

Kansas Department of Agriculture  
Division of Water Resources  
**CLOSURE OF NEW APPLICATION WORKSHEET**

|                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 |                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------|
| 1. File Number:<br><p style="text-align: center;"><b>49,994</b></p>                                                                                                                                                                                                    | 2. Status Change Date:<br><p style="text-align: center;"><i>7/2/2018</i></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 3. Field Office:<br><p style="text-align: center;"><b>1</b></p> | 4. GMD:<br><p style="text-align: center;"><b>0</b></p> |
| 5. Status: <input type="checkbox"/> Approved <input type="checkbox"/> Denied by DWR/GMD <input checked="" type="checkbox"/> <b>Dismiss by Request</b> /Failure to Return                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 |                                                        |
| 6. Enclosures: <input type="checkbox"/> Check Valve <input type="checkbox"/> N of C Form <input type="checkbox"/> Water Tube <input type="checkbox"/> Driller Copy <input type="checkbox"/> Meter                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 |                                                        |
| <p>7a. Applicant(s)<br/>New to system <input type="checkbox"/></p> <p style="text-align: right;">Person ID <b>65037</b><br/>Add Seq# _____</p> <p style="text-align: center;"><b>STIRTZ FARMS</b><br/><b>RYAN STIRTZ</b><br/>1400 2200 AVE<br/>ENTERPRISE KS 67441</p> | <p>7c. Landowner(s)<br/>New to system <input type="checkbox"/></p> <p style="text-align: right;">Person ID <b>65959</b><br/>Add Seq# _____</p> <p style="text-align: center;"><b>KENNETH MILLS</b><br/>1136 OLD HWY 40<br/>ABILENE KS 67410</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 |                                                        |
| <p>7b. Landowner(s)<br/>New to system <input type="checkbox"/></p> <p style="text-align: right;">Person ID _____<br/>Add Seq# _____</p> <p><b>7a.</b></p>                                                                                                              | <p>7d. Misc.<br/>New to system <input type="checkbox"/></p> <p style="text-align: right;">Person ID _____<br/>Add Seq# _____</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                 |                                                        |
| <p>8. WUR Correspondent<br/>New to system <input type="checkbox"/><br/>Overlap File (s) WUC</p> <p style="text-align: right;">Person ID _____<br/>Add Seq# _____<br/>Notarized WUC Form <input type="checkbox"/></p>                                                   | <p>9. Use of Water:    Changing?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p style="padding-left: 40px;"><input type="checkbox"/> Groundwater    <input type="checkbox"/> Surface Water</p> <p><input type="checkbox"/> IRR            <input type="checkbox"/> REC            <input type="checkbox"/> DEW            <input type="checkbox"/> MUN</p> <p><input type="checkbox"/> STK            <input type="checkbox"/> SED            <input type="checkbox"/> DOM            <input type="checkbox"/> CON</p> <p><input type="checkbox"/> HYD DRG    <input type="checkbox"/> WTR PWR    <input type="checkbox"/> ART RECHRG</p> <p><input type="checkbox"/> IND SIC: _____    <input type="checkbox"/> OTHER: _____</p> |                                                                 |                                                        |
| 10. Completion Date: _____                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | 11. Perfection Date: _____                                      |                                                        |
| 12. Exp Date: _____                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 |                                                        |
| 13. Conservation Plan Required? <input type="checkbox"/> Yes <input type="checkbox"/> No Date Required: _____ Date Approved: _____ Date to Comply: _____                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 |                                                        |
| 14. Water Level Measuring Device? <input type="checkbox"/> Yes <input type="checkbox"/> No Date to Comply: _____ Date WLMD Installed: _____                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 |                                                        |
| <p>Date Prepared: <b>5/7/2018</b>    By: <b>DWS</b></p> <p>Date Entered: <b>7/2/2018</b>    By: <b>UM</b></p>                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                 |                                                        |

|                                                                                                                                                                                            |                     |                                                                                            |                                                                                                                                             |              |                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------------------------------------------------------------------------------------------------|
| File No. <b>49,994</b>                                                                                                                                                                     | 15. Formation Code: | Drainage Basin:                                                                            | County:                                                                                                                                     | Special Use: | Stream:                                                                                                      |
| 16. Points of Diversion<br>T<br>MOD<br>DEL PDIV<br>ENT                                                                                                                                     |                     |                                                                                            | 17. Rate and Quantity<br>Authorized<br>Additional<br>Rate gpm/cfs    Quantity af/mgy    Rate gpm/cfs    Quantity af/mgy    Overlap PD Files |              |                                                                                                              |
| Qualifier                                                                                                                                                                                  | S                   | T                                                                                          | R                                                                                                                                           | ID           | 'N    'W                                                                                                     |
| <b>DEL 86607 SE SW NW</b>                                                                                                                                                                  | <b>14</b>           | <b>13S</b>                                                                                 | <b>2E</b>                                                                                                                                   | <b>1</b>     | <b>3280    4171</b>                                                                                          |
|                                                                                                                                                                                            |                     |                                                                                            |                                                                                                                                             |              | <b>NONE</b>                                                                                                  |
| 18. Storage: Rate _____ NF    Quantity _____ ac/ft    Additional Rate _____ NF    Additional Quantity _____ ac/ft                                                                          |                     |                                                                                            |                                                                                                                                             |              |                                                                                                              |
| 19. Limitation: _____ af/yr at _____ gpm ( _____ cfs) when combined with file number(s) _____<br>Limitation: _____ af/yr at _____ gpm ( _____ cfs) when combined with file number(s) _____ |                     |                                                                                            |                                                                                                                                             |              |                                                                                                              |
| 20. Meter Required? <input type="checkbox"/> Yes <input type="checkbox"/> No    To be installed by _____    Date Acceptable Meter Installed _____                                          |                     |                                                                                            |                                                                                                                                             |              |                                                                                                              |
| 21. Place of Use<br>T<br>MOD<br>DEL<br>ENT                                                                                                                                                 |                     | <b>NE¼</b> <b>NW¼</b> <b>SW¼</b> <b>SE¼</b> <b>Total</b> Owner    Chg? NO    Overlap Files |                                                                                                                                             |              |                                                                                                              |
| PUSE                                                                                                                                                                                       | S                   | T                                                                                          | R                                                                                                                                           | ID           | NE¼    NW¼    SW¼    SE¼    NE¼    NW¼    SW¼    SE¼    NE¼    NW¼    SW¼    SE¼    NE¼    NW¼    SW¼    SE¼ |
| <b>DEL 68755</b>                                                                                                                                                                           | <b>14</b>           | <b>13S</b>                                                                                 | <b>2E</b>                                                                                                                                   | <b>1</b>     | <b>7a    No    NONE</b>                                                                                      |
| <b>DEL 68756</b>                                                                                                                                                                           | <b>14</b>           | <b>13S</b>                                                                                 | <b>2E</b>                                                                                                                                   | <b>2</b>     | <b>7c    No    NONE</b>                                                                                      |
| Comments:                                                                                                                                                                                  |                     |                                                                                            |                                                                                                                                             |              |                                                                                                              |

**KANSAS DEPARTMENT OF AGRICULTURE**  
**Division of Water Resources**

**M E M O R A N D U M**

**TO:** Files

**DATE:** May 7, 2018

**FROM:** Doug Schemm

**RE:** Application, File No. 49,994

Stirtz Farms %Ryan Stirtz filed the above referenced new application proposing to appropriate 184.8 acre-feet of groundwater at a diversion rate of 1,200 gallons per minute for irrigation use. The proposed point of diversion was one well to be located in the Southeast Quarter of the Southwest Quarter of the Northwest Quarter (SE $\frac{1}{4}$  SW $\frac{1}{4}$  NW $\frac{1}{4}$ ) of Section 14, more particularly described as being near a point 3,280 feet North and 4,171 feet West of the Southeast corner of said section, in Township 13 South, Range 2 East, Dickinson County, Kansas.

The applicant was contacted by telephone on April 3, 2018 to request additional information, and the applicant stated he was not going to pursue this project. He requested that the application be dismissed, and a "Voluntary Dismissal of an Application for Permit to Appropriate Water" form was subsequently received in our office on April 12, 2018, signed by the applicant (Ryan Stirtz). A Findings and Order has been prepared to dismiss this file as requested.

Doug Schemm  
Environmental Scientist  
Topeka Field Office

# STATE OF KANSAS

DEPARTMENT OF AGRICULTURE  
1320 RESEARCH PARK DRIVE  
MANHATTAN, KS 66502  
PHONE: (785) 564-6700  
FAX: (785) 564-6777



900 SW JACKSON, ROOM 456  
TOPEKA, KS 66612  
PHONE: (785) 296-3556  
www.agriculture.ks.gov

GOVERNOR JEFF COLYER, M.D.  
JACKIE McCLASKEY, SECRETARY OF AGRICULTURE

July 3, 2018

**FILE COPY**

STIRTZ FARMS  
% RYAN STIRTZ  
1400 2200 AVE  
ENTERPRISE KS 67441

Re: Application, File No. 49,994

Dear Mr. Stirtz:

Enclosed is the Findings and Order by the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, dismissing Application, File No. 49,994, as you requested in the "Voluntary Dismissal of an Application for Permit to Appropriate Water" form received in our office on April 12, 2018.

If you are aggrieved by this Order, then pursuant to K.S.A. 82a-1901, you may:

- 1) request an evidentiary hearing before the Chief Engineer, or
- 2) request administrative review by the Secretary of Agriculture.

Failure to request an evidentiary hearing before the Chief Engineer does not preclude your right to administrative review by the Secretary. To obtain an evidentiary hearing before the Chief Engineer, a written request for hearing must be filed within 15 days after service of this Order as provided in K.S.A. 77-531 (**i.e., within a total of 18 days after this Order was mailed to you**), with: Kansas Department of Agriculture, Attn: Legal Section, 1320 Research Park Drive, Manhattan, Kansas 66502, FAX (785) 564-6777.

If you do not file a request for an evidentiary hearing before the Chief Engineer, you may petition for administrative review of the Order by the Secretary of Agriculture. A petition for review shall be in writing and state the basis for requesting administrative review. The request for hearing may be denied if the request fails to clearly establish factual or legal issues for review. See K.S.A. 77-527. The petition must be filed within 30 days after service of this Order as provided in K.S.A. 77-531 (**i.e., within a total of 33 days after this Order was mailed to you**), and be filed with: Secretary of Agriculture, Attn: Legal Division, Kansas Department of Agriculture, 1320 Research Park Drive, Manhattan, Kansas 66502, FAX (785) 564-6777. If neither a request for an evidentiary hearing nor a petition for administrative review is filed as set forth above, then this Order shall be effective and become a final agency action as defined in K.S.A. 77-607(b). Failure to timely request either an evidentiary hearing or administrative review may preclude further judicial review under the Kansas Judicial Review Act. If you have any questions, please contact our office. If you wish to discuss a specific file, please have the file number ready so that we may help you more efficiently.

Sincerely,

Kristen A. Baum  
New Application Unit Supervisor  
Water Appropriation Program

KAB:dws  
Enclosures  
pc: Topeka Field Office



KANSAS DEPARTMENT OF AGRICULTURE  
Jackie McClaskey, Secretary of Agriculture

DIVISION OF WATER RESOURCES  
David W. Barfield, Chief Engineer

**FINDINGS AND ORDER  
IN THE MATTER OF THE  
DISMISSAL OF APPLICATION  
FILE NO. 49,994**

After due consideration, the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture (hereinafter referred to as the "Chief Engineer"), makes the following findings and order:

**FINDINGS**

1. That on February 12, 2018, the Chief Engineer received an application from Stirtz Farms %Ryan Stirtz for permit to appropriate groundwater for beneficial use, assigned File No. 49,994, proposing the appropriation of 184.8 acre-feet of water, at a maximum requested diversion rate of 1,200 gallons per minute, for irrigation use. The proposed point of diversion was to be located in the Southeast Quarter of the Southwest Quarter of the Northwest Quarter (SE $\frac{1}{4}$  SW $\frac{1}{4}$  NW $\frac{1}{4}$ ) of Section 14, more particularly described as being near a point 3,280 feet North and 4,171 feet West of the Southeast corner of said section, in Township 13 South, Range 2 East, Dickinson County, Kansas.
2. That on April 3, 2018, the applicant was contacted by telephone to request additional information for the pending application. The applicant stated that he was no longer going to pursue this project and he requested the application be dismissed.
3. That a signed "Voluntary Dismissal of an Application for Permit to Appropriate Water" form for Application, File No. 49,994 was received in the office of the Chief Engineer on April 12, 2018.
4. That the application should be dismissed and its priority forfeited as requested by the applicant.

**ORDER**

NOW, THEREFORE, it is the decision and order of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, that effective the date of this order, in accordance with the law, Application, File No. 49,994, is herewith dismissed and the priority assigned to it is considered to be forfeited.

**RIGHT TO A HEARING AND TO ADMINISTRATIVE REVIEW**

If you are aggrieved by this Order, then pursuant to K.S.A. 82a-1901, you may:

- 1) request an evidentiary hearing before the Chief Engineer, or
- 2) request administrative review by the Secretary of Agriculture.

Failure to request an evidentiary hearing before the Chief Engineer does not preclude your right to administrative review by the Secretary.

To obtain an evidentiary hearing before the Chief Engineer, a written request for hearing must be filed within 15 days after service of this Order as provided in K.S.A. 77-531 (i.e., **within a total of 18 days after this Order was mailed to you**), with: Kansas Department of Agriculture, Attn: Legal Section, 1320 Research Park Drive, Manhattan, Kansas 66502, FAX (785) 564-6777.

If you do not file a request for an evidentiary hearing before the Chief Engineer, you may petition for administrative review of the Order by the Secretary of Agriculture. A petition for review shall be in writing and state the basis for requesting administrative review. The request for hearing may be denied if the request fails to clearly establish factual or legal issues for review. See K.S.A. 77-527. The petition must be filed within 30 days after service of this Order as provided in K.S.A. 77-531 (i.e., **within a total of 33 days after this Order was mailed to you**), and be filed with: Secretary of Agriculture, Attn: Legal Division, Kansas Department of Agriculture, 1320 Research Park Drive, Manhattan, Kansas 66502, FAX (785) 564-6777.

If neither a request for an evidentiary hearing nor a petition for administrative review is filed as set forth above, then this Order shall be effective and become a final agency action as defined in K.S.A. 77-607(b). Failure to timely request either an evidentiary hearing or administrative review may preclude further judicial review under the Kansas Judicial Review Act.

Ordered this 2nd day of July, 2018, in Topeka, Shawnee County, Kansas.

Lane P. Letourneau

Lane P. Letourneau, P.G.  
Program Manager  
Water Appropriation Program  
Division of Water Resources  
Kansas Department of Agriculture

State of Kansas            )  
                                          ) SS  
County of Riley            )

The foregoing instrument was acknowledged before me this 2nd day of July, 2018, by Lane P. Letourneau, P.G., Program Manager, Division of Water Resources, Kansas Department of Agriculture.



Danielle Wilson  
Notary Public

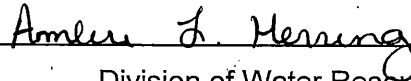
## CERTIFICATE OF SERVICE

On this 3<sup>rd</sup> day of July, 2018, I hereby certify that the foregoing Dismissal of Application, File No. 49,994, dated July 2<sup>nd</sup>, 2018 was mailed postage prepaid, first class, US mail to the following:

STIRTZ FARMS  
RYAN STIRTZ  
1400 2200 AVE  
ENTERPRISE KS 67441

With photocopies to:

Topeka Field Office



Division of Water Resources

**Voluntary Dismissal of an Application for Permit to Appropriate Water**

4-8-18

(Date)

Kansas Department of Agriculture  
Division of Water Resources  
1320 Research Park Drive  
Manhattan, Kansas 66502

Water Resources  
Received

**APR 12 2018**

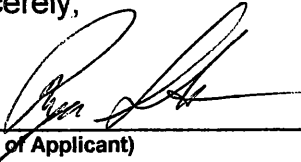
KS Dept Of Agriculture

RE: Application File No. 49,994

Chief Engineer:

I am submitting this statement in regard to Application for Permit to Appropriate Water, File No. 49,994. I am the applicant who filed this application. I now wish to voluntarily withdraw said application. I realize such withdrawal means the application will be dismissed and whatever priority it may have had will be forfeited. Please withdraw Application File No. 49,994. By signing below, I also acknowledge the waiver of any right to a hearing or appeal that I may have had in regards to this Application.

Sincerely,



(Signature of Applicant)

STIRTZ FARMS % RYAN STIRTZ

(Please print name here)

1400 2200 AVE

(Mailing Address)

ENTERPRISE KS 67441

(City, State, Zip)



(Signature of Applicant)

Ryan Stirtz

(Please print name here)

(Mailing Address)

(City, State, Zip)



THE STATE

OF



KANSAS

KANSAS DEPARTMENT OF AGRICULTURE  
Jackie McClaskey, Secretary of Agriculture

DIVISION OF WATER RESOURCES  
David W. Barfield, Chief Engineer

WATER RESOURCES  
RECEIVED  
FEB 12 2018  
2:22 PM  
KS DEPT OF AGRICULTURE

File Number 49994  
This item to be completed by the Division of Water Resources.

**APPLICATION FOR PERMIT TO  
APPROPRIATE WATER FOR BENEFICIAL USE**

Filing Fee Must Accompany the Application  
(Please refer to Fee Schedule attached to this application form.)

To the Chief Engineer of the Division of Water Resources, Kansas Department of Agriculture,  
1320 Research Park Drive, Manhattan, KS 66502:

1. Name of Applicant (Please Print): STIRTZ FARMS %RYAN STIRTZ  
Address: 1400 2200 AVE  
City: ENTERPRISE State: KS Zip Code 67441  
Telephone Number: (785) 479-1163 rstirtz@eaglecom.net

2. The source of water is:  surface water in \_\_\_\_\_ (stream)  
OR  groundwater in SMOKY HILL RIVER (drainage basin)

Certain streams in Kansas have minimum target flows established by law or may be subject to administration when water is released from storage for use by water assurance district members. If your application is subject to these regulations on the date we receive your application, you will be sent the appropriate form to complete and return to the Division of Water Resources.

3. The maximum quantity of water desired is 184.8 acre-feet OR \_\_\_\_\_ gallons per calendar year,  
to be diverted at a maximum rate of 1200 gallons per minute OR \_\_\_\_\_ cubic feet per second.

Once your application has been assigned a priority, the requested maximum rate of diversion and maximum requested quantity of water under that priority number can **NOT** be increased. Please be certain your requested maximum rate of diversion and maximum quantity of water are appropriate and reasonable for your proposed project and are in agreement with the Division of Water Resources' requirements.

4. The water is intended to be appropriated for (Check use intended):  
(a)  Artificial Recharge (b)  Irrigation (c)  Recreational (d)  Water Power  
(e)  Industrial (f)  Municipal (g)  Stockwatering (h)  Sediment Control  
(i)  Domestic (j)  Dewatering (k)  Hydraulic Dredging (l)  Fire Protection  
(m)  Thermal Exchange (n)  Contamination Remediation

YOU **MUST** COMPLETE AND ATTACH ADDITIONAL DIVISION OF WATER RESOURCES FORM(S) PROVIDING INFORMATION TO SUBSTANTIATE YOUR REQUEST FOR THE AMOUNT OF WATER FOR THE INTENDED USE REFERENCED ABOVE.

For Office Use Only:  
F.O. 1 GMD 0 Meets K.A.R. 5-3-1 (YES/NO) Use IRR Source G/S County PK By AW Date 2/12/18  
Code REG RR Fee \$ 300 TR # \_\_\_\_\_ Receipt Date 2/12/18 Check # 4970

SCANNED  
2/20/2018 LLM

**IRRIGATION USE  
SUPPLEMENTAL SHEET**

File No. 49994

Name of Applicant (Please Print): RYAN STIRTZ

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: STIRTZ FARMS

ADDRESS: 1400 2200 AVE, ENTERPRISE, KS 67441

| S  | T  | R  | NE¼ |    |    |    | NW¼ |    |    |    | SW¼ |    |    |    | SE¼ |    |    |    | TOTAL |
|----|----|----|-----|----|----|----|-----|----|----|----|-----|----|----|----|-----|----|----|----|-------|
|    |    |    | NE  | NW | SW | SE | NE  | NW | SW | SE | NE  | NW | SW | SE | NE  | NW | SW | SE |       |
| 14 | 13 | 2E |     |    |    |    | 22  | 40 |    |    | 12  |    |    |    |     |    |    | 74 |       |
|    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |       |
|    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |       |

**Landowner of Record** NAME: Kenneth R Mills

ADDRESS: 1136 Old 40 Abilene KS, 67410

| S  | T  | R  | NE¼ |    |    |    | NW¼ |    |    |    | SW¼ |    |    |    | SE¼ |    |    |    | TOTAL |
|----|----|----|-----|----|----|----|-----|----|----|----|-----|----|----|----|-----|----|----|----|-------|
|    |    |    | NE  | NW | SW | SE | NE  | NW | SW | SE | NE  | NW | SW | SE | NE  | NW | SW | SE |       |
| 14 | 13 | 2E |     |    |    |    | 35  |    | 40 | 5  |     |    |    |    |     |    |    | 80 |       |
|    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |       |
|    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |       |

**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 |       |
|   |   |   |     |    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |       |
|   |   |   |     |    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |       |
|   |   |   |     |    |    |    |     |    |    |    |     |    |    |    |     |    |    |    |       |

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 SW quarter of the NW quarter of Section 14, more particularly described as being near a point 3,280 feet North and 4,171 feet West of the Southeast corner of said section, in Township 13 South, Range 2 EAST, DICKINSON 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):

Ryan Stirtz, 1714 NW 4<sup>th</sup> st. Abilene KS. 67410 785 479 1163  
(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 February 6 \_\_\_\_\_, 2018. \_\_\_\_\_  
Applicant's Signature

7. The proposed project for diversion of water will consist of ONE WELL  
(number of wells, pumps or dams, etc.)  
and (was)(will be) completed (by) SUMMER 2018  
(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 Summer 2018  
(Mo/Day/Year)

WATER RESOURCES  
RECEIVED

FEB 12 2018

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 \_\_\_\_\_

GROUNDWATER WELL

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.

NONE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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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                            | _____ | _____ | _____ | _____ |
| Total depth of well                     | _____ | _____ | _____ | _____ |
| Depth to water bearing formation        | _____ | _____ | _____ | _____ |
| Depth to static water level             | _____ | _____ | _____ | _____ |
| Depth to bottom of pump intake pipe     | _____ | _____ | _____ | _____ |

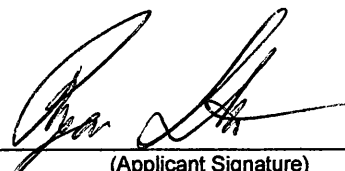
14. The relationship of the applicant to the proposed place where the water will be used is that of OWNER  
(owner, tenant, agent or otherwise)


15. The owner(s) of the property where the water is used, if other than the applicant, is (please print):

Kenneth Mills, 1136 Old 40, Abilene, KS 67410  
(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 Tuesday, Kansas, this 6 day of February, 2018.  
(month) (year)

  
\_\_\_\_\_  
(Applicant Signature)

  
\_\_\_\_\_  
APPLICANT(S) SOCIAL SECURITY IDENTIFICATION NUMBER(S)

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

\_\_\_\_\_  
and/or  
APPLICANT(S) TAXPAYER I.D. NO.(S)

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

Assisted by DWS TOPEKA FO Date: 1/31/2018  
(office/title)

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49994

**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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2-6-18

(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. 49994

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.

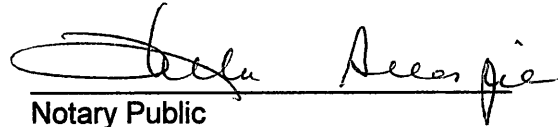


Signature of Applicant

State of Kansas )  
County of Dickinson ) ss

Ryan Stirtz  
(Print Applicant's Name)

I hereby certify that the foregoing instrument was signed in my presence and sworn to before me this 6<sup>th</sup> day of February, 2018.



Notary Public

My Commission Expires: 3-19-19



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2. Please complete the following information for the description of the operation for the irrigation project. Attach supplemental sheets as needed.

a. Indicate the soils in the field(s) and their intake rates:

| Soil Name | Percent of field (%) | Intake Rate (in/hr) | Irrigation Design Group |
|-----------|----------------------|---------------------|-------------------------|
| _____     | _____                | _____               | _____                   |
| _____     | _____                | _____               | _____                   |
| _____     | _____                | _____               | _____                   |
| _____     | _____                | _____               | _____                   |
| Total:    | 100 %                |                     |                         |

b. Estimate the average land slope in the field(s): \_\_\_\_\_%

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

c. Type of irrigation system you propose to use (check one):

- Center pivot     
  Center pivot - LEPA     
  "Big gun" sprinkler  
 Gravity system (furrows)     
  Gravity system (borders)     
  Sideroll sprinkler

Other, please describe: \_\_\_\_\_

d. System design features:

i. Describe how you will control tailwater:

ii. For sprinkler systems:

(1) Estimate the operating pressure at the distribution system: \_\_\_\_\_ psi

(2) What is the sprinkler package design rate? \_\_\_\_\_ gpm

(3) What is the wetted diameter (twice the distance the sprinkler throws water) of a sprinkler on the outer 100 feet of the system? \_\_\_\_\_ feet

(4) Please include a copy of the sprinkler package design information.

e. Crop(s) you intend to irrigate. Please note any planned crop rotations:

f. Please describe how you will determine when to irrigate and how much water to apply (particularly important if you do not plan a full irrigation).

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

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1320 Research Park Drive  
Manhattan, Kansas 66502

Jackie McClaskey, Secretary



Phone: (785) 564-6700  
Fax: (785) 564-6777  
Email: ksag@kda.ks.gov  
www.agriculture.ks.gov  
Sam Brownback, Governor

February 14, 2018

STIRTZ FARMS  
RYAN STIRTZ  
1400 2200 AVE  
ENTERPRISE KS 67441

RE: Application  
File No. 49994

Dear Sir or Madam:

Your application for permit to appropriate water in 14-13S-2E in Dickinson County, was received and has been assigned the file number noted above.

As a matter of record, the Division of Water Resources has on hand a large number of applications awaiting processing. Therefore to be fair to all concerned, and so that we can process those applications on hand in the order they were received, we intend to concentrate on the backlog of applications until the issue is resolved. Once review of your application has begun, we will contact you, if additional information is required.

In accordance with the provisions of the Kansas Water Appropriation Act, a portion of which is included below, the use of water as proposed prior to approval of the application is unlawful. Once approved, compliance with the terms, conditions and limitations of the permit is necessary. Conservation of the water resources of Kansas is required.

**Section 82a-728 of the Kansas Water Appropriation Act, provides (a) except for the appropriation of water for the purpose of domestic use, . . . it shall be unlawful for any person to appropriate or threaten to appropriate water from any source without first applying for and obtaining a permit to appropriate water in accordance with the provisions of the Water Appropriation Act or for any person to violate any condition of a vested right, appropriation right or an approved application for a permit to appropriate water for beneficial use.**

**(b) (1) The violation of any provision of this section by any person is a class C misdemeanor . . .**

**A class C misdemeanor is punishable by a fine not to exceed \$500 and/or a term of confinement not to exceed one month in the county jail. Each day that the violation occurs constitutes a separate offense.**

If you have any questions, please contact me at (785) 564-6637. If you wish to discuss a specific file, please have the file number ready so that we may help you more efficiently.

Sincerely,

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

Kristen A. Baum  
New Applications Unit Supervisor  
Water Appropriation Program

BAT: dlw  
pc: TOPEKA Field Office  
GMD

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# RYAN STIRTZ- NEW APPLICATION SITE MAP SEC. 14, T13S, R2E

49994

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1:12,000



Proposed Place of Use



Proposed Point of Diversion

All Known Wells Within 1/2 mile of the proposed point of diversion are shown on this map.

2/6/18

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