

## Program Goals

1. Locate all sources of private water usage in the Hastings Institutional Control Area (ICA).
2. Provide water testing of all water used in the Hastings ICA.
3. Provide public education of water quality being used by persons in the Hastings ICA.
4. Provide appropriate signage on all wells.

## Water Testing Plan

### 1. Contaminates of concern.

Nitrates, Coliforms, Volatile Organic Compounds (VOC's), Solvents, Grain Fumigants, & Gasoline Compounds.

*All tests collected & provided by Hastings Utilities (HU) at no charge to the water user.*

### 2. Testing Frequency as Provided by HU

No detection of VOC's or Nitrates less than 5 mg/l.

Test once every three years.

Detection of VOC's or Nitrates less than

5 mg/l & 7.5 mg/l.

Test once per year.

Detections of VOC's above one half of EPA

Maximum, or contaminate levels of Nitrates

Above 7.5 mg/l.

Test twice each year.

For more information on permissible water quality standards and related health effects contact Hastings Utilities.

## For More Information Contact:

### General Program Information

Mr. Steve Cogley  
Public Relations Coordinator  
Hastings Utilities  
Ph# 402-462-3693  
Fax# 402-463-1705

### Water Sampling Information

Mr. Marty Stange  
Environmental Supervisor-Hastings Utilities  
Ph# 402-462-3651  
Email: mstrange@hastingsutilities.com

Mrs. Jenny Sidlo  
Assistant Engineer-Environmental-Hastings Utilities  
Ph# 402-462-3664  
Email: jsidlo@hastingsutilities.com

### Drinking Water and Public Health

Nebraska Dept. of Health & Human Services  
Domestic Well Division  
Lincoln, NE  
Ph# 402-471-0598

### Water Resources

Little Blue Natural Resource District  
Davenport, NE  
Ph# 402-364-2145  
Upper Big Blue Natural Resource District  
York, NE  
Ph# 402-362-6601

## Hastings

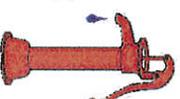
## Institutional

## Control Area-

## Wellhead

## Protection Plan

### Hastings Institutional Control Area



Ground water use restrictions. Well permits required.

Please contact Hastings Utilities at PH (402) 463-1371.



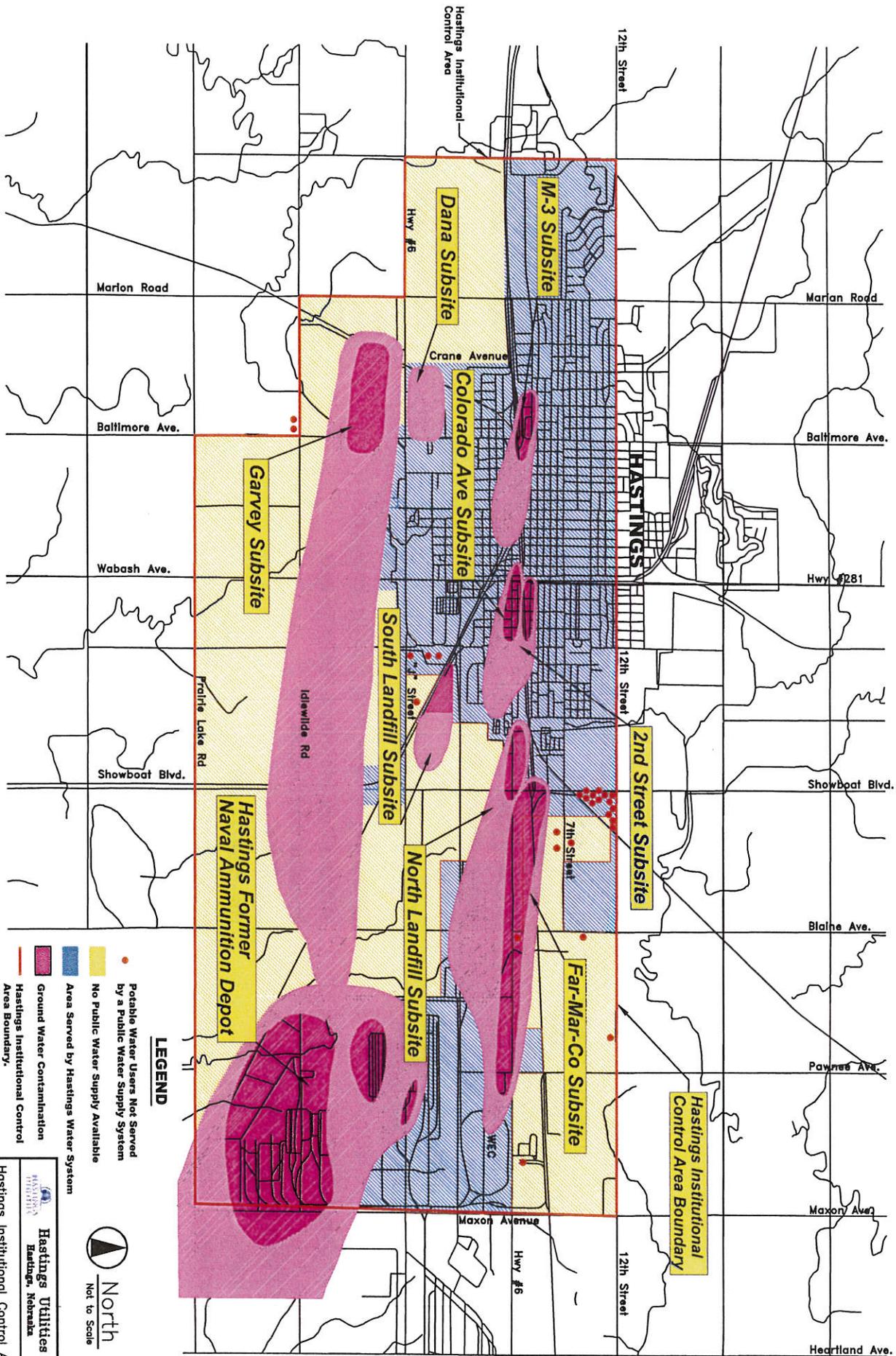
1228 N. Denver Avenue

Hastings, NE 68901

Phone: 402-463-1371

Fax: 402-462-3666

Email: safewater@hastingsutilities.com



- LEGEND**
- Potable Water Users Not Served by a Public Water Supply System
  - No Public Water Supply Available
  - Area Served by Hastings Water System
  - Ground Water Contamination
  - Hastings Institutional Control Area Boundary.



Hastings Utilities  
Hastings, Nebraska

Hastings Institutional Control Area  
with Groundwater Contamination Areas

No.	Location	Size	Date	CD	App	Notes
1	1st St. Storage	1.5	1/21/01	CD	App	
2	2nd St. Storage	1.5	1/21/01	CD	App	

\\hastings\apps\GIS\Hastings-1.dwg  
 Date: 11/20/01  
 Drawn by: S. Strickland  
 Date: 9-25-07

# Hastings Utilities / City of Hastings, NE Water Well Registration

1228 North Denver Avenue  
Hastings, NE 68901

Hastings Permit No. _____	\$17.50
Date _____	App'd By _____

Please print

**1. Name of Owner:**

<i>Name</i> _____	<i>Address</i> _____	<i>City</i> _____	<i>State</i> _____	<i>Zip</i> _____
Phone No. _____	E-mail Address _____			

**2. Indicate the Use: Please place "x" in appropriate box(es)**

Irrigation     
  Municipal     
  Industrial     
  Domestic

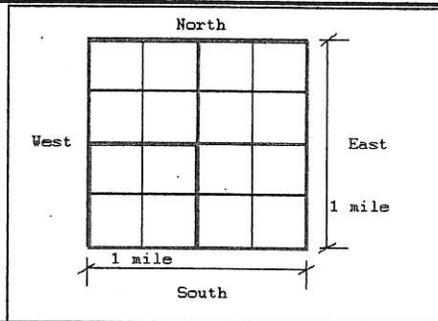
If the well is for more than one purpose or for a purpose other than indicated above, explain below.

**3. Identify the Location of the Well:**

\_\_\_\_\_ County, Township \_\_\_\_\_ North,  
Range \_\_\_\_\_ West, Section \_\_\_\_\_

The box at right represents one square mile, (section). Indicate with an "x" the location of the well. If the well is for irrigation, indicate the location of lands irrigated.

How many acres will be irrigated? \_\_\_\_\_



**4. Specifications of Well and Pump:**

Pump column diameter: \_\_\_\_\_ inches.      Well Depth \_\_\_\_\_ feet.  
 Pumping rate under normal operating conditions: \_\_\_\_\_ gallons per minute.

**5. Well Registration and Construction Schedule:**

If the well is registered with another agency, such as NRD or NWR, give the registration number: \_\_\_\_\_

Indicate the date construction was begun: \_\_\_\_\_

Indicate the date construction was completed: \_\_\_\_\_

**6. Well Driller's** Name: \_\_\_\_\_

Address: \_\_\_\_\_

Bus Ph# \_\_\_\_\_ Fax \_\_\_\_\_ Cellular \_\_\_\_\_

E-Mail Address \_\_\_\_\_

**7. Certification:** 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.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

**NOTICE:** Hastings Utilities has not conducted any independent testing regarding the water to be produced by this well. Therefore, issuance of this permit should not be construed as any guarantee or representation that the water produced by this well can or will meet drinking water quality standards. Water quality varies throughout our region. It is therefore strongly recommended that, prior to consuming or using the water for domestic purposes, the water produced by this well should be tested by a qualified laboratory, following established sampling and testing protocols.

Please provide as much information as possible. If any information as requested is not known, please leave blank.