

# 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

KANSAS DEPARTMENT OF AGRICULTURE
Mike Beam, Secretary of Agriculture

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

File Number 50621
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
JUL 26 2021 12:56
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): Ritchie Addison
Address: P.O. Box 663
City: Wellington State KS Zip Code 67152
Telephone Number: (620) 338-0846

2. The source of water is: surface water in (stream)
OR groundwater in Chikaskia (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 81 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.

- 4. The water is intended to be appropriated for (Check use intended):
(a) Artificial Recharge (b) Irrigation XX (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 SU By BMM Date 7/26/21
Code REG Fee \$ 200 TR # Receipt Date 7-26-21 Check # 2057

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

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

(A) One in the SE quarter of the NW quarter of the NE quarter of Section 22, more particularly described as being near a point 4280 feet North and 1360 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 SE quarter of the NW quarter of the NE quarter of Section 22, more particularly described as being near a point 4280 feet North and 1580 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 NE quarter of the NW quarter of the NE quarter of Section 22, more particularly described as being near a point 4800 feet North and 1364 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 NE quarter of the NW quarter of the NE quarter of Section 22, more particularly described as being near a point 4800 feet North and 1580 feet West of the Southeast corner of said section, in Township 33 South, Range 02 W East/West (circle one), \_\_\_\_\_  
Sumner 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):

LeRoy Addison Revocable Trust  
(name, address and telephone number)

P.O. Box 663. Wellington, KS 67152  
(name, address and telephone number)

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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 July 22, 2021. \_\_\_\_\_  
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 4 wells  
(number of wells, pumps or dams, etc.)



and (was)(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 Dec. 31, 2021  
(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. Yes  
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. 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

- 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.

\_\_\_\_\_

#50189 \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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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>10-25-2019</u>	_____	_____	_____
Total depth of well	<u>69'</u>	_____	_____	_____
Depth to water bearing formation	<u>12'</u>	_____	_____	_____
Depth to static water level	<u>15'</u>	_____	_____	_____
Depth to bottom of pump intake pipe	<u>67'</u>	_____	_____	_____

14. The relationship of the applicant to the proposed place where the water will be used is that of Tenant, trustee.  
(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):

LeRoy Addison Revocable Trust  
(name, address and telephone number)

P.O. Box 663, Wellington, KS 67152 cell=620-338-0846  
(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 Wellington, Kansas, this 22 day of July, 2021.  
(month) (year)

  
(Applicant Signature)

By \_\_\_\_\_  
(Agent or Officer Signature)

\_\_\_\_\_  
(Agent or Officer - Please Print)

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Assisted by \_\_\_\_\_ Date: \_\_\_\_\_  
(office/title)

**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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## IRRIGATION USE SUPPLEMENTAL SHEET

File No. \_\_\_\_\_

Name of Applicant (Please Print): R. Richie Addison

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: LeRoy Addison Rowable Trust  
 ADDRESS: P.O. Box 663 Wellington, KS 67152

S	T	R	NE¼				NW¼				SW¼				SE¼				TOTAL
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
			22	33	20		3	3											62

**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
<u>FARUM</u>	<u>100</u>	<u>1" / HR</u>	<u>Good</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
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: \_\_\_\_\_

d. System design features:

i. Describe how you will control tailwater: NO Tailwater

ii. For sprinkler systems:

- (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 wetted diameter (twice the distance the sprinkler throws water) of a sprinkler on the outer 100 feet of the system? 75' 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                      COTTON  
SOYBEANS                      WHEAT

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).

AGRONOMIST  
SOIL MOISTURE PROBES

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

NAME - Address  
DOMESTIC Wells within  
 $\frac{1}{2}$  mile radius

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

2. Merle Phipps  
281 W. 80th ST. South  
Wellington, KS 67152

3. DARREN W. Wile  
854 S. Clearwater Rd.  
Wellington, KS 67152

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NE 22-33-02W

KOLAR DOCUMENT ID: 1470902

**WATER WELL RECORD Form WWC-5**

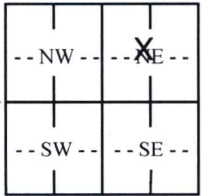
Original Record  Correction  Change in Well Use

Division of Water Resources App. No.

Well ID

<b>1 LOCATION OF WATER WELL:</b> County: Sumner	Fraction SE 1/4 SE 1/4 NW 1/4 NE 1/4	Section Number 22	Township Number T 33 S	Range Number R 2 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
--	---	----------------------	---------------------------	--

<b>2 WELL OWNER:</b> Last Name: Addison First: Rich Business: Address: PO Box 663 Address: City: Wellington State: KS ZIP: 67152	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: <input type="checkbox"/> 6 miles South & 6.75 miles West of Wellington, KS
--	--

<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N  W E S -----1 mile-----	<b>4 DEPTH OF COMPLETED WELL:</b> ..... 69 ..... ft. Depth(s) Groundwater Encountered: 1) ..... 15 ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ..... 15 ..... ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 10/23/2019 <input type="checkbox"/> above land surface, measured on (mo-day-yr) ..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Well water was ..... ft. after ..... hours pumping ..... gpm Estimated Yield: ..... 250 ..... gpm Bore Hole Diameter: ..... 10 ..... in. to ..... 69 ..... ft. and ..... in. to ..... ft.	<b>5 Latitude:</b> ..... 37.1684 ..... (decimal degrees) <b>Longitude:</b> ..... 97.51525 ..... (decimal degrees) Datum: <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <u>Source for Latitude/Longitude:</u> <input type="checkbox"/> GPS (unit make/model: .....) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....
		<b>6 Elevation:</b> ..... 1206 ..... ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC <u>Source:</u> <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input checked="" type="checkbox"/> Other KOLAR

**7 WELL WATER TO BE USED AS:**

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

**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 ..... 6 ..... in. to ..... 29 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.

Casing height above land surface ..... 12 ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. .... 255 .....

**TYPE OF SCREEN OR PERFORATION MATERIAL:**

Steel  Stainless Steel  PVC  Other (Specify) .....

Brass  Galvanized Steel  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 ..... 29 ..... ft. to ..... 69 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**GRAVEL PACK INTERVALS:** From ..... 22 ..... ft. to ..... 69 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.


**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....

Grout Intervals: From ..... 0 ..... ft. to ..... 22 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**Nearest source of possible contamination:**  No potential source of contamination within 200 ft.

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well
<input type="checkbox"/> Other (Specify) .....				

Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	2	Top soil			
2	12	Clay			
12	38	Sand-fine			
38	60	Sand/clay 70/30			
60	67	Sand w/ floating shale			
67	69	Shale-red			
<b>Notes:</b>  7-22-2021					

**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) 10/23/2019 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 897 ..... This Water Well Record was completed on (mo-day-year) 10/25/2019 ..... under the business name of Peterson McNett Drilling, Inc. ....



4-22-2021  
(Date)

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.

[Signature]  
Signature of Applicant

Ritchie Addison  
(Print Applicant's Name)

State of Kansas )  
County of Sumner ) ss

I hereby certify that the foregoing instrument was signed in my presence and sworn to before me this 22nd day of April, 2021.



[Signature]  
Notary Public

My Commission Expires: May 11, 2022

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- Non-Cropland
- Acres
- HEL



3 Domestic Wells - within  
 1/2 Mile  
 See Attached sheet  
 Paul [Signature]  
 X = 7-22-2021

JUL 26 2021

Leaflet | Powered by Esri

2017 Crop Year

Common Land Unit  
 Cropland Non-cropland CRP

- Wetland Determination Identifiers**
- Restricted Use
  - ▼ Limited Restrictions
  - Exempt from Conservation Compliance Provisions

Farm 7828  
 Tract 4545 - 1" = 1175'



Tract Page: 1 of 1

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).