

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.

THE STATE OF KANSAS



WATER RESOURCES RECEIVED

MAR 25 2019

1148

KS DEPT OF AGRICULTURE

KANSAS DEPARTMENT OF AGRICULTURE
Jackie McClaskey, Secretary of Agriculture

DIVISION OF WATER RESOURCES
David W. Barfield, Chief Engineer

File Number 50227

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, KS 66502:

1. Name of Applicant (Please Print): Rocky Fox
Address: ~~20305 SW 60th St~~ 50421 SW 10th Ave
City: Pratt State KS Zip Code 67124
Telephone Number: (620) 672-1709

2. The source of water is: surface water in _____ (stream)
OR groundwater in Medicine Lodge River (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.

3. The maximum quantity of water desired is 15 acre-feet OR _____ gallons per calendar year, to be diverted at a maximum rate of 1000 gallons per minute OR _____ 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.

For Office Use Only:
F.O. 2 GMD 5 Meets K.A.R. 5-3-1 (YES / NO) Use IRR Source (G) S County PR By DAW Date 3/25/19
Code REG Fee \$ 200 TR # _____ Receipt Date 3/25/19 Check # 1258

4/11/2019 LCM

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 SW quarter of the SW quarter of the SW quarter of Section 31, more particularly described as being near a point 60 feet North and 5250 feet West of the Southeast corner of said section, in Township 28 South, Range 13 West (circle one), Pratt 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 as applicant

(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 March 10, 2019.

Bob A. Fry
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 well and pump
(number of wells, pumps or dams, etc.)

and (was)(will be) completed (by) existing well
(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 ASAP
(Mo/Day/Year)

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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 N.A.

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.

Temporary Permit 20180108 overlaps proposed PD

No perminant Water Right overlaps

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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>5/29/18</u>	_____	_____	_____
Total depth of well	<u>193</u>	_____	_____	_____
Depth to water bearing formation	<u>105</u>	_____	_____	_____
Depth to static water level	<u>104</u>	_____	_____	_____
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 owner
(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 as applicant
(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 Pratt, Kansas, this 16th day of March, 2019.
(month) (year)

Reddy A. Zap
(Applicant Signature)

By _____
(Agent or Officer Signature)

(Agent or Officer - Please Print)

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WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

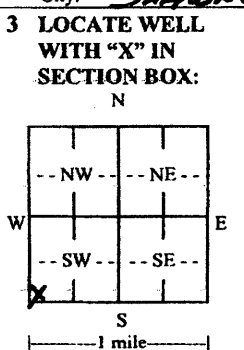
20180108

Well ID

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL: County: PRATT Fraction 1/4 SW 1/4 SW 1/4 SW 1/4 Section Number 31 Township Number T 28 S Range Number R 13 E W

2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: Van Eaton Ready Mix 6 miles South of Pratt to SW 60th Ave ST P.O. Box 105B 3 miles West to SR 30 1/2 mi Well 50 FT North City: Shawnee State: OK ZIP: 74802



3 LOCATE WELL WITH 'X' IN SECTION BOX: N W E S 1 mile

4 DEPTH OF COMPLETED WELL: 193 ft. Depth(s) Groundwater Encountered: 1) ft. 2) ft. 3) ft., or 4) Dry Well WELL'S STATIC WATER LEVEL: 104 ft. below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 5-29-18 Pump test data: Well water was ft. after hours pumping gpm Well water was ft. after hours pumping gpm Estimated Yield: gpm Bore Hole Diameter: 10 5/8 in. to 1 1/2 ft. and in. to ft.

5 Latitude: (decimal degrees) Longitude: (decimal degrees) Horizontal Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude: GPS (unit make/model): (WAAS enabled? Yes No) Land Survey Topographic Map Online Mapper: 6 Elevation: ft. Ground Level TOC Source: Land Survey GPS Topographic Map Other

7 WELL WATER TO BE USED AS: 1. Domestic: Household Lawn & Garden Livestock 2. Irrigation 3. Feedlot 4. Industrial 5. Public Water Supply: well ID 6. Dewatering: how many wells? 7. Aquifer Recharge: well ID 8. Monitoring: well ID 9. Environmental Remediation: well ID Air Sparge Soil Vapor Extraction Recovery Injection 10. Oil Field Water Supply: lease 11. Test Hole: well ID Cased Uncased Geotechnical 12. Geothermal: how many bores? a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):

Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 5 in. to 1 1/2 ft., Diameter in. to ft., Diameter 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: Steel Stainless Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 173 ft. to 193 ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 193 ft. to 20 ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From 20 ft. to 0 ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well Other (Specify) Direction from well? 999 Distance from well? 999 ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	8	Ben Top Soil			
8	30	Tan clay			
30	50	Fine Tan Sand			
50	65	Tan Clay			
65	193	Fine Tan Sand w/ gravel streaks			
Notes:					
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11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 5-29-18 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 672 This Water Well Record was completed on (mo-day-year) 6-21-18 under the business name of Crows Water Well Serv Signature

(Date)

Kansas Department of Agriculture
Division of Water Resources
David W. Barfield, Chief Engineer

~~400 SW 9th Street, 2nd Floor~~ 1320 Research Park Dr
~~Topeka, Kansas 66612-1283~~ Manhattan KS 66502

Re: Application
File No. 50227

Minimum Desirable Streamflow

Dear Sir:

I understand that a Minimum Desirable Streamflow requirement has been established by the legislature for the source of supply to which the above referenced application applies.

I understand that diversion of water pursuant to this application will be subject to regulation any time Minimum Desirable Streamflow requirements are not being met.

I also understand that if this application is approved, there could be times, as determined by the Division of Water Resources, when I would not be allowed to divert water. I realize that this could affect the economics of my decision to appropriate water.

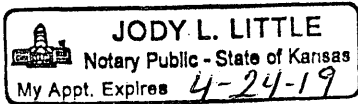
I am aware of the above factors, and with the knowledge thereof, request that the Division of Water Resources proceed with processing and approval, if possible, of the above referenced application.

Rocky A Fox
Signature of Applicant

State of Kansas)
County of Pratt) ss

ROCKY A FOX
(Print Applicant's Name)

I hereby certify that the foregoing instrument was signed in my presence and sworn to before me this 21st day of March, 2019.


JODY L. LITTLE
Notary Public - State of Kansas
My Appt. Expires 4-24-19

Jody L Little
Notary Public

My Commission Expires: April 24, 2019

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**MINIMUM DESIRABLE STREAMFLOW FORM TO BE USED WHEN
APPLICABLE WHEN FILING AN APPLICATION FOR PERMIT
TO APPROPRIATE WATER FOR BENEFICIAL USE**

The Kansas Legislature has established minimum desirable streamflows for the streams listed below. If your proposed diversion of water is going to be from one of these watercourses or adjacent alluvial aquifers, please complete the back side of this page and submit it along with your application for permit to appropriate water.

Arkansas River
Big Blue River
Chapman Creek
Chikaskia River
Cottonwood River
Delaware River
Little Arkansas River
Little Blue River
Marais des Cygnes River
Medicine Lodge River
Mill Creek (Wabaunsee Co. area)
Neosho River

Ninnescah River
North Fork Ninnescah River
Rattlesnake Creek
Republican River
Saline River
Smoky Hill River
Solomon River
South Fork Ninnescah
Spring River
Walnut River
Whitewater River

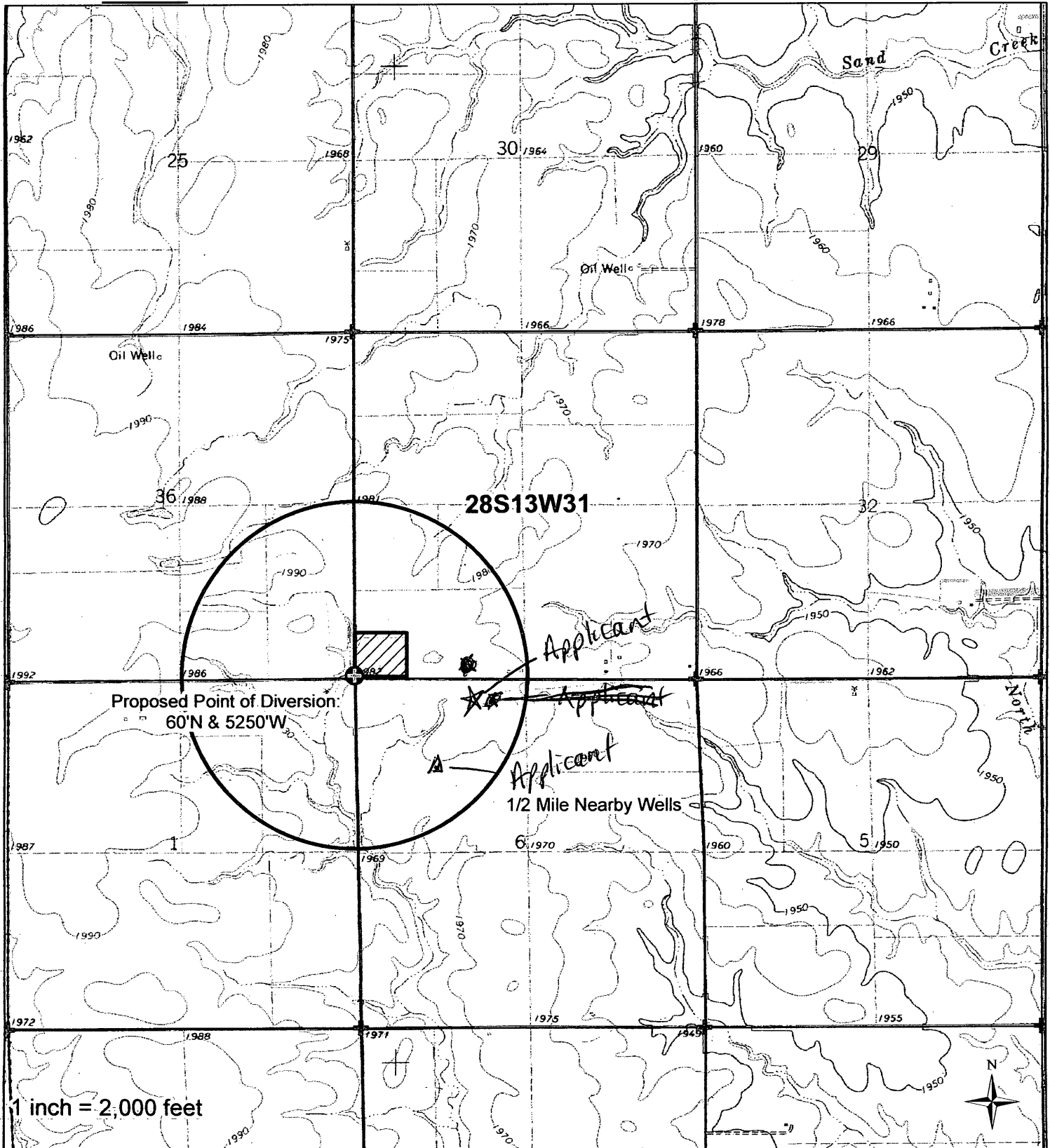
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File No.



28S13W31

Proposed Point of Diversion:
60°N & 5250'W

1/2 Mile Nearby Wells

1 inch = 2,000 feet

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 plotted on the application map.

-  Proposed PD
-  Proposed Place of Use
-  Domestic Wells
-  Water Rights
-  SFFOsec_corners

Ruby A Fox
Signature

MAR 25 2019
Date

0 800 1,600 3,200 4,800 6,400 Feet

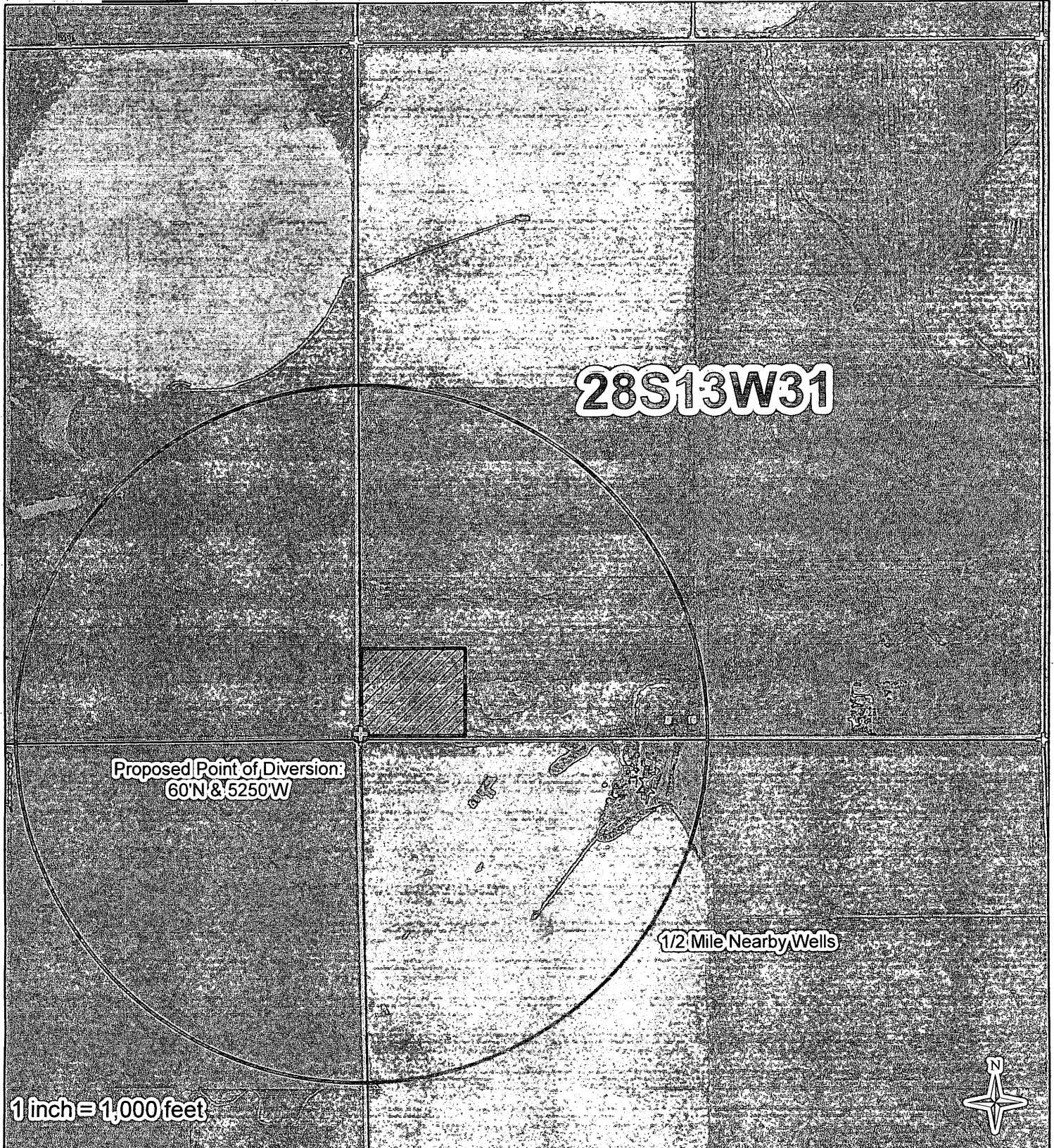
WATER RECORDS RECEIVED

Created By: Matt Meier
FO. 2
Date: 6/26/2018

AGRICULTURE

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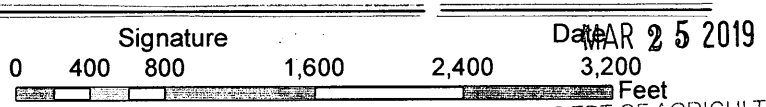
File No.



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 plotted on the application map.

- Proposed PD
- Proposed Place of Use
- Domestic Wells
- Water Rights
- SFFOsec_corners

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Created By: Matt Meier
F.O. 2
Date: 6/26/2018

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IRRIGATION USE SUPPLEMENTAL SHEET

File No. 50227

Name of Applicant (Please Print): Rocky Fox

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: Rocky Fox
 ADDRESS: 50421 SW 10th Ave
20305 SW 60th St. Pratt, KS 67124

S	T	R	NE¼				NW¼				SW¼				SE¼				TOTAL
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
31	28S	13W											12						12

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: *control application rates*

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:

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).

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

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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, Interim Secretary

Laura Kelly, Governor

April 4, 2019

ROCKY FOX
50421 SW 10TH AVE
PRATT, KS 67124

RE: Application, File No. **50227**

Dear Sir or Madam:

The Division of Water Resources (Division) has received your application for a permit to appropriate water for beneficial use. Your application has been assigned the file number 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 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 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 Stafford Field Office at 620-234-5311. If you call, please reference the file number so we can help you more efficiently.

Sincerely,

A handwritten signature in black ink that reads "Kristen A. Baum". The signature is written in a cursive, flowing style.

Kristen A. Baum
New Applications Unit Supervisor
Water Appropriation Program