CENTRAL PLATTE NRD WELL DECOMMISSIONING COST SHARE PROGRAM

Revised (6/29/2009)

The purpose of well decommissioning is to prevent entry of vermin, debris, or other foreign substances into the well or well bore holes. Eliminate the physical hazard of an open hole to people, animals, and farm machinery. Prevent entry of contaminated surface water into well and migration of contaminants into unsaturated (vadose) zone or saturated zone. Prevent the commingling of chemically or physically different ground waters between separate water bearing zones.

LANDOWNER: _____ SOCIAL SECURITY NO: _____

ADDRESS: _____ PHONE: _____

_____ COUNTY: _____

OPERATOR: _____ Well Driller: _____

LOCATION: _____ 1/4, SECTION _____ TOWNSHIP _____ RANGE _____
_____ feet from (N / S) section line and _____ feet from (E / W) section line

If registered, # _____ type of well _____

Does this well pump 50 gallons or less? _____

This application will not be effective until approved by the NRD. Claims for payment will not be accepted more than 5 months from the date this application is approved. Claims for payment submitted but being held subject to complaince with all rules and regulations of the Central Platte NRD programs shall be held only up to 90 days. After 90 days, the claim for payment shall be considered void and the original application cancelled. **Items of cost for which reimbursement is claimed are to be supported by documentation of payment made**. **A LICENSED WATER WELL CONTRACTOR OR PUMP INSTALLATION CONTRACTOR IS REQUIRED TO DO THE ABANDONMENT IN ORDER TO RECEIVE COST SHARE.** Cost share available only for actual filling of well. Cost share is 60% up to a $750 for all irrigation wells. Any well that pumps 50 gallons or less is 60% up to a $500, and any hand dug well is 60% up to $1,000.

APPLICANT'S REQUEST	PERFORMED		
Maximum Assistance	Actual Cost	60% Actual	Cost Share

APPLICATION: I understand that I must be in compliance with all rules and regulations of the Central Platte Natural Resources District's programs, both at the time of application in order to receive approval, and at the time of completion in order to receive payment.

_____
Landowner Date

APPLICATION APPROVAL:
The Central Platte NRD Board of Directors approved the Applicant's request and hereby obligate $ _____

_____
NRD Representative Date

COMPLETION AND CERTIFICATION:
The Department of Health regulations governing water well decommissioning Chapter 12, have been followed.

_____
Water Well Contractor Date

_____
NRD Representative Date

State Requirement: Well must be decommissioned within 180 days from date new well was drilled, for replacement wells.

Office Use Only:
Record# Compliance Bills Paid

Note: Cost share payments are considered taxable income. Recipents of total payments of $600 or more in a calendar year will receive a Federal Form 1099.

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