

# APPLICATION FOR A VARIANCE TO EXPAND IRRIGATED ACRES

A. Contact Information	☐ Landowner ☐	Operator		
Organization:				
Contact Person:				
Address:				
City/State/Zip:				
Phone:			☐ Home ☐ Business ☐ Mob	ile
E-mail Address:				
B. Existing Well Location	Information			
State Well Number:		_; Registered	l to: □ Landowner □ Oper	rator
Latitude:	_; Longitude:		; Elevation:	;
feet from the	☐ N Section Line: _		feet from the $\square$ E Section L	.ine
Township:	_ □ N, Range:	□ E,	Coun	ty
(At least one form of location informand legal description with offset dis		State Well Regis	stration Number, Latitude and Longi	tude,
C. New Well Information (	if requesting a varia	ance for a ne	w well)	
Latitude:	_; Longitude:	;	; Elevation:	;
feet from the	☐ N Section Line: _		feet from the $\square$ E Section L	.ine
Township:	_ □ N, Range:	□ E,	Coun	ty
D. Legal Description of A	cres			
Parcel Number (from County	y Assessor):			
Registered to:				

1/4 of the	1/4 of Section:	, Township:		, □ N,	
Range:	□ E,	County, Acres in Parcel:			
(This section must include the parcel.)	le either a Parcel Number or le	egal description and must inc	clude the total number	of acres in	
E. Number of Irrig	ated Acres in the Parce	el			
Acres Currently Irrigated	d by Groundwater				
Acres Currently Irrigated	d by Surface Water				
Requested Number of C	Certified Irrigated Acres				
F. Type of Irrigation	on (Check all that apply	<i>'</i> )			
☐ Center Pivot, Low	Pressure: 🗆 Yes 🗆 I	No, End Gun: 🗆 Yes	s □ No		
☐ Chemigation Equ	iipment, 🛚 Travelling G	Gun, ☐ Gated Pipe/F	urrow,		
☐ Drip, ☐ Subsurf	ace, 🗆 Other		(Please describe)		
(Please indicate the type	of irrigation equipment used	to irrigate the listed acres.)			
acknowledge that a contification to the Dep information reflected in any registered well that	rm also serves as a Nebras opy of this form may be sen artment that any recorded on this form should be revise at is identified on this form, tive to the registered well of form.	nt to the Department. I agr water well information that ed in accordance with the the Department may use	ee that this form sha t is inconsistent with information on this fo the information here	ll serve as the orm. For in to	
Landowner/Operator Name (Printed):			PAPIO NRD OF		
		<b>.</b>	Approval Date		
Signature:		Date	Approved Initials		
Papio NRD Approval (	Printed):				
Signature:		Date			



# **Instructions for Papio NRD Form 17.21-2.**

#### A. Contact Information

Provide the name, address and phone number of the contact person for the parcel and an email address 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:

- 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 ground level elevation at 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 acres to be certified. Include the  $\frac{1}{4}$ ,  $\frac{1}{4}$  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 by type and the requested new total of certified acres.

## F. Type of Irrigation

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