

# STATE OF NEBRASKA DEPARTMENT OF NATURAL RESOURCES

## APPLICATION FOR A PERMIT TO TRANSFER GROUND WATER TO ADJOINING STATE

### INSTRUCTIONS



### For Department Use Only

This form must be completed in full. An incomplete or defective form will be returned. Failure to resubmit a corrected application within the time limit specified will cause dismissal of the application. Complete items 1-8 by printing in ink or typing the appropriate information. The following information is also required (see Department Rules, Title 456, Chapter 6 for requirements):

1. A map submitted on 8½" x 11" paper or paper folded to such a size showing the location of the well(s); the pipeline(s) or other means of transporting water; the location of use.
2. Information on the possible negative effects of the proposed withdrawal on ground water and surface water supplies in the area.

A non-refundable filing fee of \$10 (payable to the Department of Natural Resources) must accompany this application. Forward this application, fee and map to: **Department of Natural Resources, P.O. Box 94676, Lincoln, Nebraska 68509-4676.** The telephone number is (402) 471-2363.

Filed at \_\_\_\_\_ a.m./p.m. on \_\_\_\_\_, 20\_\_\_\_

Application No. TA-\_\_\_\_\_

Natural Resources District \_\_\_\_\_

Receipt No. \_\_\_\_\_ Amount \_\_\_\_\_

1. Name of applicant: \_\_\_\_\_ Telephone Number (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ + \_\_\_\_\_

2. If applicable: Well Registration Number(s) \_\_\_\_\_

Management or Control Area Permit/Number(s) \_\_\_\_\_

3. Identify the location and capacity of well(s):

\_\_\_\_ ¼ of the \_\_\_\_ ¼ of Section \_\_\_\_, Township \_\_\_\_ North, Range \_\_\_\_ E W , \_\_\_\_\_ County, \_\_\_\_\_ gpm

\_\_\_\_ ¼ of the \_\_\_\_ ¼ of Section \_\_\_\_, Township \_\_\_\_ North, Range \_\_\_\_ E W , \_\_\_\_\_ County, \_\_\_\_\_ gpm

\_\_\_\_ ¼ of the \_\_\_\_ ¼ of Section \_\_\_\_, Township \_\_\_\_ North, Range \_\_\_\_ E W , \_\_\_\_\_ County, \_\_\_\_\_ gpm

\_\_\_\_ ¼ of the \_\_\_\_ ¼ of Section \_\_\_\_, Township \_\_\_\_ North, Range \_\_\_\_ E W , \_\_\_\_\_ County, \_\_\_\_\_ gpm

\_\_\_\_ ¼ of the \_\_\_\_ ¼ of Section \_\_\_\_, Township \_\_\_\_ North, Range \_\_\_\_ E W , \_\_\_\_\_ County, \_\_\_\_\_ gpm

4. Identify the location of use:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Maximum annual quantity of ground water requested for use in adjoining state: \_\_\_\_\_ per annum

acre-feet

6. Maximum daily withdrawal requested: \_\_\_\_\_ per day

gallons

- 
7. Ground water is proposed to be used for:       Irrigation                       Public Water Supply                       Commercial/Industrial
- Domestic                                       Livestock
- Other (explain) \_\_\_\_\_
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8. Projected date water will first be pumped or date water was first pumped \_\_\_\_\_

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9. State all alternative sources of water that are available and why applicant chooses not to use them:

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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.

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Signature of Applicant

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Date