

NOTICE

This scan only represents the application as filed. The information contained herein meets the requirements of K.A.R. 5-3-1 or K.A.R. 5-5-1, and has been found acceptable for filing in the office of the Chief Engineer. The application should not be considered to be a complete application as per K.A.R. 5-3-1b or K.A.R. 5-5-2a.

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NOV 21 2022

Garden City Field Office
Division of Water Resources

THE STATE OF KANSAS



WATER RESOURCES
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2:05

KS DEPT OF AGRICULTURE

KANSAS DEPARTMENT OF AGRICULTURE
Mike Beam, Secretary of Agriculture

DIVISION OF WATER RESOURCES
Earl D. Lewis Jr., Chief Engineer

50918

File Number _____
This item to be completed by the Division of Water Resources.

APPLICATION FOR PERMIT TO
APPROPRIATE WATER FOR BENEFICIAL USE

Filing Fee Must Accompany the Application
(Please refer to Fee Schedule attached to this application form.)

To the Chief Engineer of the Division of Water Resources, Kansas Department of Agriculture,
1320 Research Park Drive, Manhattan, Kansas 66502:

1. Name of Applicant (Please Print): COPELAND TOWNSHIP, ROBERT REED
Address: PO BOX 97
City: COPELAND State KS Zip Code 67837-0097
Telephone Number: (____) _____

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2. The source of water is: surface water in _____ (stream)
OR groundwater in CROOKED CREEK (drainage basin)

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Division of Water Resource

Certain streams in Kansas have minimum target flows established by law or may be subject to administration when water is released from storage for use by water assurance district members. If your application is subject to these regulations on the date we receive your application, you will be sent the appropriate form to complete and return to the Division of Water Resources.

3. The maximum quantity of water desired is 4.5 acre-feet OR _____ gallons per calendar year, to be diverted at a maximum rate of 50 gallons per minute OR 0.11 cubic feet per second.

Once your application has been assigned a priority, the requested maximum rate of diversion and maximum requested quantity of water under that priority number can **NOT** be increased. Please be certain your requested maximum rate of diversion and maximum quantity of water are appropriate and reasonable for your proposed project and are in agreement with the Division of Water Resources' requirements.

4. The water is intended to be appropriated for (Check use intended):
(a) Artificial Recharge (b) Irrigation (c) Recreational (d) Water Power
(e) Industrial (f) Municipal (g) Stockwatering (h) Sediment Control
(i) Domestic (j) Dewatering (k) Hydraulic Dredging (l) Fire Protection
(m) Thermal Exchange (n) Contamination Remediation

YOU **MUST** COMPLETE AND ATTACH ADDITIONAL DIVISION OF WATER RESOURCES FORM(S) PROVIDING INFORMATION TO SUBSTANTIATE YOUR REQUEST FOR THE AMOUNT OF WATER FOR THE INTENDED USE REFERENCED ABOVE.

12/8/2022

L Moody

For Office Use Only:
F.O. 4 GMD 3 Meets K.A.R. 5-3-1 (YES / NO) Use IRR Source G/S County GY By ALB Date 11/30/22
Code RBG Fee \$ 200.00 TR # _____ Receipt Date 11-21-22 Check # 3078

5. The location of the proposed wells, pump sites or other works for diversion of water is:

Note: For the application to be accepted, the point of diversion location must be described to at least a 10 acre tract, unless you specifically request a 60 day period of time in which to locate the site within a specifically described, minimal legal quarter section of land.

- (A) One in the SE quarter of the NE quarter of the NE quarter of Section 8, more particularly described as being near a point 10 feet North and 4382 feet West of the Southeast corner of said section, in Township 29 South, Range 30 West, GY _____ County, Kansas.
- (B) One in the _____ quarter of the _____ quarter of the _____ quarter of Section _____, more particularly described as being near a point _____ feet North and _____ feet West of the Southeast corner of said section, in Township _____ South, Range _____ East/West (circle one), _____ County, Kansas.
- (C) One in the _____ quarter of the _____ quarter of the _____ quarter of Section _____, more particularly described as being near a point _____ feet North and _____ feet West of the Southeast corner of said section, in Township _____ South, Range _____ East/West (circle one), _____ County, Kansas.
- (D) One in the _____ quarter of the _____ quarter of the _____ quarter of Section _____, more particularly described as being near a point _____ feet North and _____ feet West of the Southeast corner of said section, in Township _____ South, Range _____ East/West (circle one), _____ County, Kansas.

If the source of supply is groundwater, a separate application shall be filed for each proposed well or battery of wells, except that a single application may include up to four wells within a circle with a quarter (1/4) mile radius in the same local source of supply which do not exceed a maximum diversion rate of 20 gallons per minute per well.

A battery of wells is defined as two or more wells connected to a common pump by a manifold; or not more than four wells in the same local source of supply within a 300 foot radius circle which are being operated by pumps not to exceed a total maximum diversion rate of 800 gallons per minute and which supply water to a common distribution system.

6. The owner of the point of diversion, if other than the applicant is (please print):

SAME

(name, address and telephone number)

(name, address and telephone number)

You must provide evidence of legal access to, or control of, the point of diversion from the landowner or the landowner's authorized representative. Provide a copy of a recorded deed, lease, easement or other document with this application. In lieu thereof, you may sign the following sworn statement:

I have legal access to, or control of, the point of diversion described in this application from the landowner or the landowner's authorized representative. I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 18, 2022 Robert C. Rose
Applicant's Signature

The applicant must provide the required information or signature irrespective of whether they are the landowner. Failure to complete this portion of the application will cause it to be unacceptable for filing and the application will be returned to the applicant.

7. The proposed project for diversion of water will consist of 1 ONE _____
(number of wells, pumps or dams, etc.)

and (will be) completed (by) 2023 _____
(Month/Day/Year - each was or will be completed)

8. The first actual application of water for the proposed beneficial use was or is estimated to be 2023 _____
(Mo/Day/Year)

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**IRRIGATION USE
SUPPLEMENTAL SHEET**

File No. _____

Name of Applicant (Please Print): COPELAND TOWNSHIP

1. Please supply the name and address of each landowner, the legal description of the lands to be irrigated, and designate the actual number of acres to be irrigated in each forty acre tract or fractional portion thereof:

Landowner of Record NAME: COPELAND TOWNSHIP, ROBERT REED

ADDRESS: PO BOX 97, COPELAND KS 67837-0097

| S | T | R | NE¼ | | | | NW¼ | | | | SW¼ | | | | SE¼ | | | | TOTAL |
|---|----|-----|-----|----|----|----|-----|----|----|----|-----|----|----|----|-----|----|----|----|-------|
| | | | NE | NW | SW | SE | NE | NW | SW | SE | NE | NW | SW | SE | NE | NW | SW | SE | |
| 8 | 29 | 30W | 8 | | | | | | | | | | | | | | | | 8 |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

Landowner of Record NAME: _____

ADDRESS: _____

| S | T | R | NE¼ | | | | NW¼ | | | | SW¼ | | | | SE¼ | | | | TOTAL |
|---|---|---|-----|----|----|----|-----|----|----|----|-----|----|----|----|-----|----|----|----|-------|
| | | | NE | NW | SW | SE | NE | NW | SW | SE | NE | NW | SW | SE | NE | NW | SW | SE | |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

Landowner of Record NAME: _____

ADDRESS: _____

| S | T | R | NE¼ | | | | NW¼ | | | | SW¼ | | | | SE¼ | | | | TOTAL |
|---|---|---|-----|----|----|----|-----|----|----|----|-----|----|----|----|-----|----|----|----|-------|
| | | | NE | NW | SW | SE | NE | NW | SW | SE | NE | NW | SW | SE | NE | NW | SW | SE | |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |

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2. Please complete the following information for the description of the operation for the irrigation project. Attach supplemental sheets as needed.

a. Indicate the soils in the field(s) and their intake rates:

| Soil Name | Percent of field (%) | Intake Rate (in/hr) | Irrigation Design Group |
|-----------|----------------------|---------------------|-------------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| Total: | 100 % | | |

b. Estimate the average land slope in the field(s): _____ %

Estimate the maximum land slope in the field(s): _____ %

c. Type of irrigation system you propose to use (check one):

- Center pivot Center pivot - LEPA "Big gun" sprinkler
 Gravity system (furrows) Gravity system (borders) Sideroll sprinkler

Other, please describe: _____

d. System design features:

i. Describe how you will control tailwater:

ii. For sprinkler systems:

(1) Estimate the operating pressure at the distribution system: _____ psi

(2) What is the sprinkler package design rate? _____ gpm

(3) What is the wetted diameter (twice the distance the sprinkler throws water) of a sprinkler on the outer 100 feet of the system? _____ feet

(4) Please include a copy of the sprinkler package design information.

e. Crop(s) you intend to irrigate. Please note any planned crop rotations:

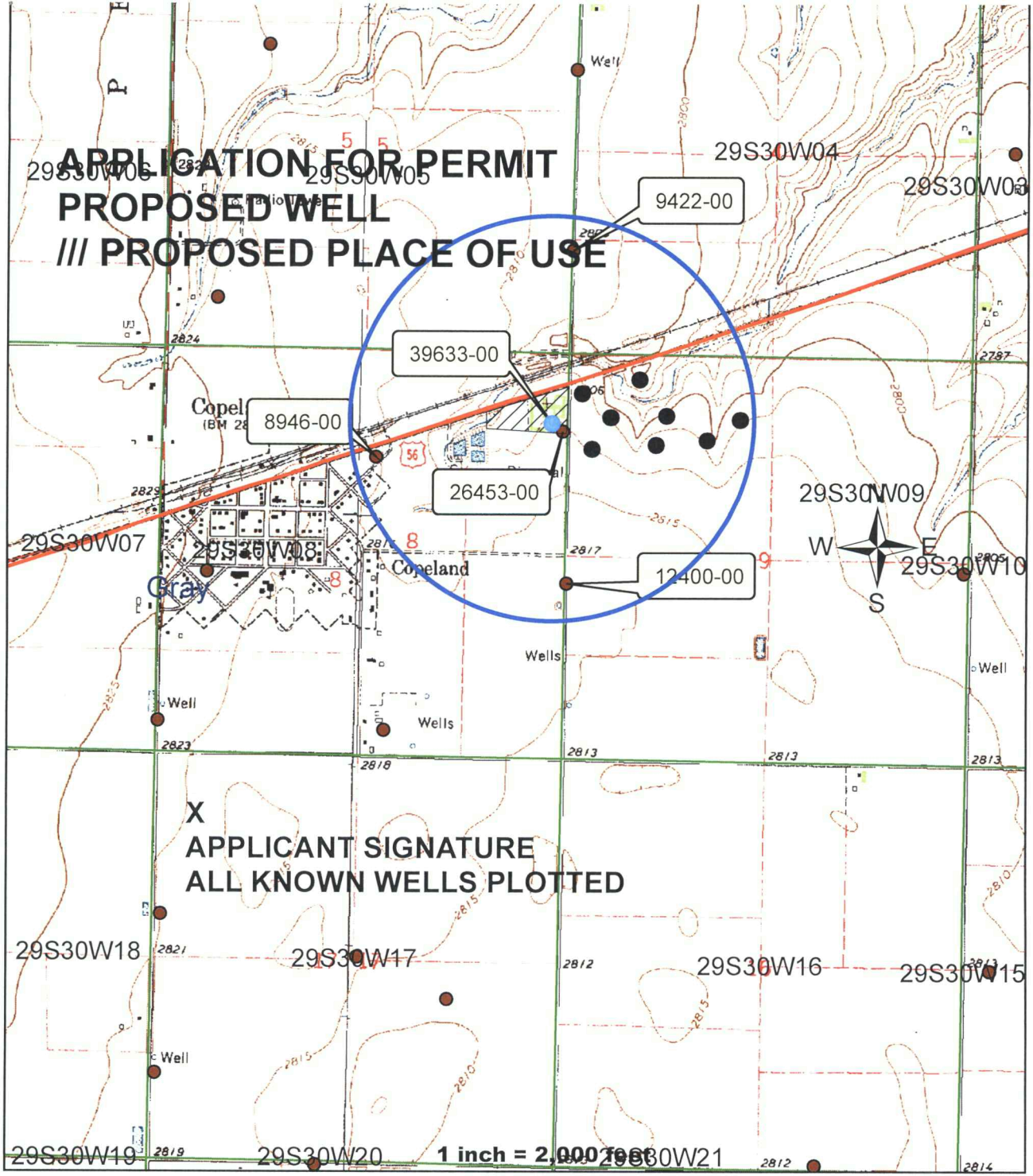
Buffalo grass w/ mechanical rotator SPRINKLERS
CEMETARY

f. Please describe how you will determine when to irrigate and how much water to apply (particularly important if you do not plan a full irrigation).

seasonal

You may attach any additional information you believe will assist in informing the Division of the need for your request.

**APPLICATION FOR PERMIT
PROPOSED WELL
/// PROPOSED PLACE OF USE**



**X
APPLICANT SIGNATURE
ALL KNOWN WELLS PLOTTED**

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Division of Water Resources

- 9. Will pesticide, fertilizer, or other foreign substance be injected into the water pumped from the diversion works?
 Yes No If "yes", a check valve shall be required.

All chemigation safety requirements must be met including a chemigation permit and reporting requirements.

- 10. If you are planning to impound water, please contact the Division of Water Resources for assistance, prior to submitting the application. Please attach a reservoir area capacity table and inform us of the total acres of surface drainage area above the reservoir.

Have you also made an application for a permit for construction of this dam and reservoir with the Division of Water Resources? Yes No

- If yes, show the Water Structures permit number here _____
- If no, explain here why a Water Structures permit is not required _____

- 11. The application must be supplemented by a U.S.G.S. topographic map, aerial photograph or a detailed plat showing the following information. On the topographic map, aerial photograph, or plat, identify the center of the section, the section lines or the section corners and show the appropriate section, township and range numbers. Also, please show the following information:

- (a) The location of the proposed point(s) of diversion (wells, stream-bank installations, dams, or other diversion works) should be plotted as described in Paragraph No. 5 of the application, showing the North-South distance and the East-West distance from a section line or southeast corner of section.
- (b) If the application is for groundwater, please show the location of any existing water wells of any kind within 1/2 mile of the proposed well or wells. Identify each existing well as to its use and furnish the name and mailing address of the property owner or owners. If there are no wells within 1/2 mile, please advise us.
- (c) If the application is for surface water, the names and addresses of the landowner(s) 1/2 mile downstream and 1/2 mile upstream from your property lines must be shown.
- (d) The location of the proposed place of use should be shown by crosshatching on the topographic map, aerial photograph or plat.
- (e) Show the location of the pipelines, canals, reservoirs or other facilities for conveying water from the point of diversion to the place of use.

A 7.5 minute U.S.G.S. topographic map may be obtained by providing the section, township and range numbers to: Kansas Geological Survey, 1930 Constant, Campus West, University of Kansas, Lawrence, Kansas 66047.

- 12. List any application, appropriation of water, water right, or vested right file number that covers the same diversion points or any of the same place of use described in this application. Also list any other recent modifications made to existing permits or water rights in conjunction with the filing of this application.

PD AND PU 39633 & 45130 _____

ADD QUANTITY ONLY, NO DIVERSION RATE _____

REQUEST WAIVER OF KAR 5-23-3 _____

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13. Furnish the following well information if the proposed appropriation is for the use of groundwater. If the well has not been completed, give information obtained from test holes, if available.

Information below is from: Test holes Well as completed Drillers log attached

| Well location as shown in paragraph No. | (A) | (B) | (C) | (D) |
|---|-------------|-------|-------|-------|
| Date Drilled | <u>1977</u> | _____ | _____ | _____ |
| Total depth of well | <u>360</u> | _____ | _____ | _____ |
| Depth to water bearing formation | _____ | _____ | _____ | _____ |
| Depth to static water level | _____ | _____ | _____ | _____ |
| Depth to bottom of pump intake pipe | _____ | _____ | _____ | _____ |

14. The relationship of the applicant to the proposed place where the water will be used is that of SAME
(owner, tenant, agent or otherwise)

15. The owner(s) of the property where the water is used, if other than the applicant, is (please print):
SAME

(name, address and telephone number)

(name, address and telephone number)

16. The undersigned states that the information set forth above is true to the best of his/her knowledge and that this application is submitted in good faith.

Dated at GARDEN CITY, Kansas, this 18 day of NOVEMBER, 2022.
(month) (year)



(Applicant Signature)

By _____
(Agent or Officer Signature)

(Agent or Officer - Please Print)

Assisted by MM _____ GCFO _____ Date: _____
(office/title)

1320 Research Park Drive
Manhattan, KS 66502
785-564-6700
www. agriculture.ks.gov



900 SW Jackson, Room 456
Topeka, KS 66612
785-296-3556

Mike Beam, Secretary

Laura Kelly, Governor

December 5, 2022

COPELAND TOWNSHIP, ROBERT REED
PO BOX 97
COPELAND KS 67837

RE: Application, File No(s). **50918**

Dear Sir or Madam:

The Division of Water Resources (Division) has received your application(s) for a permit to appropriate water for beneficial use. Your application(s) has been assigned the file number(s) referenced above. Please be aware that the Division may have a large number of pending applications on hand at times and makes every attempt to process them in the order in which they are received. You will be contacted if additional information is required.

Please note, this letter only acknowledges receipt of your application(s) and does not guarantee approval. In accordance with the provisions of the Kansas Water Appropriation Act, the use of water as proposed prior to approval of the application(s) is unlawful.

Additional information about the process may be found on our website at agriculture.ks.gov/divisions-programs/dwr. If you have any other questions, please contact our office at 785-564-6640 or your local Garden City Field Office at 620-276-2901. *Garden City Field Office at 620-276-2901*. If you call, please reference the file number so we can help you more efficiently.

Sincerely,

A handwritten signature in black ink that reads "Kris Neuhauser". The signature is written in a cursive style.

Kris Neuhauser
New Applications Lead
Water Appropriation Program

DATA ENTRY SYSTEM ID NUMBER SHEET

FILE NUMBER 50918

| APPLICANT PERSON ID & SEQ # | PDIV ID | BATTERY ID |
|--------------------------------|--------------|------------|
| <u>32724</u> | <u>33650</u> | |
| | | |
| | | |
| | | |
| | | |

| LANDOWNER PERSON ID & SEQ # | PUSE ID |
|--------------------------------|--------------|
| <u>32724</u> | <u>21084</u> |
| | |
| | |
| | |
| | |

WATER USE CORRESPONDENT
PERSON ID & SEQ #

32724
