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.

KANSAS DEPARTMENT OF AGRICULTURE

Mike Beam, Secretary of Agriculture

DIVISION OF WATER RESOURCESEarl D. Lewis Jr., Chief Engineer

		50620	
	File Number .		
This	item to be comple	ted by the Division of Water Resources.	

WATER RESOURCES RECEIVED

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,

JUL 2 6 2021 1 Z: 55 KS DEPT OF AGRICULTURE

1320 Research Park Drive, Manhattan, Kansas 66502: Name of Applicant (Please Print): Ritchie Addison Address: P.O. Box 663 City: Wellington State KS Zip Code 67152 Telephone Number: (<u>620</u>) <u>338-0846</u> surface water in ______ The source of water is: groundwater in ____Chikaskia OR 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. The maximum quantity of water desired is ______ acre-feet OR ______ gallons per calendar year, to be diverted at a maximum rate of _500 _____ 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. The water is intended to be appropriated for (Check use intended): (a) Artificial Recharge (b) Irrigation XX (c) Recreational (d) Water Power (e) Industrial Municipal (g) Stockwatering (h) Sediment Control (i) Domestic (i) Dewatering (k) Hydraulic Dredging (I) Fire Protection (m) Thermal Exchange (n) Contamination Remediation YOU MUST COMPLETE AND ATTACH ADDITIONAL DIVISION OF WATER RESOURCES FORM(S) PROVIDING INFORMATION TO

For Office Use Only: F.O GMD Meets K.A.R. 5-3- Code Fee	(YES NO) Use IRR Source \$ 300 TR #	e G/S County SU Receipt Date 7-26-24	By BMM 7/26/21 Check # 2055
---	--	---	-----------------------------

SUBSTANTIATE YOUR REQUEST FOR THE AMOUNT OF WATER FOR THE INTENDED USE REFERENCED ABOVE.

		File No
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 <u>NE</u> quarter of the <u>NE</u> quarter of the <u>SE</u> quarter of Section <u>22</u> , more
		particularly described as being near a point <u>2600</u> feet North and <u>326</u> feet West of the
		Southeast corner of said section, in Township 33 South, Range 02 W East/West (circle one), Sumner County, Kansas.
	(B)	One in the NE quarter of the NE quarter of the SE quarter of Section 22 , more particularly described as being near a point 2338 feet North and 350 feet West of the Southeast corner of said section, in Township 33 South, Range 02 W East/West (circle one), Sumner County, Kansas.
	(C)	One in the <u>NW</u> quarter of the <u>NE</u> quarter of the <u>SE</u> quarter of Section <u>22</u> , more
		particularly described as being near a point <u>2600</u> feet North and <u>850</u> feet West of the
		Southeast corner of said section, in Township 33 South, Range 02 W East/West (circle one), Sumner County, Kansas.
	(D)	One in the <u>NW quarter of the NE</u> quarter of the <u>SE</u> quarter of Section <u>22</u> , more
		particularly described as being near a point <u>2350</u> feet North and <u>820</u> feet West of the
		Southeast corner of said section, in Township 33 South, Range 02 W East/West (circle one),
		Sumner County, Kansas.
	of w	e source of supply is groundwater, a separate application shall be filed for each proposed well or battery rells, except that a single application may include up to four wells within a circle with a quarter (¼) mile us in the same local source of supply which do not exceed a maximum diversion rate of 20 gallons per ute per well.
	than pum	attery of wells is defined as two or more wells connected to a common pump by a manifold; or not more four wells in the same local source of supply within a 300 foot radius circle which are being operated by ups not to exceed a total maximum diversion rate of 800 gallons per minute and which supply water to a
6		mon distribution system. WATER RESOURCES RECEIVED
6.		owner of the point of diversion, if other than the applicant is (please print):
		(name, address and telephone number)
	F	P.O. Box 663. Wellington, KS 67152
	.,	(fiame, address and telephone number)
	land	must provide evidence of legal access to, or control of, the point of diversion from the landowner or the owner's authorized representative. Provide a copy of a recorded deed, lease, easement or other ument 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 periury that the foregoing is true and correct. Executed on

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 4 wells (number of wells, pumps or dams, etc.)

	and (was)(will be) completed (by)	
		(Month/Day/Year - each was or will be completed)
8.	The first actual application of wate (Mo/Day/Year)	er for the proposed beneficial use was or is estimated to be pec 3/,202/

WATER RESOURCES RECEIVED

JUL 2 6 2021

KS DEPT OF AGRICULTURE

File No. _____

File No
Will pesticide, fertilizer, or other foreign substance be injected into the water pumped from the diversion works? Yes X No If "yes", a check valve shall be required. Yes
All chemigation safety requirements must be met including a chemigation permit and reporting requirements.
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. No
Have you also made an application for a permit for construction of this dam and reservoir with the Division of Water Resources? Yes No X
If yes, show the Water Structures permit number here
If no, explain here why a Water Structures permit is not required

The application <u>must</u> 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 ½ 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 ½ mile, please advise us.
(c) If the application is for surface water, the names and addresses of the landowner(s) $\frac{1}{2}$ mile downstream and $\frac{1}{2}$ 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.
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.
#50190
MAT
WATER RESOUR RECEIVED

JUL 2 6 2021

KS DEPT OF AGRICULTURE

File No.	
THE INO.	

KS DEPT OF AGRICULTURE

13.	Furnish the following well in well has not been completed	ormation if the proposed appropriation is for the use of groundwater. give information obtained from test holes, if available.							
	Information below is from:	Test holes	Well as con	npleted	Drillers log	Drillers log attached			
Well lo	ocation as shown in paragraph	(A)	(B)	(C)	(D)				
Date [Drilled	2-13-2019				_			
Total o	depth of well	<u>57'</u>			_	_			
Depth	to water bearing formation	25'			_	_			
Depth	to static water level	13'				_			
Depth	to bottom of pump intake pipe	<u>55'</u>				_			
14.	The relationship of the applic Tenant, trustee (owner, tenant, agent or otherwise		ed place wher	e the water	will be used is	s that of			
15.	The owner(s) of the property	where the water i	s used, if othe	er than the a	pplicant, is (p	lease print):			
	LeRoy Addison Revocabl	e Trust (name, addres	s and telepho	ne number)					
	P.O. Box 663. Wellington,	KS 67152 (name, addres	s and telepho	ne number)					
16.	The undersigned states that that this application is submit Dated at Wellington	LL L - : L -				her knowledge and (year)			
7	(Applicant Signature) e)							
<u>By</u>	(Agent or Officer Signal	ture)							
_	(Agent or Officer - Please	Print)							
Assiste	d by		(office/	(title)	Date:	WATER Pro-			
						RECEIVED			
						WATER RESOURCE, RECEIVED JUL 2 6 2021			

13.

File 1	No			

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	\$200.0)
More than 250	\$200.0	o 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

WATER RESOURCES
RECEIVED

JUL 2 6 2021

KS DEPT OF AGRICULTURE

IRRIGATION USE SUPPLEMENTAL SHEET

File No.

]	Name	e of A	pplic	ant (P	lease	Print):	Ai7	ch	0		H	Da	1;5	201	2		
1. I	Please design	supp	ly the	nam	e and		ress c	of eacl	h land	lowne	r, the	e lega	l desc	riptio	n of t	the la	nds to	be in	rigated, and	
Land	Landowner of Record NAME: Le Roy Halison Ronardo Trust ADDRESS: P.O. Box 663 Wellington, 85 6715.																			
				N	E¼				W1/4	$\sim c$			N 1/4	7 0 1 1			E1/4	7 1 0		
S	T	R	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW.		SE	NE	NW	SW	SE	TOTAL	
12	73	21/													28	17	17	28	90	
																,				
			_				\vdash	\vdash		-					-					
			-	_			-	-		_					╟─					
Land	lowne	er of I	Recor	·d		NAM	ИЕ:													
					ΑD	DRE	SS:													
				N	E1/4			N'	W1/4			SV	N 1/4			SI	E1/4			
S	T	R	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	TOTAL	
						\vdash									┢					
					_	_	-	-	_			-		-	-			\vdash		
														_					L	
T						NIAN	۸D.													
Land	lowne	r oi i	cecor	ď																
					AD	DRE	SS:_													
S	Т	R			E¼		,		W 1/4				N 1/4				E1/4	0.7	TOTAL	
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	-	
							_													

WATER RESOURCES RECEIVED

JUL 2 2021

2.	Ple sup	ase complete the following information for the description of the operation for the irrigation project. Attach oplemental sheets as needed.
	a.	Indicate the soils in the field(s) and their intake rates:
		Soil Percent Intake Irrigation Of field Rate 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: NO Tail water
		ii. For sprinkler systems:
		(1) Estimate the operating pressure at the distribution system: 35 psi
		(1) Estimate the operating pressure at the distribution system: 35 psi (2) What is the sprinkler package design rate? gpm to be determined (3) What is the wested dismeter (twice the distance the sprinkler throws water) of a sprinkler on the
		(3) What is the wetted diameter (twice the distance the sprinkler throws water) of a sprinkler on the
		outer 100 feet of the system? 75 feet
		outer 100 feet of the system? feet (4) Please include a copy of the sprinkler package design information. Crop(s) you intend to irrigate. Please note any planned crop rotations:
	e.	the state of the s
		Please describe how you will determine when to irrigate and how much water to apply (particularly
	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). Haronomist Soil Moisture Probes

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

WATER WELL RECORD Form WWC-5 Division of Water ✓ Original Record ☐ Correction ☐ Change in Well Use Resources App. No. Well ID 1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number County: Sumner NW 1/4 NE 1/4 NE 1/4 SE 1/4 22 T 33 S R 2 □ E 🗹 W WELL OWNER: Last Name: Street or Rural Address where well is located (if unknown, distance and First: Business: Madaline Addison Trust direction from nearest town or intersection): If at owner's address, check here: Address: P.O. Box 663 Approx. 1/2 mile South and 1/2 mile West of Perth, KS Address: City: State: KS ZIP: 66152 Wellington 3 LOCATE WELL 5 Latitude: 37.16399 (decimal degrees) 4 DEPTH OF COMPLETED WELL:57..... ft. WITH "X" IN Depth(s) Groundwater Encountered: 1) ft. Longitude: 97.51154 (decimal degrees) **SECTION BOX:** 2) ft. 3) ft., or 4) \(\subseteq \text{ Dry Well} \) Datum: ☐ WGS 84 NAD 83 NAD 27 N WELL'S STATIC WATER LEVEL: 13 ft. Source for Latitude/Longitude: below land surface, measured on (mo-day-yr). 2/11/2019 GPS (unit make/model:) above land surface, measured on (mo-day-yr)..... - NW - -- - NE - -(WAAS enabled? ☐ Yes ☐ No) Pump test data: Well water was ft. ☐ Land Survey ☐ Topographic Map after..... hours pumping gpm Online Mapper: Well water was ft. --SE-after..... hours pumping gpm 6 Elevation: 1203ft. ☑ Ground Level ☐ TOC Estimated Yield:gpm Source: ☐ Land Survey ☐ GPS ☐ Topographic Map

Other KOLAR Bore Hole Diameter:9 in. to60 ft. and -----1 mile-----..... in. to ft. 7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. ☐ Oil Field Water Supply: lease ☐ Household 6. Dewatering: how many wells? 11. Test Hole: well ID ☐ Lawn & Garden 7. Aquifer Recharge: well ID ☐ Cased ☐ Uncased ☐ Geotechnical ☐ Livestock 12. Geothermal: how many bores? 8. Monitoring: well ID 2.

Irrigation 9. Environmental Remediation: well ID 3. Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction b) Open Loop

Surface Discharge

Inj. of Water 13. Other (specify): Test Hole 4.

Industrial ☐ Recovery ☐ Injection Was a chemical/bacteriological sample submitted to KDHE? \(\sigma\) Yes \(\sigma\) No If yes, date sample was submitted: Water well disinfected? ✓ Yes ☐ No TYPE OF SCREEN OR PERFORATION MATERIAL: **☑** PVC □ Steel ☐ Stainless Steel ☐ Fiberglass Other (Specify)..... ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☑ Bentonite ☐ Other ...

Grout Intervals: From ... 0 ft. to ... 20 ft., From ... ft. to ... ft. From ... ft. to ... ft. Nearest source of possible contamination:

✓ No potential source of contamination within 200 ft. ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines Cess Pool ☐ Fuel Storage ☐ Abandoned Water Well ☐ Sewage Lagoon ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well Other (Specify) Direction from well? Distance from well? ft. 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS Top Soil 0 3 3 25 Clay 25 31 Sand 31 43 Clay 44 43 Sand-Fine 44 50 broken shale & sand 50 58 Sand-Coarse Notes: 58 60 Shale Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212

NULAN DUCUMENT ID. 1442 133

NAME - Address

Pomestic Wells within

1/2 Mile radius

1. Tim I SAACS
317 W. 80th ST. South
Wellington, KS 67152

2. PARREN Wiley 854 S. Clearwater Rd. Wellington, K5 67152

WATER RESOURCES
RECEIVED

JUL 26 2021

KS DEPT OF AGRICULTURE

KS DEPT OF AGRICULTURE

Kansas Department of Agriculture Division of Water Resources Earl D. Lewis, Jr., Chief Engineer 1320 Research Park Drive Manhattan, Kansas 66502

	Re:	Application File No
		Minimum Desirable Streamflow
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.		
	Signat	ure of Applicant
State of Kansas)	Fi	thie Addison
County of) ss	(Print A	Applicant's Name)
I hereby certify that the foregoing instrument was signed in my presence and sworn to before me this 200 day of		
NOTARY PUBLIC - State of Kansas ASHLEIGH HUCK My Appt Expires 5/11/20 22	Notary	Mlio Allek Public
My Commission Expires: May 11, 2022		

DWR 1-100.171 (Revised 06/16/2014)

United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership; rather it depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) imagery. The producer accepts the data 'as is' and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on this data outside FSA Programs. Wetland identifiers do not represent the size, shape, or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact boundaries and determinations or contact USDA Natural Resources Conservation Service (NRCS).