

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.

SEP 05 2017

1:30

KS DEPT OF AGRICULTURE

THE STATE OF KANSAS



KANSAS DEPARTMENT OF AGRICULTURE
Jackie McClaskey, Secretary of Agriculture

DIVISION OF WATER RESOURCES
David W. Barfield, Chief Engineer

File Number 49900

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): Thomas C Snell
Address: 509 W 6th St
City: Ellinwood State KS Zip Code 67526
Telephone Number: (620) 564-3312

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

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.

54.6 AF Additional Quantity

3. The maximum quantity of water desired is 224 acre-feet OR _____ gallons per calendar year,
to be diverted at a maximum rate of 800 (limited) gallons per minute OR _____ cubic feet per second.

*EX 1/5FFD
8/31/17
JCB
8-31-17

240 Zero (0) Additional Rate

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.

For Office Use Only:
F.O. 2 GMD Meets K.A.R. 5-3-1 (YES/NO) Use IRR Source G/S County RC By KAB Date 9-5-17
Code RES Fee \$ 300 TR # _____ Receipt Date 9/5/17 Check # 8050

9/8/2017 ULM

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.

Note: Geographic Center of a battery of four (4) wells in the NW NW NW Sec. 9 T20S R10W-4831 ft N, 5078 ft W (DWR ID 9)

- (A) One in the NW quarter of the NW quarter of the NW quarter of Section 9, more particularly described as being near a point 4843 feet North and 5147 feet West of the Southeast corner of said section, in Township 20 South, Range 10 West, Rice County, Kansas. (DWR ID #10) *Bat 1 of 4*
- (B) One in the NW quarter of the NW quarter of the NW quarter of Section 9, more particularly described as being near a point 5120 feet North and 5159 feet West of the Southeast corner of said section, in Township 20 South, Range 10 West, Rice County, Kansas. (DWR ID #11) *Bat 2 of 4*
- (C) One in the NW quarter of the NW quarter of the NW quarter of Section 9, more particularly described as being near a point 4839 feet North and 4851 feet West of the Southeast corner of said section, in Township 20 South, Range 10 West, Rice County, Kansas. (DWR ID#13) *Bat 3 of 4*
- (D) One in the SW quarter of the NW quarter of the NW quarter of Section 9, more particularly described as being near a point 4523 feet North and 5153 feet West of the Southeast corner of said section, in Township 20 South, Range 10 West, Rice County, Kansas. (DWR ID #14) *Bat 4 of 4*

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):

Jolene K Gatton-Snell Trust, 509 W 6th St, Ellinwood KS 67526
 (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 8-31, 2017. x Jolene K Gatton-Snell
 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 Battery of four (4) wells
 (number of wells, pumps or dams, etc.)
 and was completed on 8/27/07
 (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 WATER RESOURCES RECEIVED

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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 NA

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.

Overlaps point of diversion and place of use with Water Right, File No. 45835. A change in place of use
application will be submitted for Water Right, File No. 45835 to form a complete overlap with the new
application.

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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	_____	_____	_____	_____
Total depth of well	_____	_____	_____	_____
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

Husband
(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):

Jolene K Gatton-Snell Trust, 509 W 6th St, Ellinwood KS 67526
(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 Stafford, Kansas, this 31st day of Aug., 2017.
(month) (year)


(Applicant Signature)

By _____
(Agent or Officer Signature)

(Agent or Officer - Please Print)

Assisted by Tyler Saryerwinnie SFFO/ES Date: 8/2/2017
(office/title)

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SEP 05 2017
KS DEPT OF AGRICULTURE

IRRIGATION USE SUPPLEMENTAL SHEET

File No. 49900

Name of Applicant (Please Print): Thomas C Snell

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: Jolene K Gatton-Snell Trust

ADDRESS: 509 W 6th St, Ellinwood KS 67526

S	T	R	NE¼				NW¼				SW¼				SE¼				TOTAL
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
9	20S	10W					40	40	40	40									160

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	

**WATER RESOURCES
RECEIVED**

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: sub surface drip

d. System design features:

i. Describe how you will control tailwater: by not having any / using appropriate rates application

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:

corn, wheat soybeans

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).

crop consultant
soil probes

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

EX 7/SFFD
8/31/17

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Rice</u>	<u>NW ¼ NW ¼ nw ¼</u>	<u>9</u>	<u>T 20 S</u>	<u>R 10 E</u>

Distance and direction from nearest town or city street address of well if located within city?
1 West, 3½ North of Raymond

2 WATER WELL OWNER: Tom Snell
 RR#, St. Address, Box # : 509 W. 6th
 City, State, ZIP Code : Ellinwood, Ks. 67526
 Board of Agriculture, Division of Water Resources
 Application Number: 43,812 45835

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <u>124</u> ft. ELEVATION:
--	---

Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.

WELL'S STATIC WATER LEVEL 12 ft. below land surface measured on mo/day/yr 1-22-04

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield 150 gpm: Well water was 44 ft. after 4 hours pumping 150 gpm

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes HTH No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped
2 <u>PVC</u>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
		7 Fiberglass		Threaded

Blank casing diameter 12 in. to 44 ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface 24 in., weight SDR 26 lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	7 <u>PVC</u>	10 Asbestos-Cement
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RMP (SR)	11 Other (Specify)
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 <u>Continuous slot</u>	3 Mill slot	5 Guazed wrapped	8 Saw cut	11 None (open hole)
2 <u>Louvered shutter</u>	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From 124 ft. to 44 ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 124 ft. to 20 ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other hole plug

Grout Intervals: From 20 ft. to 0 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	<u>None</u>

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top soil			
2	11	Hard clay			
11	19	Sandy clay/ fine sand			
19	34	Sandy clay with clay balls			
34	48	Sandy clay/ fine sand			WATER RESOURCES RECEIVED
48	71	Fine sand/ sandy clay			SEP 05 2017
71	84	Clay			
84	86	Sandy clay/ fine sand			
86	90 88	Sandy clay/ fine sand/ clay			KS DEPT OF AGRICULTURE
90	105	Brown clay/ xxx sandrock streaks			
105	123	Sandrock			
123	124	Blue shale			COPY

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8-31-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 134 This Water Well Record was completed on (mo/day/yr) 9-3-04 under the business name of Rosencrantz & Benis by (signature) Sara Alife

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

44100
45,835

1 LOCATION OF WATER WELL:
 County: Rice Fraction NW 1/4 NW 1/4 NW 1/4 Section Number 9 Township Number T 20 S Range Number R 10 E/W

Distance and direction from nearest town or city street address of well if located within city?
1 West, ~~8K~~ 3 1/2 North of Raymond

2 WATER WELL OWNER: Jolene Snell
 RR#, St. Address, Box # : 509 W. 6th St
 City, State, ZIP Code : Ellinwood, Ks. 67526

Global Positioning Systems (decimal degrees, min. of 4 digits)
 Latitude: _____
 Longitude: _____
 Elevation: _____
 Datum: _____
 Data Collection Method: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N	
X	
--NW-- --NE--	
W	E
--SW-- --SE--	
S	

4 DEPTH OF COMPLETED WELL 125 ft.

Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft.
 WELL'S STATIC WATER LEVEL.....17..... ft. below land surface measured on mo/day/yr 8-18-07
 Pump test data: Well water was.....55..... ft. after.....2..... hours pumping.....160..... gpm
 Est. Yield..160.. gpm: Well water was..... ft. after..... hours pumping..... gpm
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No X.....; If yes, mo/day/yr
 Sample was submitted..... Water well disinfected? Yes HTH..... No

5 TYPE OF CASING USED:

5 Wrought Iron	8 Concrete tile	CASING JOINTS: Glued... <u>X</u> Clamped.....
1 Steel	3 RMP (SR)	Welded.....
2 <u>PVC</u>	4 ABS	Threaded.....
6 Asbestos-Cement	9 Other (specify below)	
7 Fiberglass		

Blank casing diameter12..... in. to45..... ft.; Diameter..... in. to ft., Diameter in. to ft.
 Casing height above land surface.....18..... in., Weight Sch. 40..... lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	7 <u>PVC</u>	9 ABS	11 Other (Specify)
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	8 <u>Saw Cut</u>	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From.....125..... ft. to45..... ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.
GRAVEL PACK INTERVALS: From.....125..... ft. to20..... ft., From ft. to ft.
 From..... ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other hole plug

Grout Intervals: From ft. to ft., From ft. to ft., From 20..... ft. to 0..... ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide Storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer Storage	15 Oil well/gas well	..None.....

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Top soil	103	123	sandrock WATER RESOURCES RECEIVED
2	12	Hard clay	123	125	Blue xxx shale RECEIVED
12	19	Sandy clay/ fine sand			
19	35	Sandy clay with clay balls			
35	46	Sandy clay with fine sand			RECEIVED WATER RESOURCES RECEIVED
46	72	Fine sand & sandy clay			KS DEPT OF AGRICULTURE
72	84	Clay			SEP 05 2017
84	86	Sandy clay & fine sand			
86	91	Sandy clay/fine sand/ clay			
91	103	Brown clay with sandrock streaks			KS DEPT OF AGRICULTURE

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ...8-27-07... and this record is true to the best of my knowledge and belief.
 Kansas Water Well Contractor's License No. ...134..... This Water Well Record was completed on (mo/day/year)9-21-07.....
 under the business name of Rosencrantz- Bemis by (signature) Gary A. Bemis

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

*US-SFFO

49200

Well #3- East well

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	Rice	NW ¼ NW ¼ NW ¼	9	T 20 S	R 10 E/W

Distance and direction from nearest town or city street address of well if located within city?
1 West, 3½ North of Raymond

2 WATER WELL OWNER: Tom Snell
 RR#, St. Address, Box # : 509 W. 6th
 City, State, ZIP Code : ~~XXXXXX~~ Ellinwood, Ks. 67526
 Board of Agriculture, Division of Water Resources
 Application Number: ~~43,812~~ 45835

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL125..... ft. ELEVATION:

Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.
 WELL'S STATIC WATER LEVEL14..... ft. below land surface measured on mo/day/yr8-3-04
 Pump test data: Well water was ft. after hours pumping gpm
 Est. Yield ~~130~~ gpm: Well water was ft. after hours pumping gpm
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No X.....; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes HTH No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
		7 Fiberglass		Threaded

Blank casing diameter12..... in. to45..... ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface24..... in., weight SDR 26 lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	7 PVC	10 Asbestos-Cement
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RMP (SR)	11 Other (Specify)
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	ft.

SCREEN-PERFORATED INTERVALS: From125..... ft. to45..... ft., From ft. to ft.
 From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From125..... ft. to20..... ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

3 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other hole plug

Grout Intervals: From20..... ft. to0..... ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	None

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Sandy top soil			
2	4	Sandy gray clay			
4	14½	Fine sand/ clay streaks			
14½	27	Sandy tan & gray clay			
27	59	Fine sand			
59	64	Tan clay			WATER RESOURCES RECEIVED
64	67	Fine sand			SEP 05 2017
67	73	Tan & gray clay			
73	87	Sandy, rusty, tan clay/ caliche			
87	103	Sandy tan & white clay with streaks of XXXX sandstone			KS DEPT OF AGRICULTURE
103	115	Soft dark brown sandstone, streaks of ironated sandstone			
115	117	Gray shale			
117	122½	Sandstone, soft dark brown streaks of ironated sandstone			
122½	125	Dark blue gray shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year)8-31-04..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No134..... This Water Well Record was completed on (mo/day/yr)9-3-04..... under the business name of Rosencrantz- Bemis by (signature) Tom Snell

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.
 Division of Water Resources
 Kansas Department of Agriculture

49900

Well #4- North well

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL: County: <u>Rice</u>	Fraction <u>NW 1/4 NW 1/4 NW 1/4</u>	Section Number <u>9</u>	Township Number <u>T 20 S</u>	Range Number <u>R 10 XE/W</u>
--	---	----------------------------	----------------------------------	----------------------------------

Distance and direction from nearest town or city street address of well if located within city?
1 West, 3 1/2 North of Raymond

2 WATER WELL OWNER: Tom Snell
 RR#, St. Address, Box # : 509 W. 6th
 City, State, ZIP Code : Ellinwood, Ks. 67526
 Board of Agriculture, Division of Water Resources
 Application Number: 43,812 45835

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N	
X	
--NW--	--NE--
W	E
--SW--	--SE--
S	

4 DEPTH OF COMPLETED WELL 125 ft. ELEVATION:

Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.
 WELL'S STATIC WATER LEVEL 14 ft. below land surface measured on mo/day/yr 8-3-04
 Pump test data: Well water was 82 ft. after 3 hours pumping 140 gpm
 Est. Yield 140 gpm: Well water was 91 ft. after 4 hours pumping 165 gpm
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No XX; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes HTH No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped
2 <u>PVC</u>	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded
		7 Fiberglass		Threaded

Blank casing diameter 12 in. to 45 ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface 24 in., weight SDR 26 lbs./ft. Wall thickness or guage No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	7 <u>PVC</u>	10 Asbestos-Cement
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RMP (SR)	11 Other (Specify)
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 <u>Continuous slot</u>	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify)	ft.

SCREEN-PERFORATED INTERVALS: From 125 ft. to 45 ft., From ft. to ft.
 From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From 125 ft. to 20 ft., From ft. to ft.
 From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other hole plug

Grout intervals: From 20 ft. to 0 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	14 Abandoned water well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	15 Oil well/Gas well
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below)
			13 Insecticide storage	<u>None</u>

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	2	Sandy top soil			
2	4	Sandy gray clay			
4	14 1/2	Fine sandy clay streaks			
14 1/2	27	Sandy tan & gray clay			
27	59	Fine sand			
59	64	Tan clay			
64	67	Fine sand			
67	73	Tan & gray clay			
73	87	Sandy, rusty, tan clay/ caliche			
87	103	Sandy tan & white clay with streaks of sandstone			
103	115	Soft dark brown sandstone, streaks of ironated sandstone			
115	117	Gray shale			
117	122 1/2	Sandstone, soft dark brown streaks of ironated sandstone			
122 1/2	125	Dark blue gray shale			

WATER RESOURCES RECEIVED
SEP 05 2017
KS DEPT OF AGRICULTURE
COPY

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1320 Research Park Drive
Manhattan, Kansas 66502
Jackie McClaskey, Secretary

Phone: (785) 564-6700
Fax: (785) 564-6777
Email: ksag@kda.ks.gov
www.agriculture.ks.gov
Sam Brownback, Governor

September 6, 2017

THOMAS C SNELL
509 W 6TH ST
ELLINWOOD KS 67526

FILE COPY

RE: Application
File No. 49900

Dear Sir or Madam:

Your application for permit to appropriate water in 9-20S-10W in Rice County, was received and has been assigned the file number noted above.

As a matter of record, the Division of Water Resources has on hand a large number of applications awaiting processing. Therefore to be fair to all concerned, and so that we can process those applications on hand in the order they were received, we intend to concentrate on the backlog of applications until the issue is resolved. Once review of your application has begun, we will contact you, if additional information is required.

In accordance with the provisions of the Kansas Water Appropriation Act, a portion of which is included below, the use of water as proposed prior to approval of the application is unlawful. Once approved, compliance with the terms, conditions and limitations of the permit is necessary. Conservation of the water resources of Kansas is required.

Section 82a-728 of the Kansas Water Appropriation Act, provides (a) except for the appropriation of water for the purpose of domestic use, . . . it shall be unlawful for any person to appropriate or threaten to appropriate water from any source without first applying for and obtaining a permit to appropriate water in accordance with the provisions of the Water Appropriation Act or for any person to violate any condition of a vested right, appropriation right or an approved application for a permit to appropriate water for beneficial use.

(b) (1) The violation of any provision of this section by any person is a class C misdemeanor . . .

A class C misdemeanor is punishable by a fine not to exceed \$500 and/or a term of confinement not to exceed one month in the county jail. Each day that the violation occurs constitutes a separate offense.

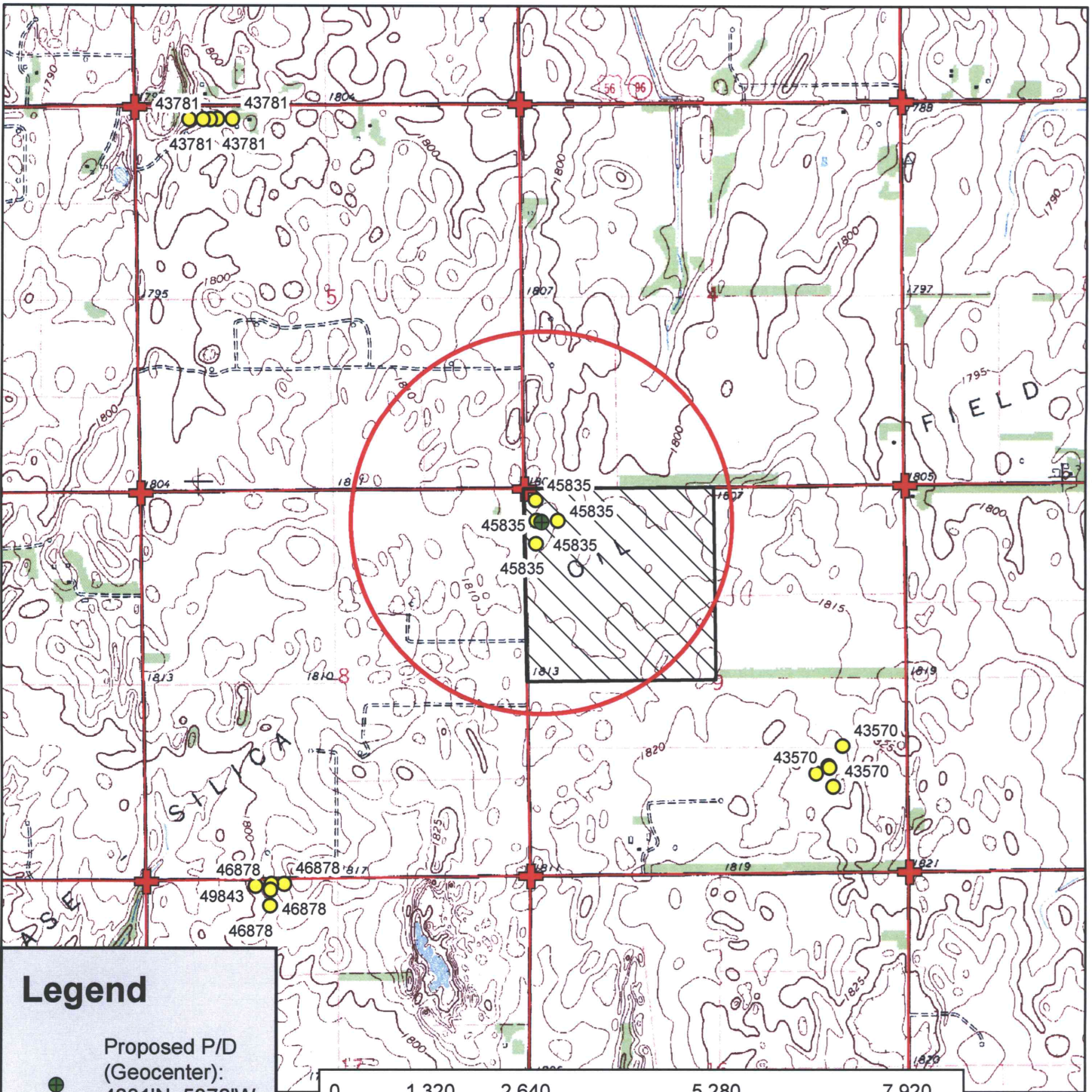
If you have any questions, please contact me at (785) 564-6645. If you wish to discuss a specific file, please have the file number ready so that we may help you more efficiently.

Sincerely,

Kristen A. Baum
New Applications Unit Supervisor
Water Appropriation Program

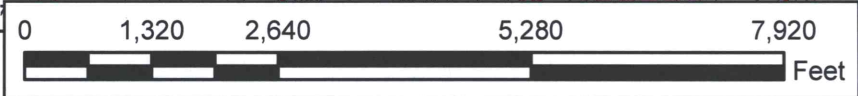
BAT: dlw
pc: STAFFORD Field Office
GMD

49900



Legend

- Proposed P/D (Geocenter): 4831'N, 5078'W
- Water Appropriations
- ⊕ Section Corner
- ▭ Section Line
- ★ Domestic Well
- 1/2 Mile Buffer



Water Appropriation, File No.

WATER RESOURCES RECEIVED

Application Map

9-20S-10W // Rice County

I declare that all water wells or diversion sites using the same source of supply and within 1/2 mile of the proposed point of diversion have been shown.

SEP 05 2017



KS DEPT OF AGRICULTURE

x *John K. Gattensbury* 8-31-17

Signature

8/2/2017 TJS-SFFO 1:24,000 scale