



NORTH PLATTE
 Natural Resources District

100547 Airport Road, P.O. Box 280, Scottsbluff, NE 68363-0280
 PHONE: (308) 632-2749 FAX: (308) 632-4346 www.npnrd.org

APPLICATION FORM
Certified Irrigated Acres
 (In compliance with Rule 3-3,
 NPNRD Rules & Regulations)

Landowner (11574)
 Name: Young Revocable Trust and Gullett
 Address: PO Box 271
 City: Lyman State: NE Zip: 69352
 Phone: (308) 787 1352
 Email: _____

Contact Person (Operator/legal representative/etc.)
 Name: Steve L. Stratton
 Address: 30502 Highway 92
 City: Lyman State: NE Zip: 69352
 Phone: (308) 787 1553
 Email: _____

1. Location of Use:

Legal Description (to the nearest 1/4 section) of irrigated parcel

SE 1/4 of Section 16 T23N
SW Section 15 T23N R6W
 County: Scotts Bluff/Goshen WY N/A

2. Size of irrigated parcel of land: 134.6 ac

3. When was this land first irrigated? 1958

4. Source of irrigation water other than ground water, if any:
 (If none, please write N/A)

5. Aerial Photograph: (Please Attach) _____

6. Historical Documentation of Irrigated Acres: Please attach to this application form your historical documentation of irrigated acres that supports your Size of Irrigated parcel of Land (i.e., FSA, County Assessor, or any other appropriate documentation) dated between July 1, 1997 and July 26, 2004.

7. Documentation of Irrigated Acres as of July 26, 2004: See attached aerial photograph(s).

8. Well Information: Used to irrigate this parcel of land (Use Additional Well Information on back if needed)

Reg. Well Status OA Legal AND Latitude/Longitude

Reg. Well	Status	OA	Legal AND Latitude/Longitude
G-015400	A	<input checked="" type="checkbox"/>	41° 57' 47.49" N 104° 3' 8.92" W

9. Is a flow meter in use on well(s)? NO If yes, give location: _____

To the best of my knowledge, the above information is true and accurate. 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 of well ownership, a change in use, a change in location of the well or of the use of the water from the well, a change in number of acres irrigated by the well, or any other 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/Legal Representative Signature

Date

Staff Initials:

RECEIVED

MAR 19 2008

