Application for a Variance to Expand Irrigated Acres

Complete the information below. Items marked with an asterisk (*) are required.

*A Contact Information: Landowner □ Operator □

Name: _________________________________
Address: _________________________________
Address: _________________________________
City: _________________________State: __Zip: _____
Phone: ____________________, □ Home, □ Business, □ Mobile
Fax: ____________________

*B Existing Well Location Information

State Well Number: _____________; Registered to: □ Landowner □ Operator
Latitude: _____________; Longitude: _____________; Elevation: _____________
_____feet from the □ N □ S Section Line _____feet from the □ E □ W section line
Township _______ □ N □ S, Range _______ □ E □ W, _________________ County
(At least one form of location information must be provided: State Well Registration Number, Latitude and Longitude, or Legal Description with offset distances)

*C New Well Information (If Requesting a Variance for a New Well)

Latitude: _____________; Longitude: _____________; Elevation: _____________
_____feet from the □ N □ S Section Line _____feet from the □ E □ W section line
Township _______ □ N □ S, Range _______ □ E □ W, _________________ County

Papio NRD Form 17.21.B, Revision 09.02.2009, BLH
**D  Legal Description of Acres**

Parcel Number: ___________ (From County Tax Assessor Records)

___ 1/4 of the ___ 1/4 of Section _______, Township _______, □ N □ S,
Range _______ □ E □ W, ______________ County, Acres in Parcel: ___________

(This section must include either a parcel number or legal description and must include the total number
of acres in the parcel)

**E  Number of Irrigated Acres in the Parcel**

<table>
<thead>
<tr>
<th>Acres Currently Irrigated by Groundwater</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Acres Currently Irrigated by Surface Water</td>
<td></td>
</tr>
<tr>
<td>Requested Number of Irrigated Acres</td>
<td></td>
</tr>
</tbody>
</table>

**F  Type of Irrigation (Check all that apply)**

Center Pivot □, Low Pressure: Yes □ No □, End Gun: Yes □ No □
Chemigation Equipment □, Travelling Gun □, Gated Pipe/Furrow □
Drip □, Subsurface □, Other □ ______________________________ (Please Describe)

(Please indicate the type of irrigation equipment used to irrigate the listed acres)

I recognize that this form also serves as a Nebraska Department of Natural Resources form and
acknowledge that a copy of this form may be sent to the Department. I agree that this form
shall serve as notification to the Department that any recorded water well information that is
inconsistent with the information reflected in this form should be revised in accordance with the
information on this form. For any registered well that is identified on this form, the Department
may use the information herein to process a change relative to the registered well data base for
that well. The Department shall not collect a fee for the filing of this form.

*Landowner/Operator: ________________________________ Date: _____________
Signature

Papio NRD Approval: _________________________________ Date: _____________
Signature
Instructions for Papio Form 17.21.B

A. Contact Information

Provide the name, address and phone number of the contact person for the parcel and a fax number if available. Please indicate whether the contact is the landowner or the operator for the parcel and the type of phone number provided.

B. Existing Well Location Information

Provide at least one of the following:

- Well registration number of the irrigation well as provided by the Nebraska Department of Natural Resources,
- The latitude and longitude of the irrigation well. Also provide the elevation of the irrigation well if available,
- The Subsection, Section, Township, Range and County of the irrigation well and the distance from the nearest section lines.

C. New Well Information

Provide the latitude and longitude or legal description of the location of the proposed well. Once completed, the well registration must be provided to the district.

D. Legal Description of Acres

Provide the Parcel Number and legal description of the of the acres to be certified. Include the ¼, ¼ Section (if applicable), Section Number, Township Number, Range Number and the number of acres in the parcel.

E. Number of Irrigated Acres in the Parcel

Provide a breakdown of the irrigated acres in the parcel and the number of acres currently in a federal set aside program by completing the provided table.

F. Type of Irrigation

Check all boxes that apply for the type of irrigation equipment used on the parcel.