October 2022

POOLING AGREEMENT of Ground Water in the Middle Republican Natural Resources District GROUND WATER MANAGEMENT AREA

Date received: Pooling #: Contact#: Approved or Denied (circle one)			NameAddressCity, State, Zip												
									DateIniti	al	-				
										I hereby	request to poo	l the use of grou	nd water from:		
									Well registration #	Section	Township	Range	County	Cert. Acres	Field
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I understand by requesting the right to pool the use of the ground water that I am expected to comply with the Districts rules, regulations or controls in effect or properly adopted at a later date. Documentation must be provided to the District showing common management between the parties of the wells listed above. FSA documentation (578's & Farm Data Maps) showing owner/tenant relationship or a copy of the land lease) AND all owners must sign this agreement and their signature must be notarized to be considered for approval by the District. If these requirements are not met, this requested agreement will be denied until the appropriate documents and/or signatures are received. You will be notified via U.S. Mail as to whether your application has been approved or denied. If you need additional space for wells or signatures, please contact our office at 308-367-4281.

Print Name If signed by a representative, p	Signature (or representative) lease attach a power of attorney		Date	
STATE OF)			•
COUNTY OF) SS)			•
The foregoing, instrument was acknowledged before me on		, by		(print name).
(SEAL)				
Not	ary Public			
Print Name If signed by a representative, p	Signature (or representative) lease attach a power of attorney		Date	
STATE OF)			•
COUNTY OF) SS)			
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(SEAL)				
Not	ary Public			
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