

NRD USE ONLY:

CURRENT LOCATION OF ACRES

Current Certified Acres on Parcel _____

Assessed Acres on Parcel _____

Occupation Taxed Acres _____

RRR or Upland? (circle one)

Are acres in a pooling agreement? Yes No

Do these acres have history of use? Yes No

Acres: _____ 2019, _____ 2018, _____ 2017, _____ 2016, _____ 2015

Inches: _____ 2019, _____ 2018, _____ 2017, _____ 2016, _____ 2015

If no, why? _____

Well Column _____ GPM _____
(New well shall be the same or smaller than existing well)

NEW LOCATION OF ACRES

RRR or Upland? (circle one)

Percent Developed

0-10.99%
11-20.99%
21-30.99%
>31%

12.34%

CURRENT
8.51%

NEW

X

Decline Range

<10.99 ft
11-15.99 ft
16-20.99 ft
>21 ft

X

X

<

X

Depletion Range

0-11.96
11.97-28.6
28.7-48.6
48.7-72.2
72.3-96

X

X

<

X

Is it within 2 miles of a municipal well? Yes No

STAFF _____ APPROVED ~~_____~~ DENIED (referred to Committee on _____)

COMMITTEE _____ APPROVED _____ DENIED (referred to Committee on _____)

BOARD _____ APPROVED _____ DENIED

Z:\SHARED FILED\OLD SERVER\FORMS\PERMANENT TRANSFER APPLICATION

Revised January 2020

Additional comments:

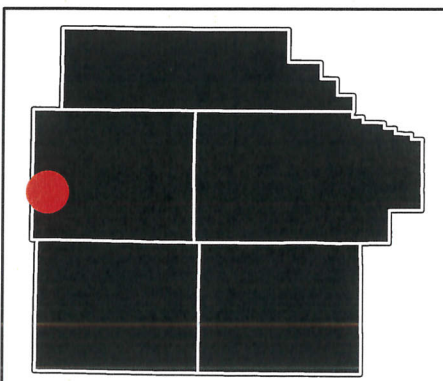
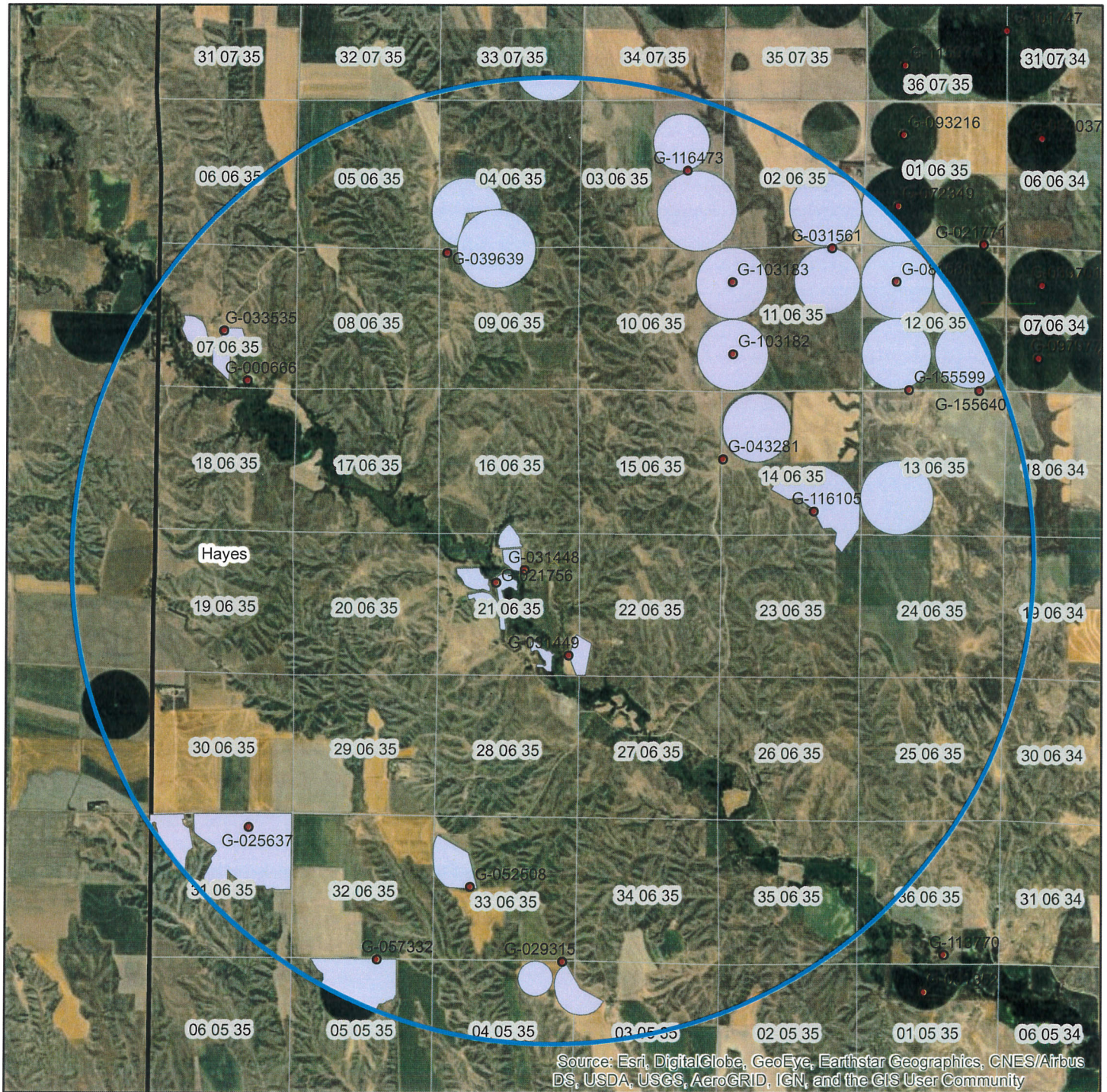
Hanna

6/10/2021

21-6-35/31-6-35 30-6-35

The acres from 21-6-35 would move to 30-6-35. Then you could recertify the acres from 31-6-35 to 21-6-35

Variance Statistics Sheet Hanna Existing - 21-6-35



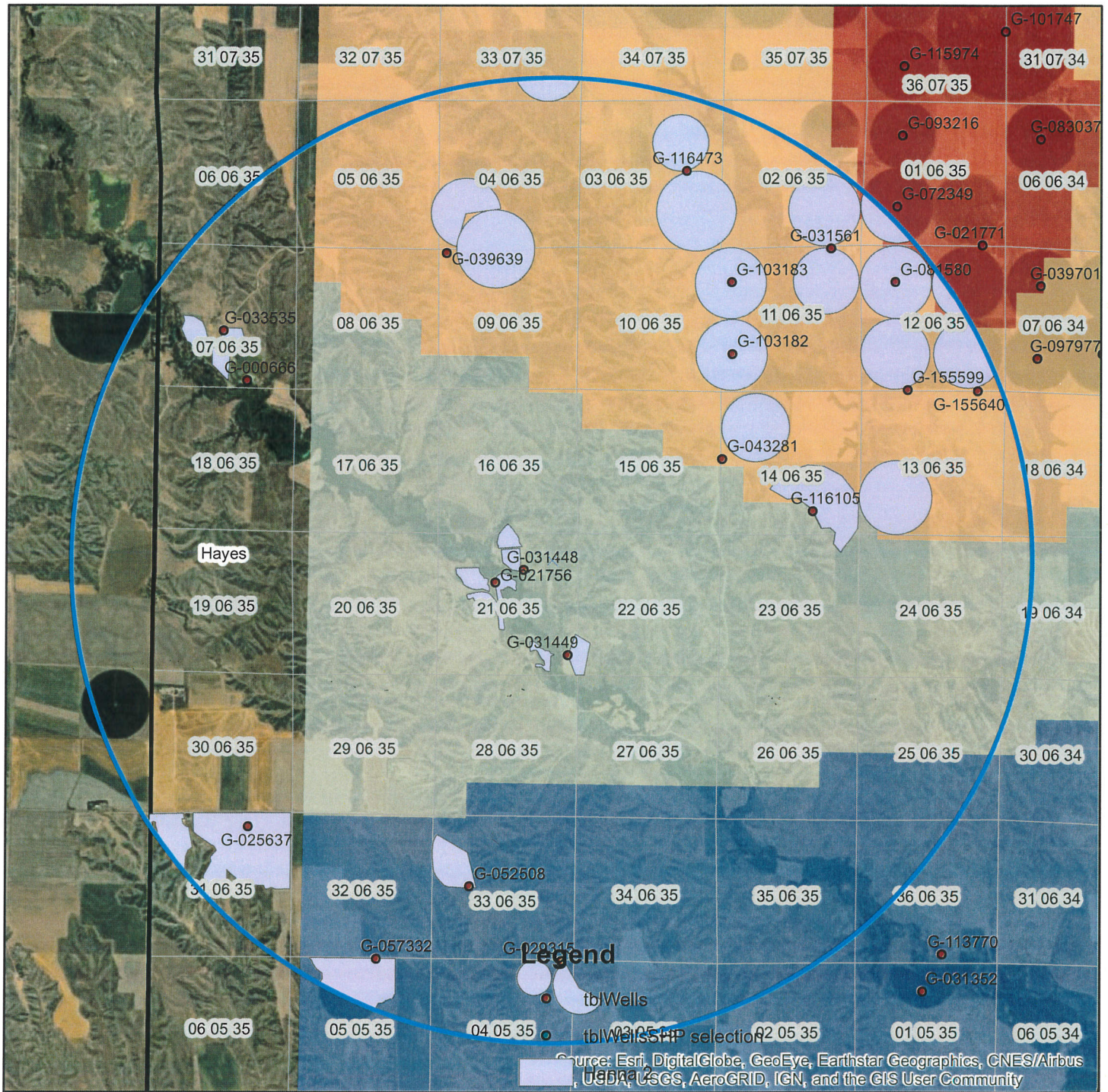
0 0.4 0.8 1.6 Miles

Legend

- tblWells
- tblWellsSHP selection
- Hanna 2

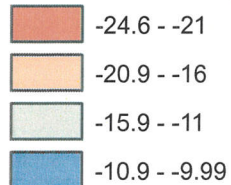
Development- 12.34%

Variance Statistics Sheet Hanna Existing - 21-6-35

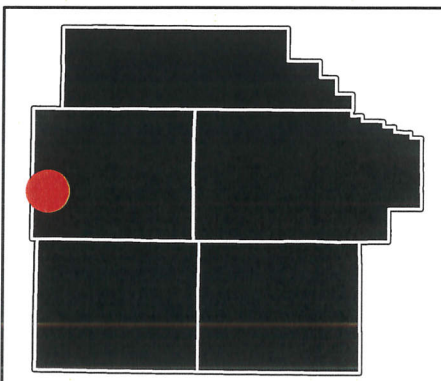


2016welldd

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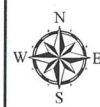
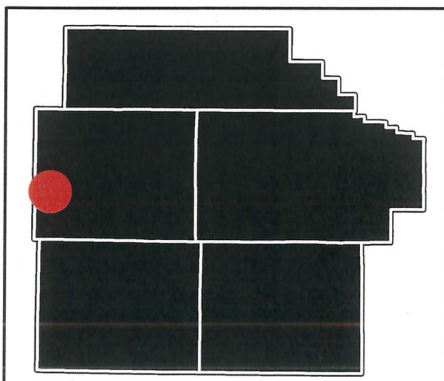
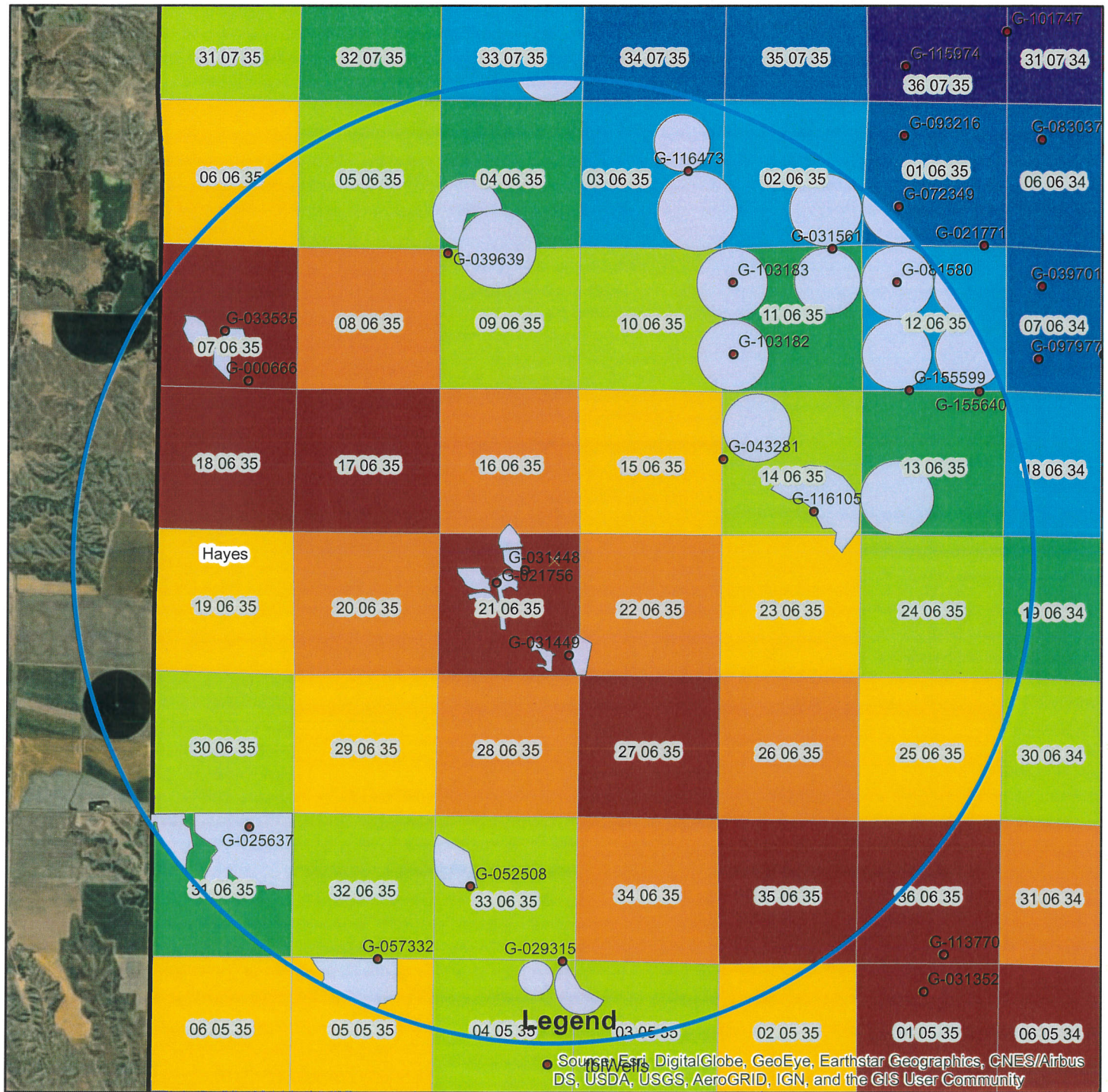


Development- 12.34%

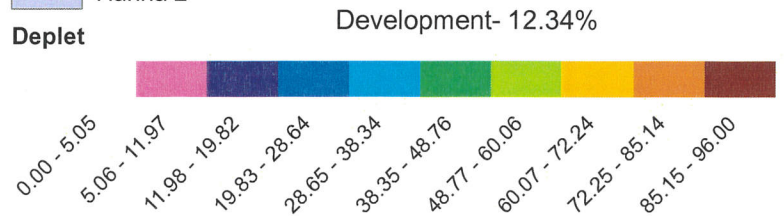


0 0.4 0.8 1.6 Miles

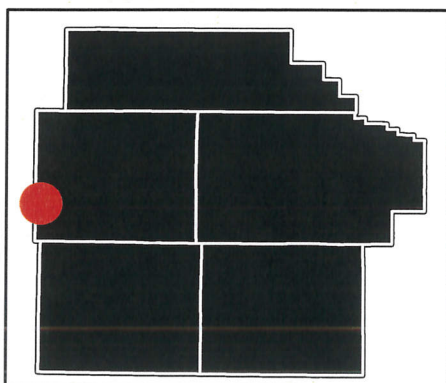
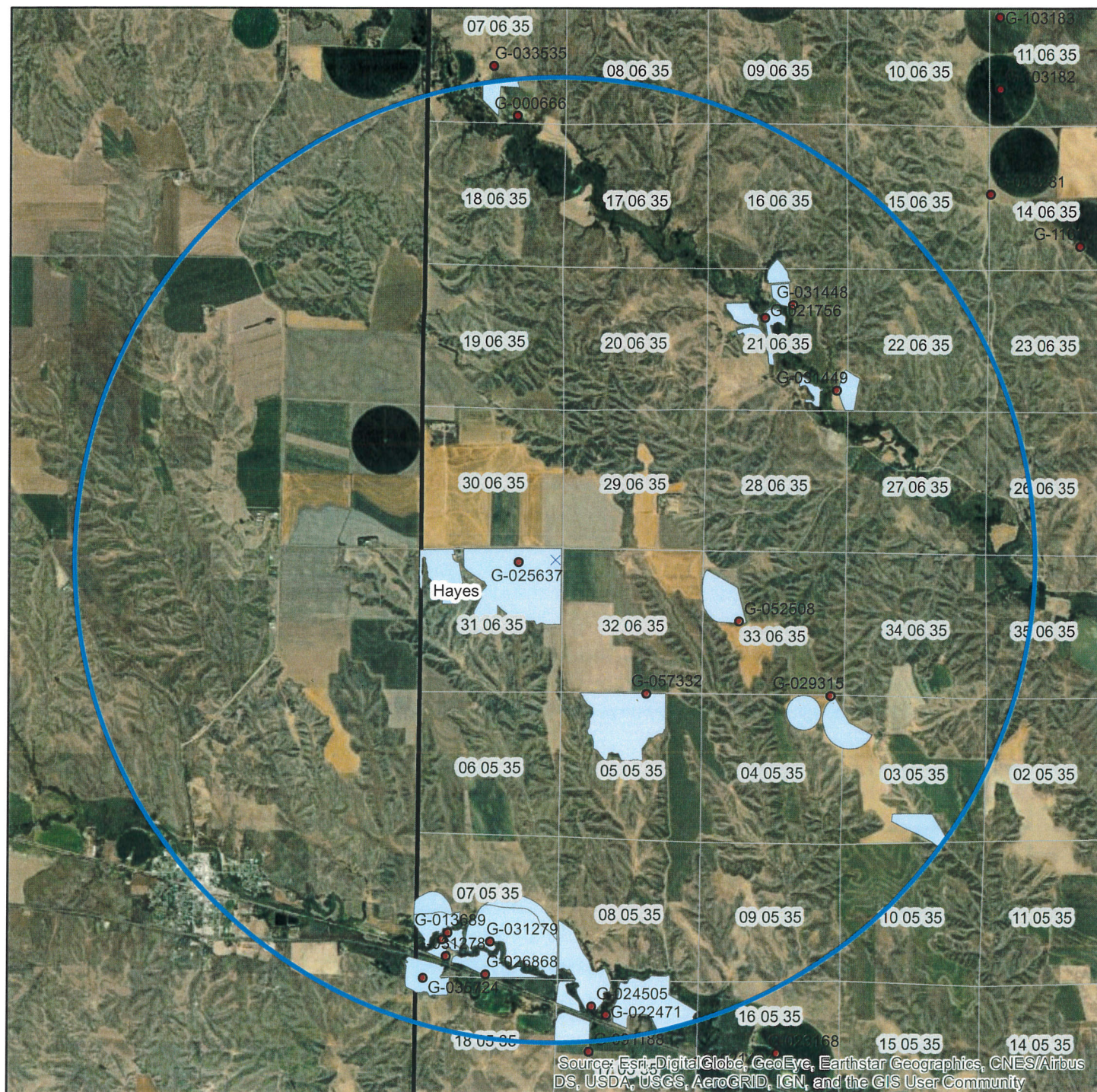
Variance Statistics Sheet Hanna Existing - 21-6-35



0 0.4 0.8 1.6 Miles



Variance Statistics Sheet Hanna Existing - 31-6-35



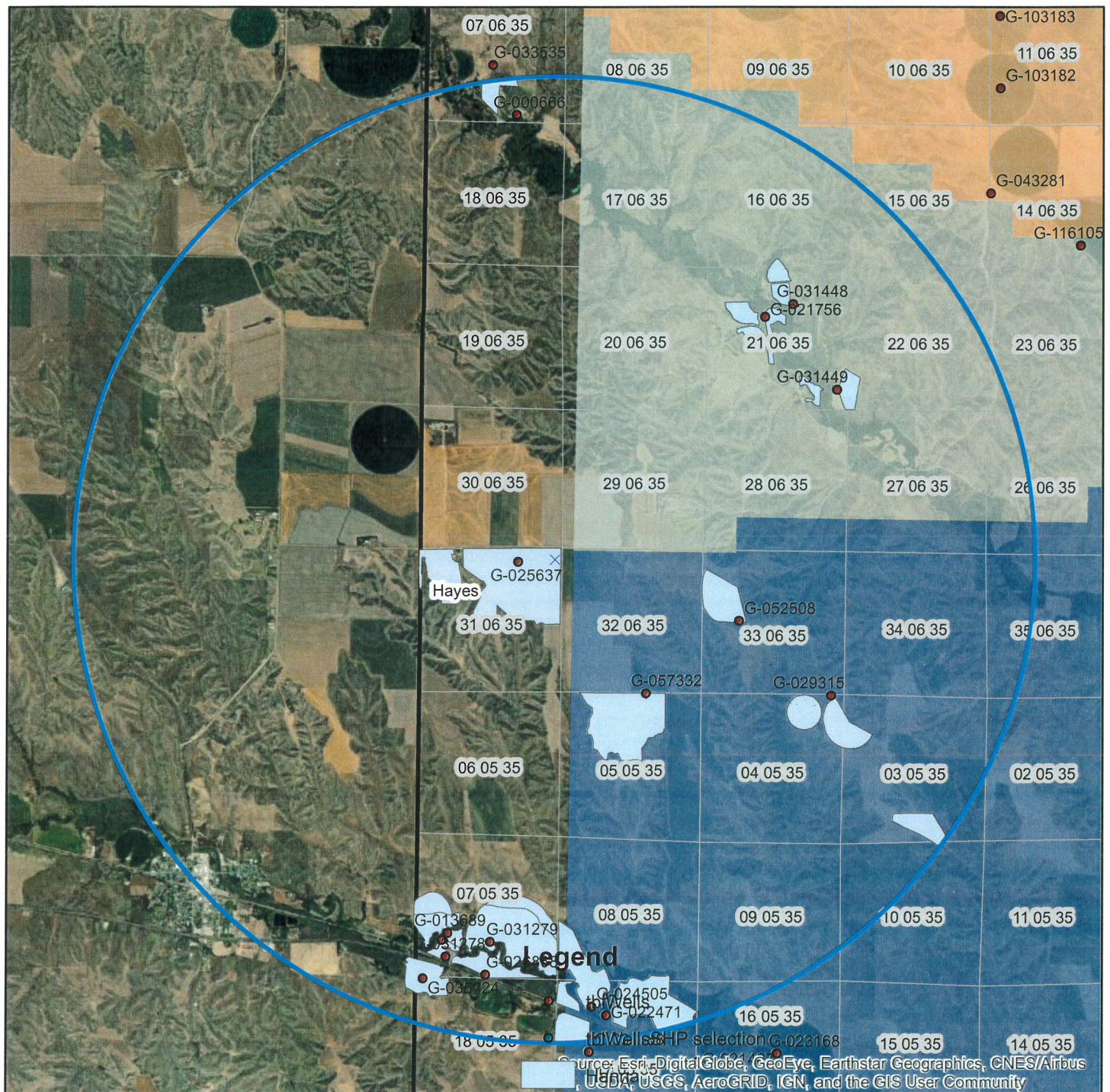
0 0.4 0.8 1.6 Miles

Legend

- tblWells
- tblWellsSHP selection
- Hanna

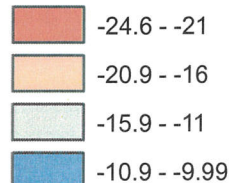
Development- 8.51%

Variance Statistics Sheet Hanna Existing - 31-6-35

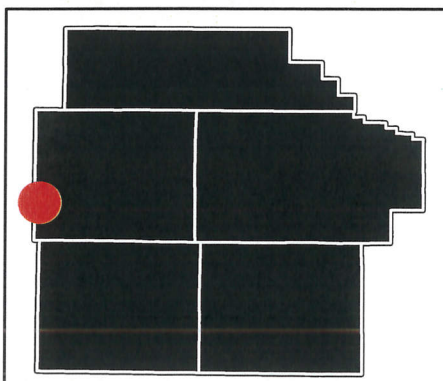


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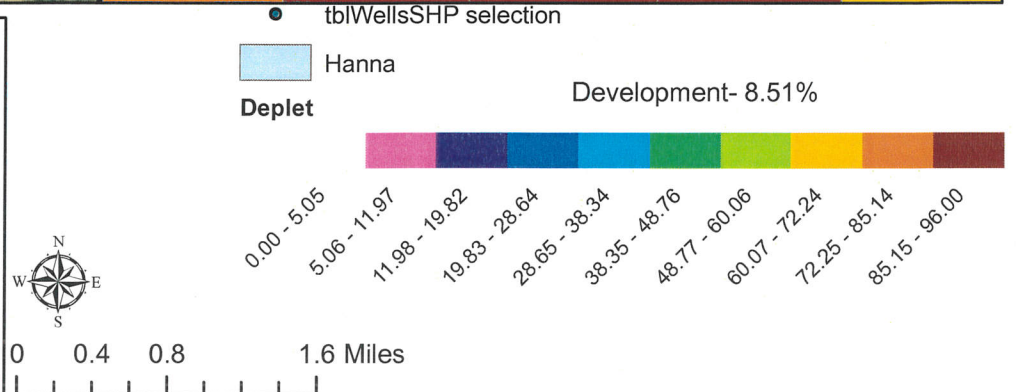
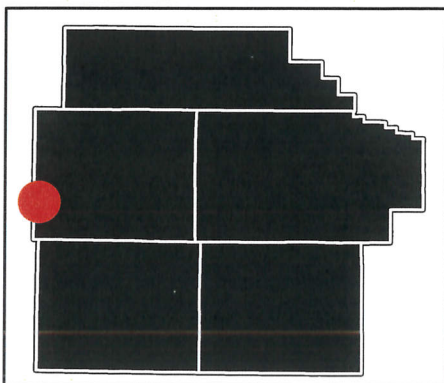
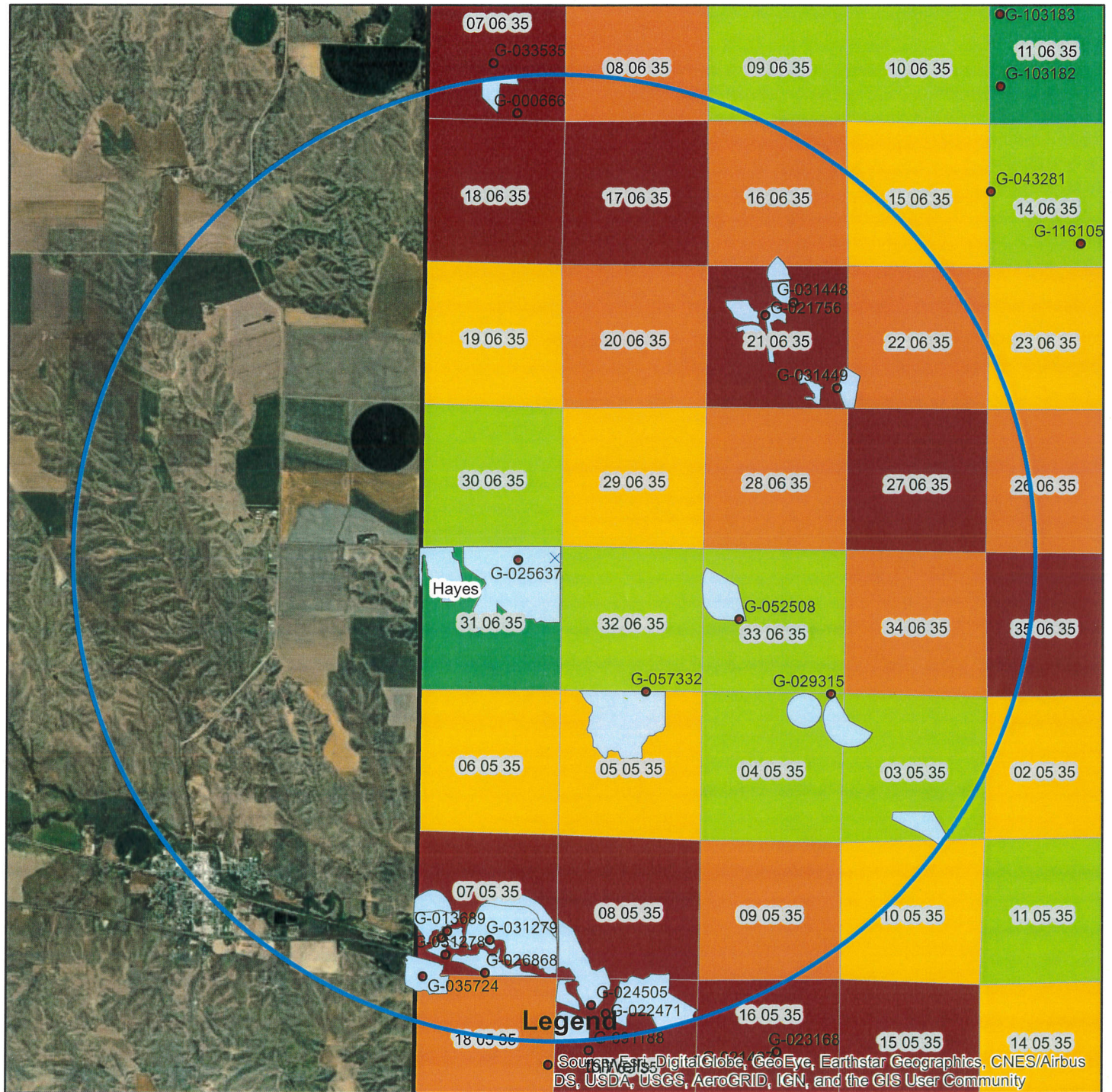


Development- 8.51%

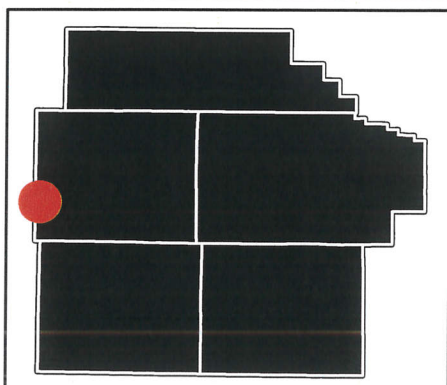
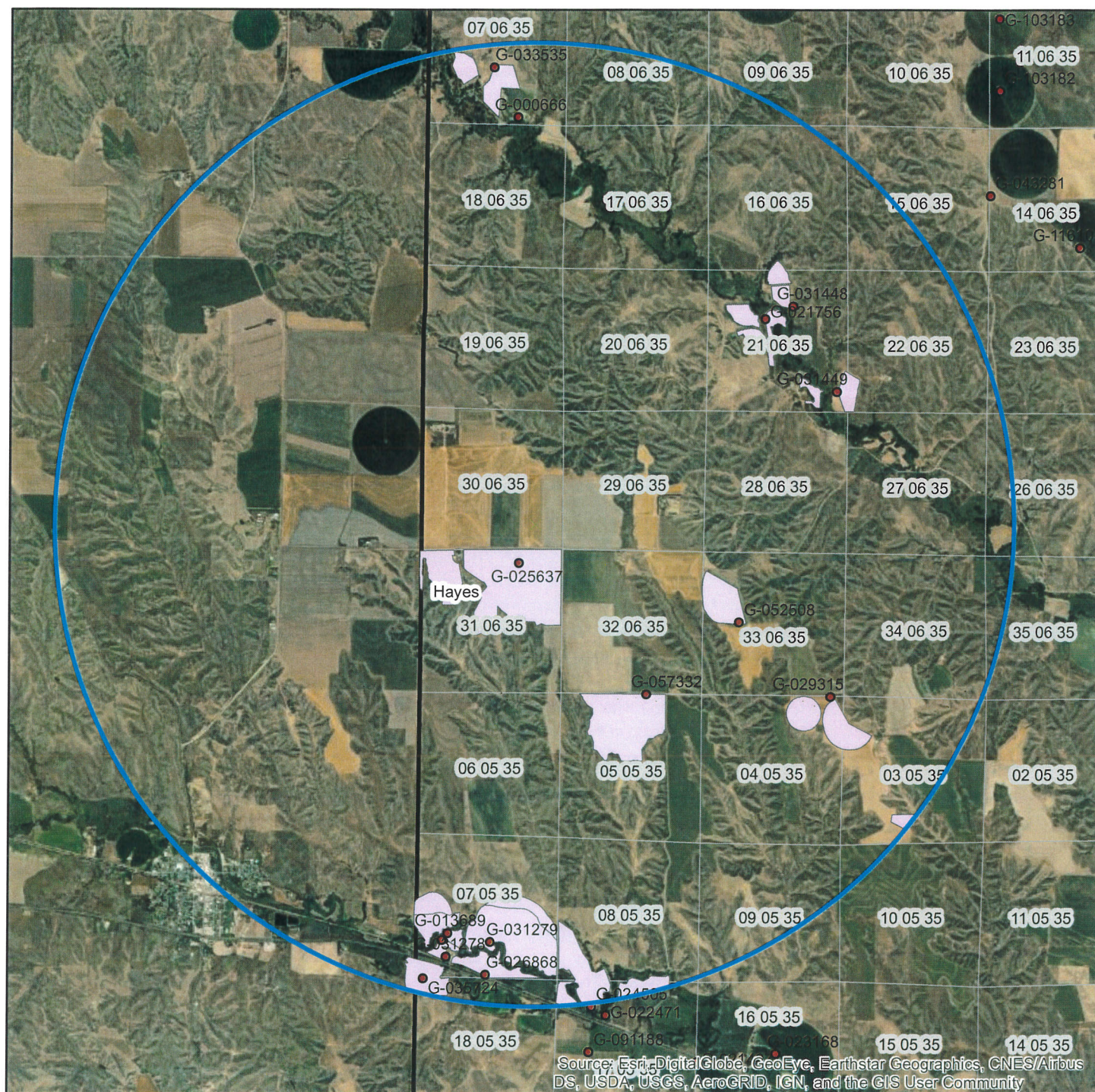


0 0.4 0.8 1.6 Miles

Variance Statistics Sheet Hanna Existing - 31-6-35



Variance Statistics Sheet Hanna Proposed - 30-6-35



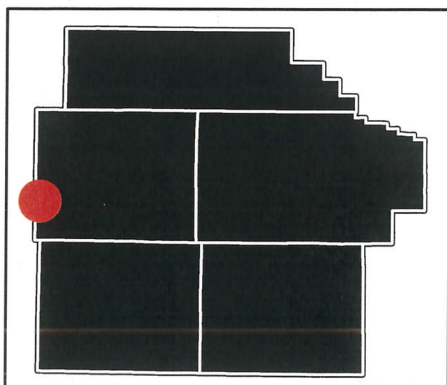
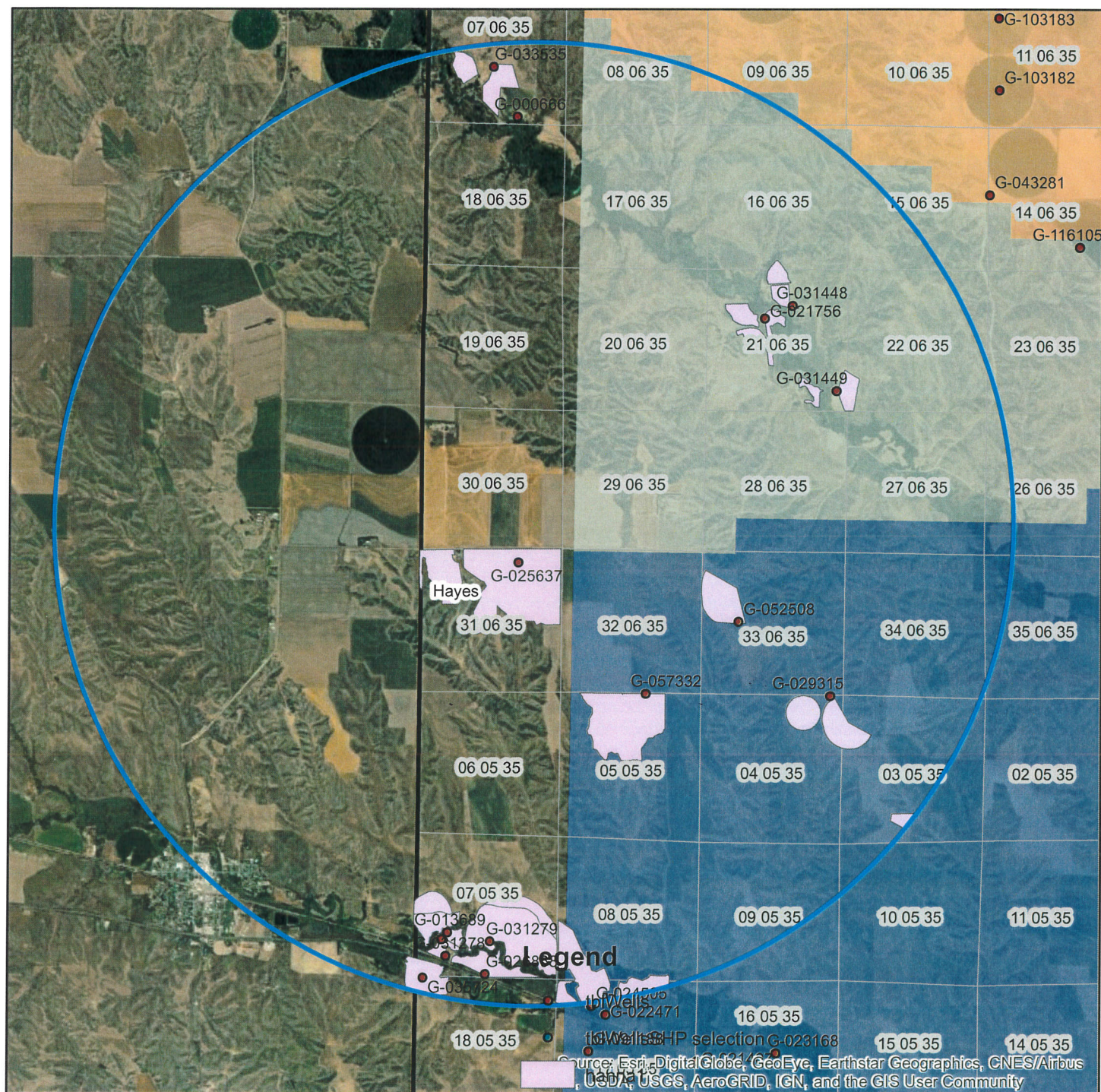
0 0.4 0.8 1.6 Miles

Legend

- tblWells
- tblWellsSHP selection
- hanna1

Development- 9.02%

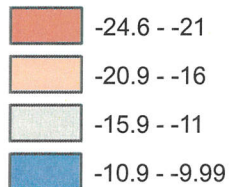
Variance Statistics Sheet Hanna Proposed - 30-6-35



0 0.4 0.8 1.6 Miles

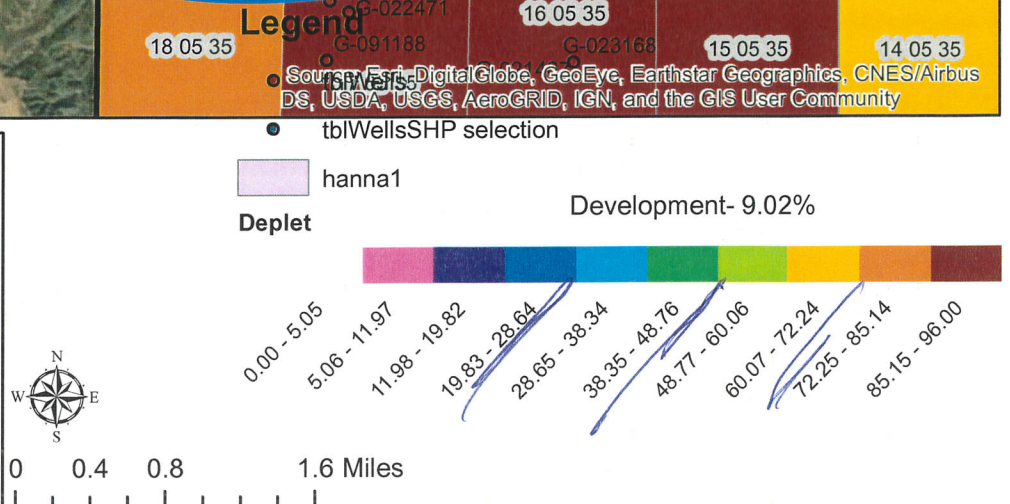
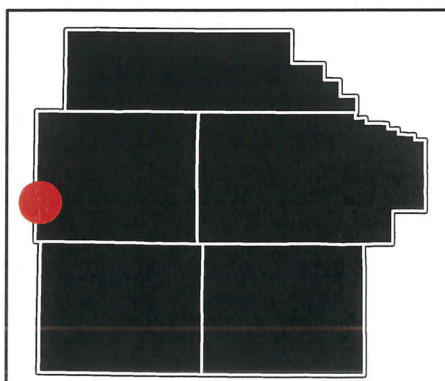
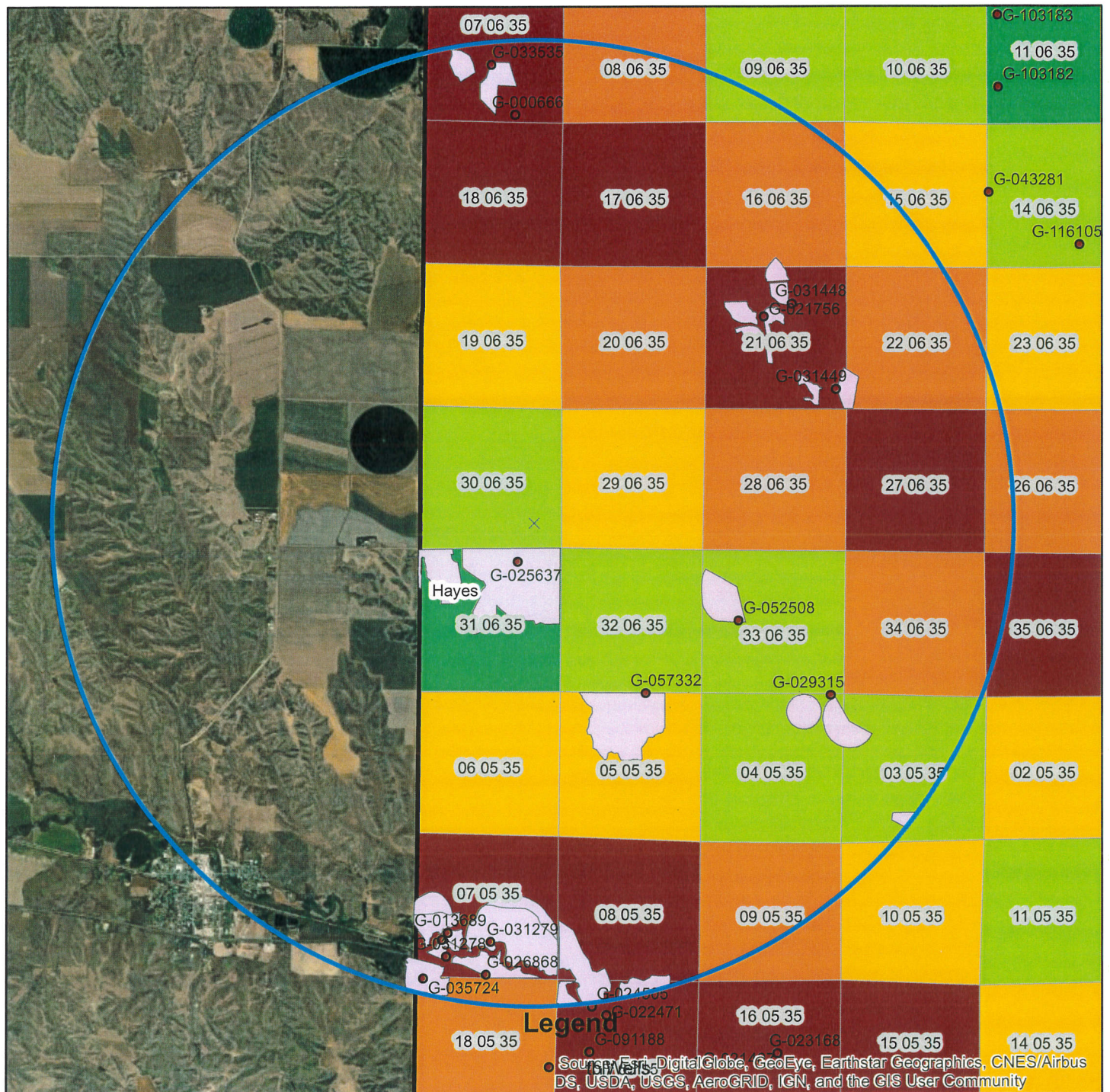
2016welldd

<VALUE>



Development- 9.02%

Variance Statistics Sheet Hanna Proposed - 30-6-35



Application for **PERMANENT TRANSFER OF CERTIFIED ACRES** within the
MIDDLE REPUBLICAN NATURAL RESOURCES DISTRICT

1. FROM: NAME AND ADDRESS

Name Mike HANNA
Address 34720 RD 733
City WAUNEPA State: NE Zip: 69045
Phone #: 308 394-5927

TO:

Name Matt Hanna
Address P.O. Box 863
City Imperial State: NE Zip: 69055
Phone #: (258) 883-0805

(Additional property owner names & addresses may be attached)

NRD USE ONLY:

Date received: 8/20/21
Transfer Rqst #: 22HA-PT-1
Transfer Fee Paid: Yes No
Approved or Denied?
Connie _____
Stacie _____

All requests for a Permanent Transfer shall include a nonrefundable filing fee of \$100.00. The application, involving a transfer well, shall include an additional nonrefundable filing fee of \$50.00 for an Application to Construct a Water Well.

APPLICANT MUST PROVIDE MAPS CLEARLY SHOWING THE **SOURCE AND DESTINATION** OF ACRES BEING REASSIGNED AND ANY OTHER CERTIFIED ACRES, OPERATED BY THE PRINCIPALS, IN THE IMMEDIATE AREA.

2. IDENTIFY THE **SOURCE** OF THE CERTIFIED ACRES:

Section 21, Township 6 North, Range 35 West
County Hayes County Parcel #: _____
(Additional Parcel #s may be attached)

Well Reg #: G-031448 Will operation of this well be discontinued? YES NO

Number of Acres to be Moved: 130

HISTORY OF USE:

Number of Acres Irrigated: 0 2020, 0 2019, 0 2018, 0 2017, 0 2016

Inches Used: : 0 2020, 0 2019, 0 2018, 0 2017, 0 2016

* Is there a SURFACE WATER CONTRACT on this parcel? YES NO
Is water delivered to this parcel? YES NO
If yes, history of delivery: (acre inches) : _____ 2020, _____ 2019, _____ 2018, _____

* Is there a renter or tenant on this property? YES NO
If yes, has this person been notified of your intent to permanently transfer certified irrigated acres? YES NO

* Is the destination of the acres being moved still located on a parcel you own? YES NO
If no, the owner of the parcel must provide a written statement acknowledging that occupation tax will be charged on their parcel and an agreement needs to be provided to the MRNRD showing the terms of who will retain the rights of such certified acres.

* Is/are there (a) mortgage(s), deed(s) of trust, or other consensual lien(s) filed of record on this parcel? YES NO
If yes, identify the name(s) and address(es) of all lien holder(s) of record:
Has/have the lien holder(s) been notified of the proposed reassignment application? YES NO

Attach a written consent executed by the lien holder(s) of the record.

Applicant acknowledges and agrees that if it is subsequently determined that an existing consensual lien holder of record has failed to consent in writing to the proposed reassignment, Middle Republican NRD reserves the right to revoke the reassignment of the certified acres to the destination parcel(s) identified in Section 3 of this Application.

I/we certify that I/we am/are familiar with the information contained in this application; that to the best of my/our knowledge and belief, such information is true, complete, and accurate; and that the undersigned constitute all of the owners of record of the real estate identified in Section 2 of this application.

DATE: _____

Michael J. Hanna
Signature of Owner

DATE: _____

Signature of Owner

3. IDENTIFY THE DESTINATION FOR CERTIFIED ACRES:

Section 30, Township 6 North, Range 35 West
County Hayes County Parcel #: 4300 22344
Well Reg #: New Well (Additional Parcel #s may be attached)

NRD USE ONLY:

Legal Owner(s) of Parcel
(s) indicated:

- * Are there other certified acres in this parcel? YES (NO)
If yes, provide legal description of all other certified acres in parcel:

Section _____, Township _____ North, Range _____ West

Section _____, Township _____ North, Range _____ West

Section _____, Township _____ North, Range _____ West

- * Is a well being transferred with these acres? YES NO

- * Is there a SURFACE WATER CONTRACT on this parcel? YES (NO)
Is water delivered to this parcel? YES NO

I/we certify that I/we am/are familiar with the information contained in this application; that to the best of my/our knowledge and belief, such information is true, complete, and accurate; and that the undersigned constitute all of the owners of record of the real estate identified in Section 3 of this application.

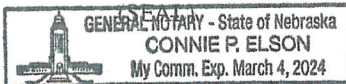
DATE: Aug 20, 2021

Michael Hanna
Signature of Applicants

STATE OF Nebraska)

COUNTY OF Frontier) SS

The foregoing, instrument was acknowledged before me on Aug 20, 2021, by Michael Hanna (print name).



Connie P Elson
Notary Public

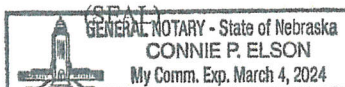
DATE: 8/20/2021

[Signature]
Signature of Applicants

STATE OF Nebraska)

COUNTY OF Frontier) SS

The foregoing, instrument was acknowledged before me on Aug. 20 2021, by Matt Hanna (print name).



Connie P Elson
Notary Public

4. APPROVAL BY THE MIDDLE REPUBLICAN NATURAL RESOURCES DISTRICT:

Date: 12/28/2021

[Signature]
Signature of MRNRD Representative

Application For A Permit to Construct A Water Well (MRNRD 5/5/2020)
In The Middle Republican Natural Resources District Ground Water Management Area

1. Name and Address of Land Owner:

MATTHEW HANNA
271 HWY 61 PO BOX 8163
IMPERIAL NE 69033

DNR & NRD USE ONLY	
Permit No.	<u>MR-22-734</u>
Reg. No.	
Received Date	<u>1/7/2022</u>

2. Purpose of Well (indicate one):

☒ Irrigation ☐ Public Water Supply ☐ Industrial ☐ Other _____ (Specify type)
Amount of water to be pumped, if other than irrigation use _____ acre feet / gals (select one)

3. Identify the Location of the Proposed Well:

HANES County, Section 564 30
Township 6 North, Range 35 West

The box at the right represents one square mile, (section). Indicate with an "X", the proposed location of the well. If the well is to be used for irrigation, outline lands to be irrigated.

The well will be located 1320 feet from the (North/South) section line, and 1320 feet from the (East/West) section line.

NWNW	NENW	NWNE	NENE
SWNW	SENW	SWNE	SENE
NWSW	NESW	NWSE	Nese
SWSW	SESW	SWSE	SESE
1320'	2640'		
5280'			

How many acres will be irrigated? 130

Type of irrigation system. Center Pivot ☒, Gravity ☐, Other (specify) _____
Will Fertilizer or Chemicals be applied through the proposed system ☒ Yes ☐ No?

Will System be ☒ Electric ☐ Fuel, powered?

Will the well be used in a system with other wells ☐ Yes ☒ No? How many _____

Distance from nearest well 1385' Type of well Irrigation

Have you checked county zoning requirements for well location ☒ Yes ☐ No?

4. Replacement and Abandonment Well Information: (see #1 on reverse side)

- A. Is this a replacement well? ☐ Yes ☒ No
B. Registration number of abandoned well: _____
C. Well to be replaced was last operated _____
D. Replacement well is _____ feet from abandoned well.
E. Original well pump column size: _____ inches.
F. Decommissioning to be completed on _____
G. Acres irrigated by well to be replaced. _____
H. Acres Certified for well to be replaced. _____
I. Is a flow meter installed on well to be replaced ☐ Yes ☐ No?

5. Specifications of Intended Well and Pump:

Approximate date when construction will begin: FEB 15, 2022

Pump column diameter: 16 inches. Estimated total well depth 440 feet.

Estimated pumping capacity: 700 gallons per minute. Well casing diameter: 8 inches.

Expected well log, if known. (Please provide a copy of test drilling report, if available)

6. I certify that I am familiar with the information contained in this application, and that to the best of my Knowledge and belief such information is true, complete and accurate.

Date 12/30/21

Signature of applicant [Signature]

Date Approved 1/7/2022

NRD Representative [Signature]

SEE OTHER SIDE FOR IMPORTANT RULES AND REGULATIONS!!

Middle Republican NRD
P.O. Box 81

Phone (308)367-4281
800-873-5613