# **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

#### **DIVISION OF WATER RESOURCES**

Jackie McClaskey, Secretary of Agriculture

David W. Barfield, Chief Engineer

File Number 49874
This item to be completed by the Division of Water Resources.

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## APPLICATION FOR PERMIT TO APPROPRIATE WATER FOR BENEFICIAL USE

Filing Fee Must Accompany the Application KS DEPT OF AGRICULTURE (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): GSRP LLC													
	Address: 1835 Wall St.													
	City: Salina, KS 67401		State KS /	Zip Code <u>67401</u>										
	Telephone Number: (	)												
2.	The source of water is:	□ surface water in	(strean	n)										
	OR	☑ groundwater in Smo												
	when water is released from	om storage for use by wate e date we receive your ap	ws established by law or may rassurance district members. plication, you will be sent the	If your application is subject										
3.	The maximum quantity of	water desired is 33 AF	acre-feet OR 10,753,083	gallons per calendar year,										
	to be diverted at a maximum rate of 99 gallons per minute OR cubic feet per second.													
	requested quantity of water maximum rate of diversion	er under that priority number on and maximum quantity o	, the requested maximum rate or can <u>NOT</u> be increased. Plea of water are appropriate and re ater Resources' requirements	ase be certain your requested easonable for your proposed										
4.	The water is intended to b	oe appropriated for (Check t	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	(I) ☐ Fire Protection										
	(m) ⊠ Thermal Exchange	e (n) 🗆 Contamination F	Remediation											
	YOU <u>MUST</u> COMPLETE AND A SUBSTANTIATE YOUR REQUI	ATTACH ADDITIONAL DIVISION EST FOR THE AMOUNT OF WA	OF WATER RESOURCES FORM( TER FOR THE INTENDED USE RE	S) PROVIDING INFORMATION TO EFERENCED ABOVE.										
 or Off .O	YOU <u>MUST</u> COMPLETE AND A SUBSTANTIATE YOUR REQUIRECT USE Only:  Market Strain Complete Compl	EST FOR THE AMOUNT OF WA	TER FOR THE INTENDED USE RE	EFERENCED ABOVE.										

5.	The location of the proposed wells, pump sites or other works for diversion of water is:												
	<b>Note:</b> 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>SE</u> quarter of the <u>NW</u> quarter of the <u>SW</u> quarter of Section <u>01</u> , more particularly described as												
	being near a point 1857 feet North and 4297 feet West of the Southeast corner of said section, in Township												
	15 South, Range 03 West, Saline 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.												
	wells, except that a single application may include up to four wells within a circle with a quarter (¼) 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												
	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 will be completed (by)(Month/Day/Year- each was or will be completed)												
8.	The first actual application of water for the proposed beneficial use was write estimated to be RECEIVED (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 <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) ½ mile downstream and ½ 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.								
	The proposed application is for thermal exchange with the water being injected back in the same								
	source as the proposed supply. Therefore the proposed beneficial use will not be consumptive in nature and								
	we are requesting the safe yield (KAR 5-3-10) be waived.								
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	Information below is from:		□ Well as	completed	☐ Drillers I	og attached
	Well location as shown in pa	aragraph No.	(A)	(B)	(C)	(D)
	Date Drilled	_	5/4/16			
	Total depth of well	_	53'			
	Depth to water bearing form	ation _	36'			
	Depth to static water level	_	20'			
	Depth to bottom of pump int	ake pipe _	48'			
4.	The relationship of the ap	oplicant to the	proposed plac	ce where th	e water will t	pe used is that o
	Owner (owner, tenant, agent or otherwis	<u>e)</u> .				
5.	The owner(s) of the property	where the wate	er is used, if oth	her than the a	applicant, is (pl	ease print):
		(name, addi	ress and teleph	none number	)	
		(name, addı	ress and teleph	none number	)	
6.	The undersigned states that this application is submitted	the information s	·		•	knowledge and tha
6.	The undersigned states that this application is submitted  Dated at Salina	the information s in good faith.	set forth above	is true to the	best of his/her	, 2017
6.	this application is submitted	the information s in good faith.	set forth above	is true to the	best of his/her	·
6.	this application is submitted	the information s in good faith.	set forth above	is true to the	best of his/her	, 2017
6.	this application is submitted  Dated at <u>Salina</u>	the information s in good faith. , Kansas	set forth above	is true to the	best of his/her	, 2017
6.	this application is submitted	the information s in good faith. , Kansas	set forth above	is true to the	best of his/her	, 2017
6. 	this application is submitted  Dated at <u>Salina</u>	the information s in good faith. , Kansas	set forth above	is true to the	best of his/her	, 2017
6. 	this application is submitted  Dated at <u>Salina</u>	the information sin good faith, Kansas	set forth above	is true to the	best of his/her	, 2017
6. <u>В</u> у	Dated at Salina  (Applicant Signature)  (Agent or Officer Signature)  Larry Kejr, Preside	the information sin good faith, Kansas re) ature)	set forth above	is true to the	best of his/her	, 2017
6. <u>В</u> у	Dated at Salina  (Applicant Signature)  (Agent or Officer Signature)	the information sin good faith, Kansas re) ature)	set forth above	is true to the	best of his/her	, 2017
<u>В</u> у	Dated at Salina  (Applicant Signature)  (Agent or Officer Signature)  Larry Kejr, Preside	the information sin good faith, Kansas ee)  ature)  ent e Print)	set forth above	is true to the	best of his/her	, <b>2017</b> (year)

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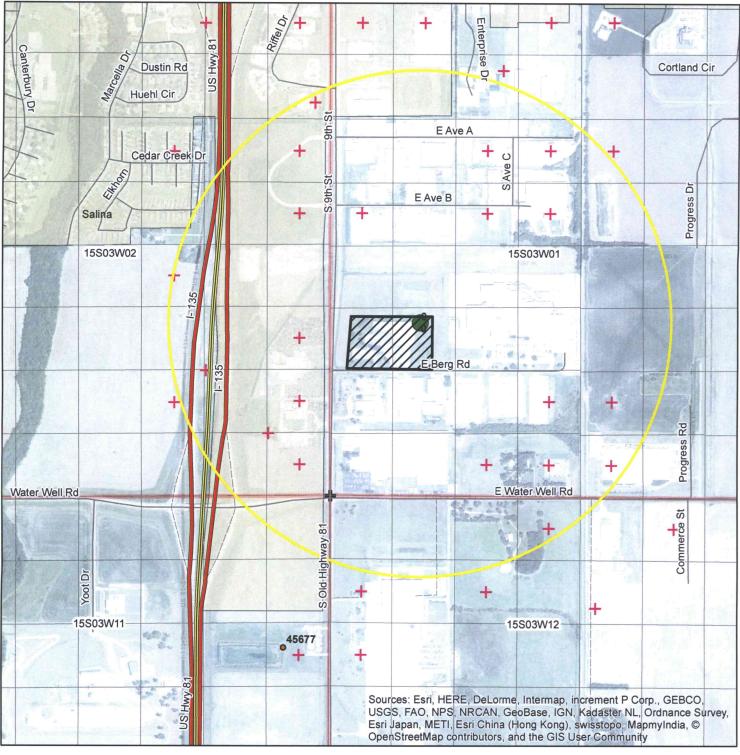
### INDUSTRIAL USE SUPPLEMENTAL SHEET

File No. 49874

File No. —("( O ) —																		
Name of Applicant (Please Print): GSRP LLC																		
. Please describe type of industry or product produced: the proposed use is for thermal exchange																		
*	Standard Industrial Classification Code Number:																	
2. Please	Please complete the following table to show your past and present water requirements:																	
PAST PRODUCT PRODUCTION AND WATER DIVERTED, IF APPLICABLE																		
LAST 5 YEARS AMOUNT OF PRODUCT				Т	WATER DIVERTED (GALLONS)							GALLONS PER PRODUCT PER DAY						
5 years ag	go																	
Last year		ļ																
Present year																		
3. Please complete the following table to show your future water requirements:																		
ESTIMATED FUTURE PRODUCT PRODUCTION AND WATER DIVERTED																		
NEXT 5 YEARS	AMOUNT OF PRODUCT																	
Year 1																	į	
Year 2																		
Year 3																		
Year 4																		
Year 5																		
Number of	days	of op	eratio	n of t	he inc	dustry	per v	ear is	s 365	days.								
Please attac	_	-					-			•	nast	presi	ent an	ıd esti	mated	l fiitii	re wa	er
equiremen										o w mg	pust	, pres	one an	u con	mucc	. rata		.01
1. Please	desig	nate	the le	gal de	script	tion o	f the	locati	on wh	ere th	ne wat	ter is 1	to be	used.	Shov	v in th	ne spa	ce provided
below fraction	tne S nal p	ectior ortion	there	Town of.	ship (	(1), ai	nd Ka	inge (	K), ar	id the	numt	oer of	acres	in ea	ch for	ty acı	re trac	t or
			NIE	21/4			NIV	X/1/4		<u> </u>	SV	V 1/4		1	SE	0/4		
ST	R NE NW SW SE NE NW							sw	SE	NE	NW	sw	SE	NE	NW	SW	SE	TOTAL
01 15S	03W										10							
31 135	JJ 11										10							
						L	L		l	L			<u> </u>					<u> </u>

You may attach any additional information you believe will assist in informing the Division of the Magazine Received request.

### New Application - Groundwater Assisted by Division of Water Resources Stockton Field Office



- Proposed Point of Diversion
- ▲ Surface Water Point of Diversion

**Groundwater Point of Diversion** 

1:12,000

1/2 mile radius

Signature Required

+ WWC-5 Recods

By signing this l'am stating that to the best of my knowledge ATER RE RECE that all wells within 1/2 mile of proposed pit location are identified on this map.

