

APPLICATION FOR A PERMIT TO CONSTRUCT A WELL
IN THE LOWER REPUBLICAN NATURAL RESOURCES DISTRICT

1. NAME: Webster County Development LLC

DNR & NRD USE ONLY

ADDRESS: % P O Box 385
Red Cloud, Ne 68970

PERMIT NO.: LR 08 209
REGISTRATION NO.:

PHONE:

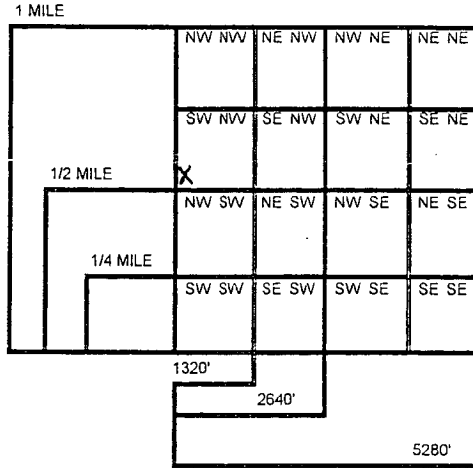
2. PURPOSE OF WELL (Indicate One): [] Irrigation [] Livestock (>50 gpm) [] Public Water Supply [] Other
[x] Industrial [] Dewatering (over 90 days) [] Aquaculture

3. IDENTIFY THE LOCATION OF THE PROPOSED WELL:

Webster County, Township 2 North,
Range, 10 West, Section 17

The box at the right represents one square mile, (section).
indicate with an "X" the proposed location of the well.
Outline the proposed water use area, if water is to be used
outside the above written legal description, give legal
description of water use area.

Township 1 North, Range 10 West, Section NW 5



4. NEW IRRIGATION WELLS:

How many acres will be irrigated? n/a
Flow meter will be used on proposed well.
Type of irrigation system: [] Center Pivot [] Gravity [] Other (specify)
Will system be [] Electric [] Fuel Powered?
Will the Well be used in a system with other wells? [] YES [] NO If yes, how many?
Will fertilizer, chemicals or animal waste be applied through the system? [] YES [] NO

5. REPLACEMENT AND ABANDONMENT WELL INFORMATION:

How many acres will be irrigated?
A. Is this a replacement well? [] YES [x] NO
B. Registration number of well to be replaced:
C. Well to be replaced was last operated, 20
D. Replacement well is feet from original well. (can not exceed 1,320 feet)
E. Completion of original well decommissioning on, 20
F. New well will provide water only to land historically irrigated by the well being replaced, and shall not be used to irrigate any additional acres.

6. SPECIFICATIONS OF INTENDED WELL AND PUMP:

Approximate date when construction will begin: 20
Pump column diameter: inches. Estimated total well depth feet.
Estimated pumping capacity: gallons per minute. Well casing diameter: inches.
Please attach test hole log, if available.
Name of Well Driller:

7. I certify that I am familiar with the information contained in the application and its' restrictions, rules and regulations, and that to the best of my knowledge and belief such information is true, complete and accurate.

This form must be completed in full and be accompanied by a non-refundable \$50.00 fee (payable to the Lower Republican Natural Resources District, PO Box 618, Alma, NE 68920)

Date: 5/13/08
Date Approved: 5-19-08

Signature: [Signature] Mg Member
* NRD Representative: [Signature]

SEE OTHER SIDE FOR IMPORTANT PERMIT RESTRICTIONS, RULES AND REGULATIONS

* offsets need to be provided as per Rules * RECEIVED MAY 15 2008
Reg's effective 2-29-08.

5-19-08
pd/s.ck
SO