handwritten notes:
P/C # 5364
3-31-21
K. Hoff

6. SPECIFICATIONS OF INTENDED WELL AND PUMP:

Approximate date when construction will begin: _____, 20 _____

Pump column diameter: _____ inches. Estimated total well depth 340 feet.

Estimated pumping capacity: 100 gallons per minute. Well casing diameter: _____ inches.

Please attach test hole log, if available.

Name of Well Driller: Holdrege Well Service, 2011 4th Ave Holdrege NE

7. I certify that I am familiar with the information contained in the application and its' restrictions, rules and regulations, and that to the best of my knowledge and belief such information is true, complete and accurate.

This form must be completed in full and be accompanied by a non-refundable \$50.00 fee (payable to the Lower Republican Natural Resources District, PO Box 618, Alma, NE 68920)

Date: 3-23-21

Signature: [Signature]

Date Approved: 9-9-21

NRD Representative: [Signature]

SEE OTHER SIDE FOR IMPORTANT PERMIT RESTRICTIONS, RULES AND REGULATIONS

SEP/16/2021

Exhibit No. 1
Variance Request

Request for Variance

COPY

Of the Fisheries and Game Laws of the State of Nebraska

COPY

For the Natural Resources District

Name: Clyde Looking

Address: 2105 Spalding Drive

City, State, Zip: Holdrege, NE 68949

Telephone: 991-0262

For Office Use Only - Variance
Date Received: 3-31-21
Request Number: 304 307

Legal: Section: 35 Township: 4 Range: 19 County: Harlan

I hereby request a variance of Rule Number: Well Spacing 5-3

Reason for requesting variance:

Move well G-016418 12.8 miles - from
34-4-21 Furnas Co. to 35-4-19 - Harlan Co.

"By signing, I attest that all the conditions of the variance request are true and that no net additional acreage of lands will be irrigated. I understand and grant access for the lands in this variance approval to be inspected by the LRNRD at any time in the future. I understand and agree that if a net increase of irrigated acreage occurs subsequent to this approved change than this approval is immediately revoked and I will be in violations with LRNRD Rules and Regulations subject to penalties."

X [Signature]
Signature

X 3/25/21
Date

*I understand approved LRNRD Variances that transitions irrigated acres between field ID's will have re-distributed water allocation by the following irrigation season.

You are encouraged to attach any relevant information or maps to this request.

The LRNRD Board of Directors: Approves Denies

[Signature]
Signature of LRNRD Representative

General Manager
Title

9-10-2021
Date

Notice: Pursuant to Neb. Rev. Stat. Section 28-915.01, any person who knowingly makes a false statement or affirms the truth of a statement to mislead a public servant in performing his or her official functions shall be guilty of a class I misdemeanor.

Exhibit No. 1
Variance Request

*Request for Variance
Of the Rules and Regulations of
Lower Republican Natural Resources District*

Name: Tim Schmidt

Address: 72442 Hwy 183

City, State, Zip: Holdrege, NE 68949

Telephone: 991-1376

For Office Use Only: Variance
Date Received: <u>3-31-21</u>
Request Number: <u>304 307</u>

Legal: Section: 35 Township: 4 Range: 19 County: Harlan

I hereby request a variance of Rule Number: Well Spacing 5-3

Reason for requesting variance:

Move well 12.8 miles from 34-4-21 Furnas Co.
to 35-4-19 Harlan Co. (G-016418)

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X [Signature]
Signature*

X 3-23-21
Date

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Approves

Denies

[Signature]
Signature of LRNRD Representative

General Manager
Title

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