NOTICE

This scan only represents the application as filed. The information contained herein meets the requirements of K.A.R. 5-3-1 or K.A.R. 5-5-1, and has been found acceptable for filing in the office of the Chief Engineer. The application should not be considered to be a complete application as per K.A.R. 5-3-1b or K.A.R. 5-5-2a.

KANSAS DEPARTMENT OF AGRICULTURE

Mike Beam, Secretary of Agriculture

DIVISION OF WATER RESOURCESChristopher W. Beightel, Acting Chief Engineer

50486

WATER RESOURCES RECEIVED

DEC 1 5 2020

2:14

KS DEPT OF AGRICULTURE

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

S DERBOF AGRICULTURE

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

City: Peck				State KS	Zip Code 67120
Telephone Number: (316)	772-1	023			
The source of water is:	□ sı	urface water in		(str	eam)
OR	⊠ g	roundwater in Ninne	scah	River (drainage	ge basin)
when water is released from	stor	age for use by water we receive your app	assu	rance district member	nay be subject to administration ers. If your application is subject to appropriate form to complete
The maximum quantity of w	ater	desired is 248	a	cre-feet OR	gallons per calendar year,
to be diverted at a maximur	n rate	e of _800 ga	allons	per minute OR	cubic feet per second.
requested quantity of water	unde and r	r that priority number maximum quantity of	can l	NOT be increased. Fer are appropriate an	rate of diversion and maximum Please be certain your requested d reasonable for your proposed nts.
The water is intended to be	appr	opriated for (Check us	se inte	nded):	
(a) ☐ Artificial Recharge	(b)		(c)	☐ Recreational	(d) ☐ Water Power
(e) ☐ Industrial	(f)	☐ Municipal	(g)	☐ Stockwatering	(h) ☐ Sediment Control
(i) Domestic	(j)	□ Dewatering	(k)	☐ Hydraulic Dredgir	ng (I) ☐ Fire Protection
(m) ☐ Thermal Exchange	(n)	☐ Contamination R	emed	liation	
YOU MUST COMPLETE AND AT	TACH			ATER RESOURCES FOR	RM(S) PROVIDING INFORMATION TO

(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 underpenalty of perjury that the foregoing is true and correct. Executed on
The applicant must provide the required information or signature irrespective of whether they are the landowner

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) 12/31/2021	
		each was or will be completed)

8. The first actual application of water for the proposed beneficial use was or is estimated to be 12/31/2021 WATER RESOURCES RECEIVED

		File No
	⊠ Y	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. The chemigation safety requirements must be met including a chemigation permit and reporting requirements.
).	If yo	ou are planning to impound water, please contact the Division of Water Resources for assistance, prior to mitting the application. Please attach a reservoir area capacity table and inform us of the total acres of face drainage area above the reservoir.
	Hav Wa	ve you also made an application for a permit for construction of this dam and reservoir with the Division of ter Resources? ☐ Yes ☐ No
	•	If yes, show the Water Structures permit number here
	•	If no, explain here why a Water Structures permit is not required
1.	sho	e application <u>must</u> be supplemented by a U.S.G.S. topographic map, aerial photograph or a detailed platewing the following information. On the topographic map, aerial photograph, or plat, identify the center of the tion, the section lines or the section corners and show the appropriate section, township and range numbers. o, 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 $\frac{1}{2}$ 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 $\frac{1}{2}$ mile, please advise us.
	(c)	If the application is for surface water, the names and addresses of the landowner(s) $\frac{1}{2}$ mile downstream and $\frac{1}{2}$ mile upstream from your property lines must be shown.
	(d)	The location of the proposed place of use should be shown by crosshatching on the topographic map, aeria 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.
2.	poi	any application, appropriation of water, water right, or vested right file number that covers the same diversion of the same place of use described in this application. Also list any other recent modifications made existing permits or water rights in conjunction with the filing of this application.
		30102

WATER RESOURCES

DEC 1 5 2020

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WATER RESCRIPTION TO THE PROPERTY OF AGRICULTURE

					File No						
13.	Furnish the following well infe has not been completed, giv					dwater. If the well					
	Information below is from:	☐ Test holes	□ Well as	completed	□ Drillers log	attached					
	Well location as shown in pa	aragraph No.	(A)	(B)	(C)	(D)					
	Date Drilled										
	Total depth of well	_		<u> </u>							
	Depth to water bearing formation										
	Depth to static water level										
	Depth to bottom of pump int	ake pipe _									
15.	Owner (owner, tenant, agent or otherwise) The owner(s) of the property where the water is used, if other than the applicant, is (please print): (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 Summe	v Co_, Kansas	, this c	lay of <u>OC</u>	(month)	, 2020 (year)					
	Martin Sett (Applicant Signatur	re)	_								
Ву	(Agent or Officer Sign	ature)									

(office/title)
WATER RESOUR

Date: ____

WATER RESOURCES RECEIVED

(Agent or Officer - Please Print)

Assisted by _____

DEC 1 5 2020

KS DEPT OF AGRICULTURE

WATER RESOURCES
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NOV 2 3 2020 PRIORITY

KS DEPTOF AGRICULTURE
UNA

620-886-0093

<u>Leare</u> # 33168

Oil Field Supply Well

Driller & Assistant: Logan and Chip	Date: 2/18/2020
CUSTOMER: Bill Gallaugher	58.
	Rodes Drue Rd. Medicine Lodge, KS
☐ 5" Screen ☐ Quarters ☐ Drillin, ☐ 5" Casing ☐ Solvent & Glue ☐ Chloric ☐ Couplings, 5" ☐ Water ☐ Lime ☐ End Caps, 5" ☐ 8" & 9" Bits ☐ 10" Lin ☐ Gravel Pack ☐ Packing ☐ Holep Depth: Formation:	g mud
	Static Water Level: 23
3-7' SANEY CVA-7	Groundwater Depth: 23'
7-8' CLAY	Est. Production: 25 - 500 pm
3-48 5AVE	Casing Size/Depth() - 18' - UC
48-50 Shale	5 y pue
10-00 21/40	Screen Size/Depth: 28-48
	5 pre
	Slot Size: . 025
	Grouting Depth: 0- 20'
	Number of Bags: 7
	Nearest Contamination:
	Notes:
Directions:	
Latitude: 37, 391393 N decima	al degrees (ex. 38.881796)
	al degrees (ex. 95.373889)
Datum: NAD27 NAD83 WGS84	
Elevation: 1287 ft.	1 12
SE 1/4 SW 1/4 SE 1/4 SE 1/4	\$ 2100 /ft. Well MINIMUM
Sec. 35 T 30 R 1	\$ 120°2 /Grout
County Summer	\$ /City Permit
N	\$ /City Permit \$ /Water Sample \$ 500000 /Mobilization/Travel
	\$ 500° /Mobilization/Travel
	\$ /Discount
	Contract Received:
W E	
	Invoice #: 2024
l k	Date Mailed: emailed 3/5/2020
S	Well Data: Access:
	Materials: Incent: Chio V
	WATER RECOURSES

WATER RESOURCES RECEIVED

DEC 1 5 2020

WATER RESOURCES
RECEIVED PRIORITY

UNACCEPTABLE 5 2020

KS DEPT OF AGRICULTURE

10.1.2020
(Date)

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

Re: Application File No. _____

Minimum Desirable Streamflow

Dear Sir:

I understand that a Minimum Desirable Streamflow requirement has been established by the legislature for the source of supply to which the above referenced application applies.

I understand that diversion of water pursuant to this application will be subject to regulation any time Minimum Desirable Streamflow requirements are not being met.

I also understand that if this application is approved, there could be times, as determined by the Division of Water Resources, when I would not be allowed to divert water. I realize that this could affect the economics of my decision to appropriate water.

I am aware of the above factors, and with the knowledge thereof, request that the Division of Water Resources proceed with processing and approval, if possible, of the above referenced application.

Signature of Applicant

State of Kansas)

Southwest SUMMON) ss

MARTIN SCOTT TERNES

(Print Applicant's Name)

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

Notary Public

My Commission Expires:

NOTARY PUBLIC - State of Kansas ASHTON SPRINGER My Appt Expires 3/24/24 WATER RESOURCES RECEIVED

DEC 1 5 2020

KS DEPT OF AGRICULTURE

WATER RESOURCES RECEIVED PRIORITY

UNACCEPTABLE 3 2020

KS DEPT OF AGRICULTURES

DWR 1-100.171 (Revised 03/27/2008)

IRRIGATION USE SUPPLEMENTAL SHEET

File No.

		1	Name	of A	pplic	ant (P	lease	Print): <u>N</u>	lar	tik	T	Ern	1-65					
1. I	Please lesign	supp ate th	ly the	nam al nu	e and	d addr	ress o	of each	n land rigate	lowne d in e	er, the	lega orty a	l desc	riptio act or	n of t	the la	nds t porti	o be ir	rigated, and reof:
Land	owne	r of I	Recor	d		NAM	Œ:_(Ma	rti	h	Ten	ne	5			<u> </u>			
					AL	DRES								(4)	45	Le	120	3	
S	Т	R		N	E¼			N	W1/4			SV	V 1/4			S	E¼		TOTAL
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	167
35	305	14	445			44.5									34			34	101
35	305	14																	
-51								40											
Land	lowne	r of I	Recor	d		NAM	Æ:			-						-	-	-	
					AI	DRE	SS:												
S	Т	R		N	E¼			N	W1/4				V1/4			S	E¼		TOTAL
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
													7.1			18			
Land	owne	r of I	Recor	d		NAM	Æ:												
					ΑГ	DRE	1									4			
				N	E¼			N	W1/4			SI	N1/4			S	E¼		
S	T	R	NE	NW		SE	NE	NW	SW	SE	NE	NW		SE	NE	_		SE	TOTAL

DWR 1-100.23 (7-7-00)

WATER RESOURCES RECEIVED

DEC 1 5 2020

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a.	Indicate the soils in the field(s) ar	d 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	e in the field(s):	9/0	
c.	Type of irrigation system you pro	pose to use (check one):		
	Center pivot	★ Center pivot - LE	EPA	Big gun" sprinkle
	Gravity system (furrows)	Gravity system (b	oorders)	_ Sideroll sprinkler
	Other, please describe:			
d.	System design features:			
	i. Describe how you will cont	rol tailwater:		
	Terraces			
	ii. For sprinkler systems:			
	(1) Estimate the operation	ng pressure at the distribution	system: 30 p	osi
	(2) What is the sprinkle	r package design rate? 3-50	gpm	
	(3) What is the wetted di	ameter (twice the distance the	sprinkler throws wa	ter) of a sprinkler on
	100 5 61	system? 40 feet		
	outer 100 feet of the	system: icci		
		y of the sprinkler package des	sign information.	
e.	(4) Please include a cop Crop(s) you intend to irrigate. F	y of the sprinkler package des		
e.	(4) Please include a cop	y of the sprinkler package des		
e.	(4) Please include a cop Crop(s) you intend to irrigate. F Wheet Corro So Please describe how you will dispressent if you do not plan a fe	y of the sprinkler package desplease note any planned crop in bean 5	rotations:	r to apply (particul

You may request. WATER RESOURCES RECEIVED

DEC 1 5 2020

WATER RESOURCES
RECEIVED

UNACCEPTABLE 2020 KS DEPT OF AGRICULTURE



DEC 1 5 2020

WATER RESOURCES RECEIVED

NOV 2 3 200 PRIORITY
UNACCEPTABLE 200 PRIORITY

1320 Research Park Drive Manhattan, KS 66502 785-564-6700 www. agriculture.ks.gov



900 SW Jackson, Room 456 Topeka, KS 66612 785-296-3556

Mike Beam, Secretary

Laura Kelly, Governor

December 29, 2020

Martin Ternes 2618 CR GG Ashland, KS 67831

Re: Unacceptable Applications

Dear Mr. Ternes:

Returned herewith are your Applications for Permit to Appropriate Water for Beneficial Use received by the Division of Water Resources on November 23, 2020 with Check Nos. 9396 & 9397 in the amount of \$300 each. This application is not acceptable for filing in its present form.

You must designate a flowing rate for the application. (Please fill out the flow rate on Part 3 of each application).

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

Sincerely,

Brandon Milner Environmental Scientist

Water Appropriation Program

Brander Milner

KANSAS DEPARTMENT OF AGRICULTURE

Mike Beam, Secretary of Agriculture

DIVISION OF WATER RESOURCESChristopher W. Beightel, Acting Chief Engineer

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

APPLICATION FOR PERMIT TO APPROPRIATE WATER FOR BENEFICIAL USE

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

WATER RESOURCES RECEIVED

Unacceptable for Priority
2:06
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:

City: Peck			State KS	Zip Co	ode <u>67120</u>
Telephone Number: (316)	772-	1023			
The source of water is:	□ s	urface water in		(stream)	
OR	⊠ g	roundwater in Ninneso	cah River (drai	inage basin)	
Certain streams in Kansas when water is released from to these regulations on the and return to the Division of	n stor date	rage for use by water as we receive your applica	surance district mem	bers. If yo	ur application is subject
The maximum quantity of w	ater	desired is 248	acre-feet OR	gal	lons per calendar year,
THE MAXIMUM quantity of W	rator	4001104 10 210			
to be diverted at a maximum					cubic feet per second.
	m rat been unde and	e of gallo assigned a priority, the r that priority number ca maximum quantity of w	ons per minute OR _ e requested maximum an NOT be increased vater are appropriate	m rate of d . Please be and reasor	liversion and maximum
to be diverted at a maximum Once your application has requested quantity of water maximum rate of diversion	m rate been unde and nt wit	e of gallo assigned a priority, the r that priority number ca maximum quantity of w th the Division of Water	ons per minute OR e requested maximum an <u>NOT</u> be increased rater are appropriate r Resources' requirer	m rate of d . Please be and reasor	liversion and maximum
to be diverted at a maximum Once your application has requested quantity of water maximum rate of diversion project and are in agreeme	m rate	assigned a priority, the rethat priority number camaximum quantity of with the Division of Water	ons per minute OR e requested maximum an <u>NOT</u> be increased rater are appropriate r Resources' requirer	m rate of d . Please be and reasor ments.	liversion and maximum
to be diverted at a maximum Once your application has requested quantity of water maximum rate of diversion project and are in agreeme The water is intended to be	been unde and nt with approved (b)	assigned a priority, the that priority number can maximum quantity of with the Division of Water copriated for (Check use	ons per minute OR e requested maximulan NOT be increased vater are appropriate resources' requirer intended):	m rate of d . Please be and reasor ments.	liversion and maximum e certain your requested nable for your proposed
to be diverted at a maximum Once your application has requested quantity of water maximum rate of diversion project and are in agreeme The water is intended to be (a) Artificial Recharge	been under and int with appropriate (b) (f)	assigned a priority, the that priority number camaximum quantity of with the Division of Water opriated for (Check use	ons per minute OR e requested maximulan NOT be increased rater are appropriate Resources' requirer intended): c) □ Recreational	m rate of d . Please be and reasor ments. (d)	iversion and maximum e certain your requested hable for your proposed Water Power
to be diverted at a maximum Once your application has requested quantity of water maximum rate of diversion project and are in agreeme The water is intended to be (a) Artificial Recharge (e) Industrial	been under and int with appropriate (b) (f) (j)	assigned a priority, the that priority number can maximum quantity of with the Division of Water opriated for (Check use Irrigation (Municipal (Dewatering))	ons per minute OR er requested maximulan NOT be increased vater are appropriate resources' requirer intended): c) □ Recreational g) □ Stockwatering k) □ Hydraulic Dred	m rate of d . Please be and reasor ments. (d)	iversion and maximum e certain your requested hable for your proposed Water Power

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WATER RESOURCES RECEIVED

File No.

Unacceptable for Priority

ο.	The	location of the proposed wells, pump sites or other works for diversion of water is:
	Note	e: For the application to be accepted, the point of diversion to cation 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 $5E$ quarter of the $5E$ quarter of the $5E$ quarter of Section 35 , more particularly
		described as being near a point 431 feet North and 1125 feet West of the Southeast corner of said
		section, in Township 30 South, Range East/Vest (circle one), 50 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
	(D)	described as being near a point feet North and feet West of the Southeast corner of said
	16.11	section, in Township South, Range East/West (circle one), County, Kansas.
	well	e source of supply is groundwater, a separate application shall be filed for each proposed well or battery or s, except that a single application may include up to four wells within a circle with a quarter ($\frac{1}{4}$) mile radius in same local source of supply which do not exceed a maximum diversion rate of 20 gallons per minute per well
3.	four not distr	attery of wells is defined as two or more wells connected to a common pump by a manifold; or not more than wells in the same local source of supply within a 300 foot radius circle which are being operated by pumps to exceed a total maximum diversion rate of 800 gallons per minute and which supply water to a common ribution system. owner of the point of diversion, if other than the applicant is (please print):
	-	(name, address and telephone number)
	-	(name, address and telephone number)
	land	must provide evidence of legal access to, or control of, the point of diversion from the landowner or the lowner's authorized representative. Provide a copy of a recorded deed, lease, easement or other document 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 underpenalty of perjury that the foregoing is true and correct. Executed on
	Fail	applicant must provide the required information or signature irrespective of whether they are the landowner. ure to complete this portion of the application will cause it to be unacceptable for filing and the application will returned to the applicant.
7.	The	proposed project for diversion of water will consist of 4 Wells
	and	(number of wells, pumps or dams, etc.) (was)(will be) completed (by) 12/31/2021
3.	The	(Month/Day/Year - each was or will be completed) first actual application of water for the proposed beneficial use was or is estimated to be 12/31/2021 Day/Year)

•	\ A 7'''					
9.					d into the water pumped t	from the diversion works?
	⊠ Y			ve shall be required.	1	
	All	chemigation s	safety requirements mu	ist be met including a	a chemigation permit and	reporting requirements.
10.	sub	mitting the a		ach a reservoir area		es for assistance, prior to m us of the total acres of
		re you also m ter Resource		a permit for constru No	ction of this dam and res	ervoir with the Division of
	•	If yes, show	the Water Structures p	permit number here		
	•	If no, explain	here why a Water Str	uctures permit is not	required	
11.	sho sec	wing the follo	wing information. On t	he topographic map, corners and show the	aerial photograph, or pla	tograph or a detailed plat t, identify the center of the nship and range numbers.
	(a)	works) shou	ld be plotted as descr	ribed in Paragraph N		s, dams, or other diversion showing the North-South ection.
	(b)	mile of the p	roposed well or wells. I	dentify each existing		r wells of any kind within $\frac{1}{2}$ nish the name and mailing ase advise us.
	(c)		tion is for surface water eam from your propert			s) ½ mile downstream and
	(d)	The location photograph		of use should be sho	wn by crosshatching on th	ne topographic map, aerial
	(e)		cation of the pipelines, of the place of use.	canals, reservoirs or	other facilities for convey	ing water from the point of
			Kansas Geological Si			tion, township and range sity of Kansas, Lawrence,
12.	poir	nts or any of t		escribed in this applie	cation. Also list any other	covers the same diversion recent modifications made
						WATER RESOURCES RECEIVED

Unacceptable for Priority

File No. ____

	File No.							
13.	Furnish the following well information if the proposed appropriation is for the use of groundwater. If the we 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 the control of the applicant to the proposed place where the water will be used is that of the control of the applicant to the proposed place where the water will be used is that of the control of the applicant to the proposed place where the water will be used is that of the control of the applicant to the proposed place where the water will be used is that of the control of the applicant to the proposed place where the water will be used is that of the control of the applicant to the proposed place where the water will be used is that of the control of the contr							
15.	The owner(s) of the property where the water is used, if other than the applicant, is (please print):							
	(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							
	(month) (year)							
	Mathe Settleman (Applicant Signature)							
Ву								
2	(Agent or Officer Signature)							
100	(Agent or Officer - Please Print)							

(office/title)

Assisted by __

WATER RESOURCES RECEIVED

Unacceptable for Priority

Date:

620-886-0093

33168

Oil Field Supply Well

Driller & Assistant: Logan and Chip	Date: 2/18/2020
CUSTOMER: Bill Gallaugher SE.	
	es Dove Rd. Medicine Lodge, KS
☐ 5" Screen ☐ Quarters ☐ Drilling mud ☐ S" Casing ☐ Solvent & Glue ☐ Chlorine ☐ Couplings, 5" ☐ Water ☐ Lime ☐ Lime ☐ To" Liner, if need ☐ Gravel Pack ☐ Packing ☐ Holeplug	☐ Water Sample bottle ☐ Gas & Oil - W.T. ☐ Inspection Sheet
Depth: Formation:	Well Information:
0-3 top Suil	Static Water Level: 23
3-1 SANZY CA-7	Groundwater Depth: 23
7-8 Clay	Est. Production: 35 - 50g Pn
8-48 5AVE	Casing Size/Depth > 18 - UC
48-50 Shale	5' pue
	Screen Size/Depth: 28-48
	5"pre
	Slot Size: , \bigcirc Z.5
	Grouting Depth: 0 – 20'
,	Number of Bags: 7
	Nearest Contamination:
	Natas
	Notes:
Directions:	
Latitude: 37, 391393 N decimal degrees	(ex. 38.881796)
Longitude - 97, 3878 ZZ W decimal degrees	
Datum: NAD27 X NAD83 WGS84	
Elevation: 1287 ft.	
SE 1/4 SW 1/4 SE 1/4 SE 1/4 \$ 2/0	/ft. Well MINIMUM
Sec. 35 T 30 R 1 5W \$ 1Z	∪°² /Grout
	/City Permit
N \$	/Water Sample
County Summer \$ 5	/Mobilization/Travel
\$	/Discount
Contract	t Received:
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Invoice	#: 2024
Date Me	illed: emailed 3/5/2020
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WATER RESOURCES RECEIVED

Unacceptable for Priority

	10.1.2020
1311	(Date)

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

Re: Application
File No. _____

Minimum Desirable Streamflow

Dear Sir:

I understand that a Minimum Desirable Streamflow requirement has been established by the legislature for the source of supply to which the above referenced application applies.

I understand that diversion of water pursuant to this application will be subject to regulation any time Minimum Desirable Streamflow requirements are not being met.

I also understand that if this application is approved, there could be times, as determined by the Division of Water Resources, when I would not be allowed to divert water. I realize that this could affect the economics of my decision to appropriate water.

I am aware of the above factors, and with the knowledge thereof, request that the Division of Water Resources proceed with processing and approval, if possible, of the above referenced application.

Signature of Applicant

State of Kansas)

County of Summer)

MARTIN SCOTT TERNES

(Print Applicant's Name)

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

Notary Public

My Commission Expires:



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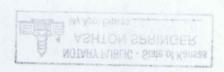
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IRRIGATION USE SUPPLEMENTAL SHEET

File No.

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	Indicate the soils in the field(s) and t	heir intake rates:		
	Soil Name	Percent of field (%)	Intake Rate (in/hr)	Irrigation Design Group
	Total:	100 %	0/	
	Estimate the average land slope in th		%	
	Estimate the maximum land slope in		%	
	Type of irrigation system you propose			"D' "'-11
	Center pivot	Center pivot - LE		"Big gun" sprinkler
	Gravity system (furrows)			Sideroll sprinkler
	Other, please describe:			
1.	System design features:			
	i. Describe how you will control	tailwater:		
	Terraces			
	ii. For sprinkler systems:			
	(1) Estimate the operating	pressure at the distribution	system: 30	_ psi
		ackage design rate? 3-50		
		neter (twice the distance the		water) of a sprinkler on th
	outer 100 feet of the sys	1/1		
		ich:ict		
		f the sprinkler package desi		
.	Crop(s) you intend to irrigate. Plea		otations:	
	Please describe how you will deter	rmine when to irrigate an	d how much w	ater to apply (particular

2.

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



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KS DEPT OF AGRICULTURE

1320 Research Park Drive Manhattan, KS 66502 785-564-6700 www. agriculture.ks.gov



900 SW Jackson, Room 456 Topeka, KS 66612 785-296-3556

Mike Beam, Secretary

Laura Kelly, Governor

December 15, 2020

MARTIN TERNES 1068 N WEST RD PECK KS 67120

RE: Application, File No(s). 50486

Dear Sir or Madam:

The Division of Water Resources (Division) has received your application(s) for a permit to appropriate water for beneficial use. Your application(s) has been assigned the file number(s) referenced above. Please be aware that the Division may have a large number of pending applications on hand at times and makes every attempt to process them in the order in which they are received. You will be contacted if additional information is required.

Please note, this letter only acknowledges receipt of your application(s) and does not guarantee approval. In accordance with the provisions of the Kansas Water Appropriation Act, the use of water as proposed prior to approval of the application(s) is unlawful.

Additional information about the process may be found on our website at <u>agriculture.ks.gov/divisions-programs/dwr</u>. If you have any other questions, please contact our office at 785-564-6640 or your local Stafford Field Office at 620-234-5311. If you call, please reference the file number so we can help you more efficiently.

Sincerely,

Kris Neuhauser

New Applications Lead Water Appropriation Program

DATA ENTRY SYSTEM ID NUMBER SHEET

50486

FILE NUMBER		•	
APPLICANT PERSON ID & SEQ #	88523 PDIV ID		BATTERY ID
63653			
		-	
LANDOWNER PERSON ID & SEQ #	70203 PUSE ID		
63653			
			
	<u></u>		
WATER USE CORRESPONDENT			
PERSON ID & SEQ #			
63653			
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