

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.

9/9/2020

THE STATE OF KANSAS



Water Resources Received 4:30 KS Dept Of Agriculture

KANSAS DEPARTMENT OF AGRICULTURE Mike Beam, Secretary of Agriculture

DIVISION OF WATER RESOURCES David W. Barfield, Chief Engineer

50444

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.)

Water Resources Received Unacceptable for Priority AUG 26 2020 1:07 KS Dept Of Agriculture

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): John Bolton Address: 2615 East Harry St City: Andover State KS Zip Code 67005 2 Telephone Number: (619) 920-0549

2. The source of water is: [] surface water in (stream) OR [x] groundwater in WALNUT RIVER (drainage basin) 9/9/2020 KJN

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 14.4 acre-feet OR gallons per calendar year, to be diverted at a maximum rate of 400 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) [x] 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 BU By KJN Date 9/9/2020 Code RE07 Fee \$ 200 TR # Receipt Date 8/24/2020 Check # 7124

KS Dept Of Agriculture

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 NE quarter of the NW quarter of the NE quarter of Section 33, more particularly described as being near a point 4718 feet North and 1429 feet West of the Southeast corner of said section, in Township 27 South, Range 3 East, Butler 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):

(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 _____, 20____.

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, 1 pump,
(number of wells, pumps or dams, etc.)

and will be completed (by) ASAP
(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 _____
(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 _____

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.

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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>?</u> ---	_____	_____	_____
Total depth of well	<u>34'</u> ---	_____	_____	_____
Depth to water bearing formation	_____	_____	_____	_____
Depth to static water level	<u>6'</u> ---	_____	_____	_____
Depth to bottom of pump intake pipe	<u>30'</u> ---	_____	_____	_____

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):

John Bolton 2615 East Harry St. Andover KS 67002
(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 Andover, Kansas, this 18 day of August, 2020.
Bolton (month) (year)


(Applicant Signature)

By _____
(Agent or Officer Signature)

(Agent or Officer - Please Print)

Assisted by JNE SFFO/ESII Date: 08/13/2020
(office/title)

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9/9/2020

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(Date)

Kansas Department of Agriculture
Division of Water Resources
David W. Barfield, Chief Engineer
1320 Research Park Drive
Manhattan, Kansas 66502

Re: Application
File No. _____

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.

[Signature]
Signature of Applicant

State of Kansas)
County of Bethel) ss

John Bacter
(Print Applicant's Name)

I hereby certify that the foregoing instrument was signed in my presence and sworn to before me this _____ day of _____, 20____.

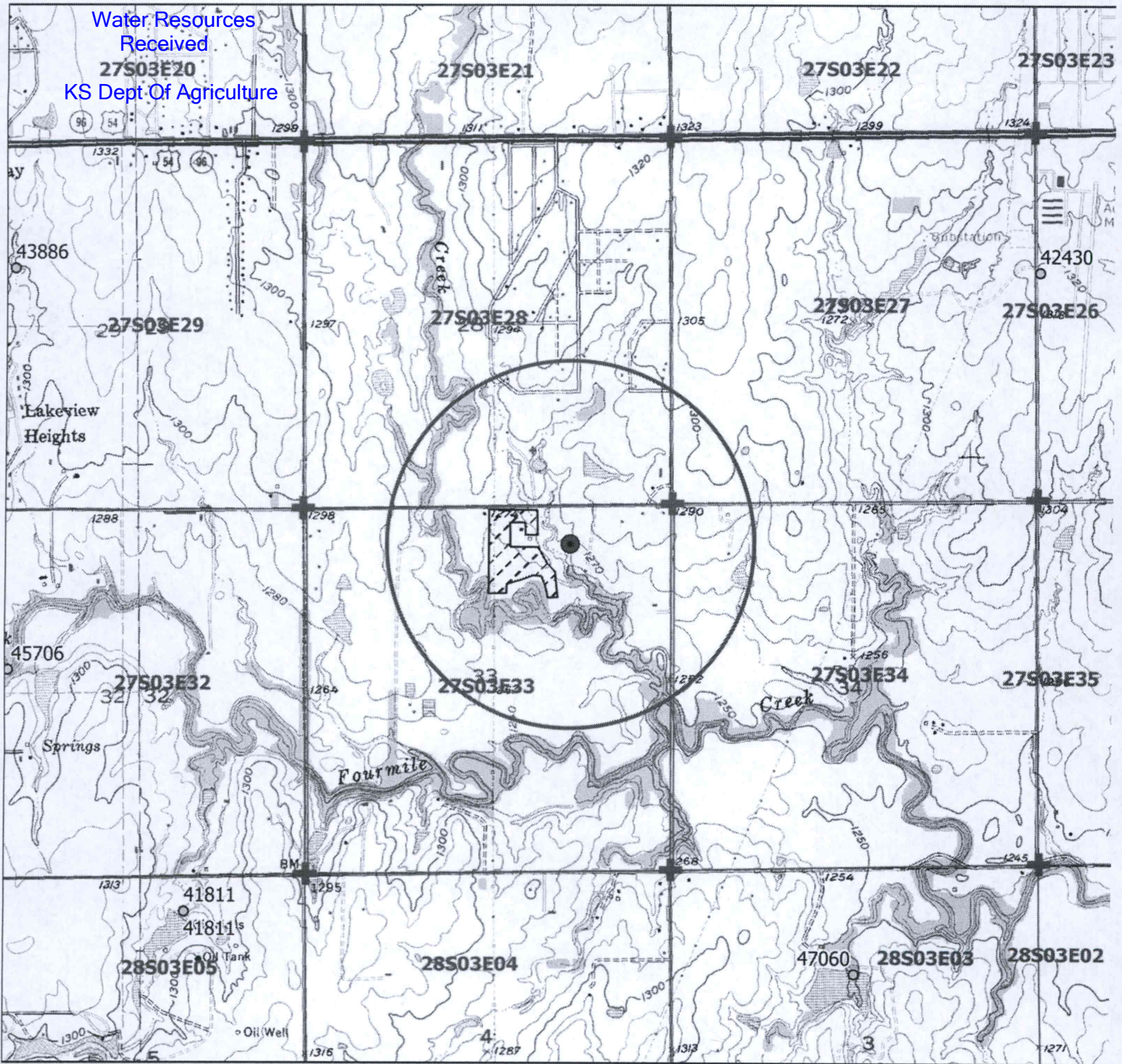
[Signature]
Notary Public

My Commission Expires:

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Mendy Jean Rushing
Notary Public State of Kansas
My Appt Expires 8/10/2024



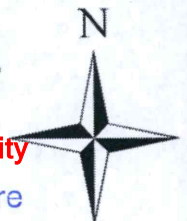
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27S03E20
KS Dept Of Agriculture

Application File No.
33-27-3E // Butler County

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UNACCEPTABLE FOR PRIORITY

KS Dept Of Agriculture



Legend

- ⊕ Section Corner
- Water Appropriation
- Point Of Diversion
- ▨ Place of Use
- Half Mile Circle
- ▭ Section Line

To the best of my knowledge, all points of diversion within one-half mile of the proposed point of diversion have been shown.

Jeh Best

August 18 2020

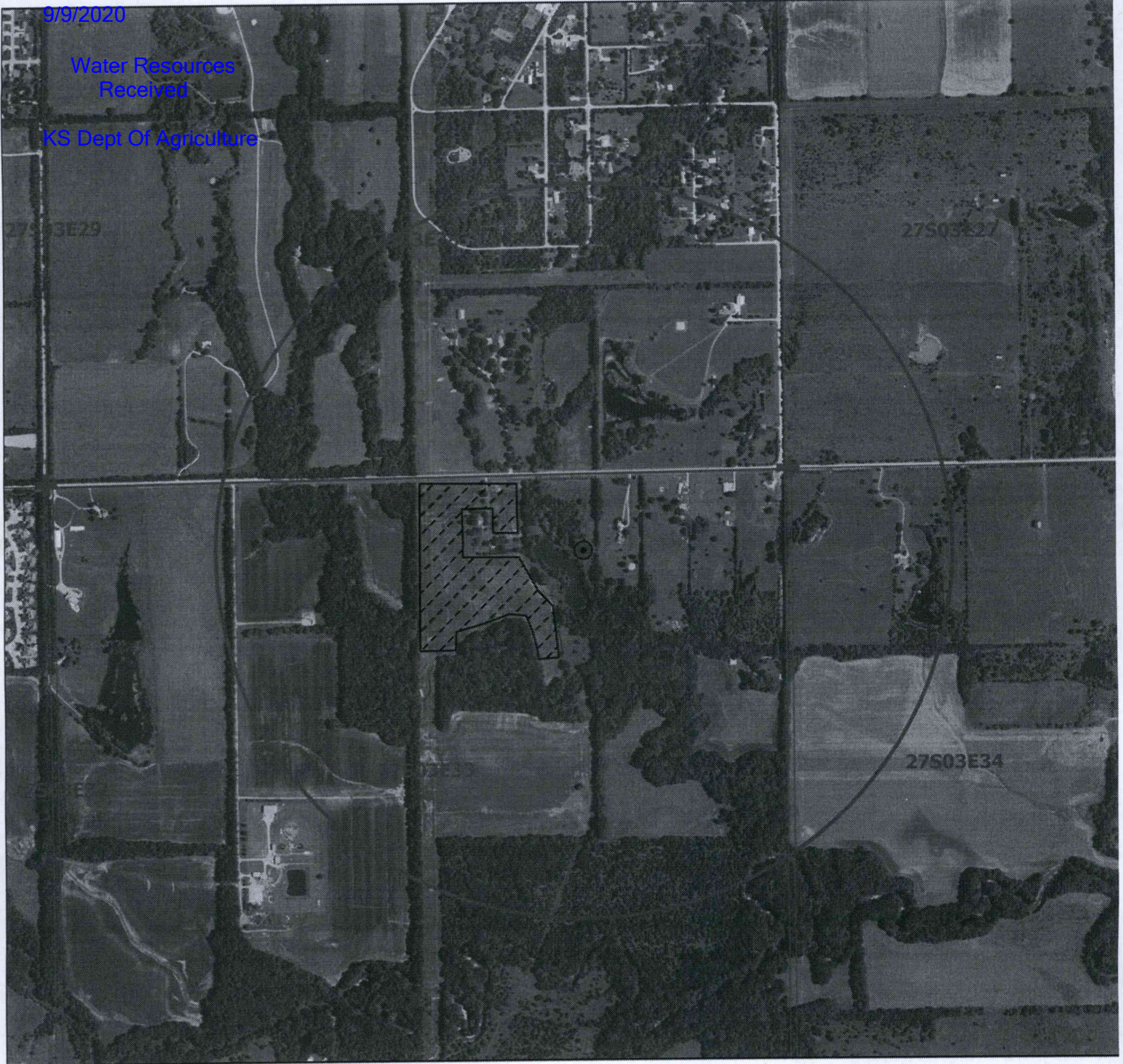
Signature / Date

08/13/2020 JNE/SFFO 1:24,000 scale







9/9/2020

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Legend

-  Section Corner
-  Water Appropriation
-  Point Of Diversion
-  Place of Use
-  Half Mile Circle
-  Section Line

Application File No.

33-27-3E // Butler County

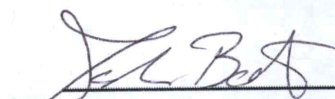
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Unacceptable for Priority

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To the best of my knowledge, all points of diversion within one-half mile of the proposed point of diversion have been shown.


Signature / Date

August 18 2020

08/13/2020 JNE/SFFO 1:12,000 scale

9/9/2020

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KS Dept Of Agriculture

**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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IRRIGATION USE SUPPLEMENTAL SHEET

File No. _____

Name of Applicant (Please Print): John Bolton

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: John Bolton

ADDRESS: 2615 East Harry St, Andover KS 67005

S	T	R	NE¼				NW¼				SW¼				SE¼				TOTAL
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
33	27	3					17.25											17.25	

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): 1 %

Estimate the maximum land slope in the field(s): 2 %

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: Drp system

d. System design features:

i. Describe how you will control tailwater:

ii. For sprinkler systems:

(1) Estimate the operating pressure at the distribution system: 12 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? 0 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:

Hemp

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).

Smart Timer only waters when needed

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

Water Resources
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FEE SCHEDULE

- 1. The fee for an application for a permit to appropriate water for beneficial use, except for domestic use, shall be (see paragraph No. 2 below if requesting storage):

ACRE-FEET	FEE
0-100	\$200.00
101-320	\$300.00
More than 320	\$300.00 plus \$20.00 for each additional 100 acre-feet or any part thereof.

- 2. The fee for an application in which storage is requested, except for domestic use, shall be:

ACRE-FEET	FEE
0-250	\$200.00
More than 250	\$200.00 plus \$20.00 for each additional 250 acre-feet of storage or any part thereof.

Note: If an application requests both direct use *and* storage, the fee charged shall be as determined under No. 1 or No. 2 above, whichever is greater, but not both fees.

- 3. The fee for an application for a permit to appropriate water for water power or dewatering purposes shall be \$100.00 plus \$200.00 for each 100 cubic feet per second, or part thereof, of the diversion rate requested.

Note: The applicant shall notify the Chief Engineer and pay the statutorily required field inspection fee of \$400.00 when construction of the works for diversion has been completed, except that for applications filed on or after July 1, 2009, for works constructed for sediment control use and for evaporation from a groundwater pit for industrial use shall be accompanied by a field inspection fee of \$200.00.

MAKE CHECKS PAYABLE TO THE KANSAS DEPARTMENT OF AGRICULTURE

ATTENTION

A Water Conservation Plan may be required per K.S.A. 82a-733. A statement that your application for permit to appropriate water may be subject to the minimum desirable streamflow requirements per K.S.A. 82a-703a, b, and c may also be required from you. After the Division of Water Resources has had the opportunity to review your application, you will be notified whether or not you will need to submit a Water Conservation Plan. You also may be required to install a water flow meter or water stage measuring device on your diversion works prior to diverting water. There may be other special conditions or Groundwater Management District regulations that you will need to comply with if this application is approved.

CONVERSION FACTORS

- 1 acre-foot equals 325,851 gallons
- 1 million gallons equal 3.07 acre-feet

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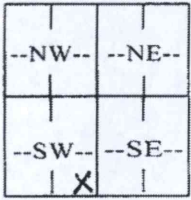
WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Butler	Fraction SE $\frac{1}{4}$ SE $\frac{1}{4}$ SW $\frac{1}{4}$	Section Number 33	Township Number T 27 $\text{\textcircled{S}}$	Range Number R 3 $\text{\textcircled{D/W}}$
Distance and direction from nearest town or city street address of well if located within city? 14848 SW 120th, Andover, KS 67002		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		

2 WATER WELL OWNER: Morgan Property
RR#, St. Address, Box # 14848 SW 120th
City, State, ZIP Code Andover, KS 67002

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N  S W E	4 DEPTH OF COMPLETED WELL 30 ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL 19.2 ft. below land surface measured on mo/day/yr _____ Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ 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) <u>10 Monitoring well</u> Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> If yes, mo/day/yr _____ Sample was submitted _____ Water well disinfected? Yes _____ No <u>X</u>
---	---

5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
2 PVC 4 ABS 7 Fiberglass Threaded Yes

Blank casing diameter 2" in. to 22" ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.
Casing height above land surface _____ in., Weight _____ lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 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 Saw Cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 32 ft. to 22 ft., From _____ ft. to _____ ft.
From _____ ft. to _____ ft., From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From 32 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 Cement
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 13 Insecticide Storage 16 Other (specify below) 999
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

Direction from well? 999 How many feet? 999

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0'	5'	Lt Brn: Silty Clay w/Rock (AB)			
5'	10'	Brn/Olive Clay Moist			Water Resources Received
10'	15'	Brn. Olive Clay Moist			
15'	20'	17' Drying Out/Olive dry clay (Shale)			
20'	25'	Moist again @ 24" /Olive Clay Moist (Shale)	B-3.		Unacceptable for Priority
25'	30'	Moist @ 24' Olive Clay (Shale)			
30'	32'	Olive Clay (Moist) (Shale) Refusal			KS Dept Of Agriculture

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) 9/9/2020 and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mo/day/year) 11/26/07
under the business name of Pratt Well Service, Inc. by (signature) Pratt Well Service

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 and Hydrology, 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.kdhe.state.ks.us/geo/waterwells>.

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

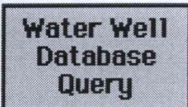
BILLED TO: WILSON CONTRACTORS

1. Location of well:		County BUTLER	Fraction 1/4 SW 1/4 NW 1/4	Section number 33	Township number T 27 S R 3E E/W	Range number 3E															
2. Distance and direction from nearest town or city: 1 mile south of hwy 54 and Street address of well location if in city: 1 1/8 miles east of the				3. Owner of well: City of Andover Wastewater Treatment Facility R.R. or street: Andover, Kansas City, state, zip code:																	
4. Locate with "X" in section below: N Andover Road, 1/2 South. Andover, Ks.				6. Bore hole dia. 11 in. Completion date 11-3-76 Well depth 70 ft.																	
				7. <input checked="" type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input type="checkbox"/> Reverse rotary																	
5. Type and color of material				8. Use: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other																	
<table border="1"> <thead> <tr> <th></th> <th>From</th> <th>To</th> </tr> </thead> <tbody> <tr> <td>Topsoil</td> <td>0</td> <td>3</td> </tr> <tr> <td>Clay</td> <td>3</td> <td>16</td> </tr> <tr> <td>Green Shale</td> <td>16</td> <td>31</td> </tr> <tr> <td>Blue Shale</td> <td>31</td> <td>70</td> </tr> </tbody> </table>					From	To	Topsoil	0	3	Clay	3	16	Green Shale	16	31	Blue Shale	31	70	9. Casing: Material PVC Height: Above or below surface 18 in. Threaded <input type="checkbox"/> Welded <input type="checkbox"/> Surface 18 in. RMP <input type="checkbox"/> PVC <input checked="" type="checkbox"/> Weight 3.96 lbs./ft. Dia. 6 in. to 70 ft. depth Wall thickness: inches or Dia. <input type="checkbox"/> in. to <input type="checkbox"/> ft. depth gage No. .316		
	From	To																			
Topsoil	0	3																			
Clay	3	16																			
Green Shale	16	31																			
Blue Shale	31	70																			
<p>Water Resources Received</p> <p>KS Dept Of Agriculture</p> <p>Unacceptable for Priority</p> <p>KS Dept Of Agriculture</p>				10. Screen: Manufacturer's name PVC NSF approved 200 PSI Type PVC 200PSI Dia. 6" Slot/groove .06 Length 35" Set between 35 ft. and 70 ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/4-1/8"																	
				11. Static water level: 30 ft. below land surface Date 11-3-76 mo./day/yr.																	
				12. Pumping level below land surfaces: ____ ft. after ____ hrs. pumping ____ g.p.m. ____ ft. after ____ hrs. pumping ____ g.p.m. Estimated maximum yield ____ g.p.m.																	
				13. Water sample submitted: ____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date ____																	
				14. Well head completion: <input checked="" type="checkbox"/> Pitless adapter 18 inches above grade																	
				15. Well grouted? <input checked="" type="checkbox"/> yes 1-2 fine sand mix With: <input type="checkbox"/> Neat cement <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Concrete Depth: From 40" ft. to 14 ft.																	
				16. Nearest source of possible contamination: open cesspool tank ft. 40 Direction SE Type pool tank Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																	
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name customer's pump Model number unknown HP 1/2 Volts 230 Length of drop pipe 45 ft. capacity 10 g.p.m. Type: <input checked="" type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other																	
(Use a second sheet if needed)																					
18. Elevation:		19. Remarks: Flat Ground Installed customer's submersible pump and 42 gallon pressure tank. From # 8 above - Water not used for drinking, water used to water mechanical seal and washing sidewalk.		20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Harp Well & Pump 236 Business name Wichita, Kansas License No. _____ Address _____ Signed M. Arnold Date 3-15-77 Authorized representative																	

T 27
 R 3E
 W
 Sec 33
 SW NW
 1/4 1/4 1/4

Forward the white, blue and pink copies to the Department of Health and Environment

Form WWC-5

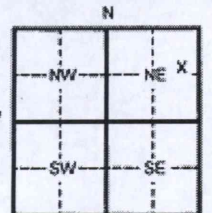


Scan of WWC5 Form

NEARBY WELL LOG EXAMPL
Water Resources
Received

KS Dept Of Agriculture

WATER WELL RECORD Form WWC-5 KSA 62a-1212 ID No.

1 LOCATION OF WATER WELL: County: BUTLER		Fraction SE 1/4 SW 1/4 NE 1/4	Section Number 33	Township Number T 27S S	Range Number R 3E EW
Distance and direction from nearest town or city street address of well if located within city? 205 S. ONEWOOD; ANDOVER					
2 WATER WELL OWNER: TRAVIS CARR RR#, St. Address, Box # : 205 S. ONEWOOD City, State, ZIP Code : ANDOVER, KS		Board of Agriculture, Division of Water Resources Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL 90 ft. ELEVATION: Depth(s) Groundwater Encountered 1 31 ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 31 ft. below land surface measured on mo/day/yr 5-16-04 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter 10 in. to 90 ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial <u>Lawn and garden (domestic)</u> 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes <input checked="" type="checkbox"/> No			
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 2 <u>PVC</u> 4 ABS Blank casing diameter 5 in. to 90 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Casing height above land surface 16 in. weight 160 lbs./ft. Wall thickness or gauge No. 26		5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____ 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____			
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) _____ SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 <u>Mill slot</u> 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 10 Other (specify) _____ 7 Torch cut 10 Other (specify) _____		SCREEN-PERFORATED INTERVALS: From 50 ft. to 90 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 24 ft. to 90 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other _____ Grout intervals From 4 ft. to 24 ft. From _____ ft. to _____ 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 <u>Sewer lines</u> 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well 3 <u>Water-tight sewer lines</u> 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) _____ 13 Insecticide storage _____ Direction from well? SOUTH How many feet? 17			
FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS					
0 2 TOPSOIL					
2 14 CLAY					
14 90 BLUE 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/yr) 5-16-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 611 This Water Well Record was completed on (mo/day/yr) 5-21-04 under the business name of CHASE DRILLING by (signature) <i>R. Chase</i>					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

Kansas Geological Survey
Comments to webadmin@kgs.ku.edu
URL=http://www.kgs.ku.edu/Magellan/WaterWell/index.html
Display Programs Updated July 2, 2014
Data added continuously.

Water Resources
Received
Unacceptable for Priority

KS Dept Of Agriculture

9/9/2020

Water Resources
Received

KS Dept Of Agriculture

THE STATE OF KANSAS



KANSAS DEPARTMENT OF AGRICULTURE
Mike Beam, Secretary of Agriculture

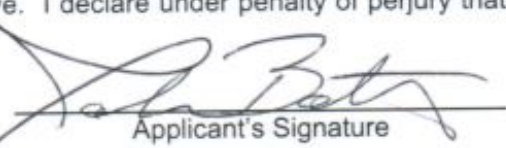
DIVISION OF WATER RESOURCES
Christopher W. Beightel, Acting Chief Engineer

SWORN STATEMENT
PURSUANT TO K.S.A. 82a-709

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 Sept 09, 2020.


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.

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

August 26, 2020

JOHN BOLTON
2615 EAST HARRY ST
ANDOVER, KS 67002

Re: Unacceptable Application

Dear Applicant:

Returned herewith is your Application for Permit to Appropriate Water for Beneficial Use received by the Division of Water Resources on **08/26/2020** with Check No. 7124 in the amount of 200.00. This application is not acceptable for filing in its present form.

Effective July 1, 2009, K.S.A. 82a-709 requires all applicants for new appropriation rights for the beneficial use of water in the State of Kansas to provide evidence of legal access to or control of the point of diversion from the landowner or the landowner's authorized representative. Applicants may provide a copy of a recorded deed, lease, easement or other document with the application. **In lieu of providing this documentary evidence, you may sign Paragraph No. 6 of the original permit application (where indicated), which constitutes a sworn statement.**

Upon return of the acceptable application with required original signatures and information, it will be assigned a priority based upon the date and time it is received in the office of the Chief Engineer. If you have any questions, please contact me at Kris.Neuhauser@ks.gov or our main line at 785-564-6640.

Sincerely,

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

Kris Neuhauser
Environmental Scientist
Water Appropriation Program