

# NOTICE

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

THE STATE OF KANSAS



KANSAS DEPARTMENT OF AGRICULTURE
Mike Beam, Secretary of Agriculture

DIVISION OF WATER RESOURCES
Christopher W. Beightel, Acting Chief Engineer

File Number 50516
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.)

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FEB 01 2021
2:14
KS DEPT OF AGRICULTURE

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

1. Name of Applicant (Please Print): Chris Boyd
Address: 12001 NW Spring Creek Rd
City: Medicine Lodge State KS Zip Code 67104
Telephone Number: (620) 243-2584

2. The source of water is: [ ] surface water in (stream)
OR [x] groundwater in Medicine Lodge 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 91 acre-feet OR gallons per calendar year, to be diverted at a maximum rate of 800 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) [x] 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. 2 GMD Meets K.A.R. 5-3-1 (YES/NO) Use IRR Source G/S County BA By AD Date 2/1/2021
Code REG Fee \$ 200 TR # Receipt Date 2-1-2021 Check # 2211

2/2/2021
LMoody

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

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**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 NW quarter of the NW quarter of the NE quarter of Section 13, more particularly described as being near a point 5077 feet North and 2601 feet West of the Southeast corner of said section, in Township 30 South, Range 12 Wes, Barber 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):

Calvin E & Carla J Boyd Rev Trust, 12001 NW Spring Creek Rd, Medicine Lodge, KS 67104 (620) 243-4654  
(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 January 25th, 2021. \_\_\_\_\_

Applicant's Signature

The applicant must provide the required information or signature irrespective of whether they are the landowner. Failure to complete this portion of the application will cause it to be unacceptable for filing and the application will be returned to the applicant.

7. The proposed project for diversion of water will consist of One (1) Well and Two (2) Pumps

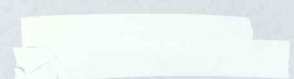
(number of wells, pumps or dams, etc.)

and was completed June 2, 2006

(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 June 2, 2006

(Mo/Day/Year)



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 N/A
- If no, explain here why a Water Structures permit is not required \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. The application must be supplemented by a U.S.G.S. topographic map, aerial photograph or a detailed plat showing the following information. On the topographic map, aerial photograph, or plat, identify the center of the section, the section lines or the section corners and show the appropriate section, township and range numbers. Also, please show the following information:

- (a) The location of the proposed point(s) of diversion (wells, stream-bank installations, dams, or other diversion works) should be plotted as described in Paragraph No. 5 of the application, showing the North-South distance and the East-West distance from a section line or southeast corner of section.
- (b) **If the application is for groundwater, please show the location of any existing water wells of any kind within 1/2 mile of the proposed well or wells. Identify each existing well as to its use and furnish the name and mailing address of the property owner or owners. If there are no wells within 1/2 mile, please advise us.**  
*I have drawn this on the map included.*
- (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.

File No. 46,316 currently authorizes 182 AF. This application will be a complete P/U overlap to file No. 46,316.

This new application was filed for a higher authorized quantity of 91AF. File No. 46,316 will need a PU change.

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

File No. 50516

13. Furnish the following well information if the proposed appropriation is for the use of groundwater. If the well has not been completed, give information obtained from test holes, if available.

Information below is from:  Test holes  Well as completed  Drillers log attached

Well location as shown in paragraph No.	(A)	(B)	(C)	(D)
Date Drilled	<u>06/02/06</u>	_____	_____	_____
Total depth of well	<u>167'</u>	_____	_____	_____
Depth to water bearing formation	<u>26'</u>	_____	_____	_____
Depth to static water level	<u>70'</u>	_____	_____	_____
Depth to bottom of pump intake pipe	<u>168'</u>	_____	_____	_____

14. The relationship of the applicant to the proposed place where the water will be used is that of

Owners  
(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):

Calvin E and Carla J Rev Trust, 12001 NW Spring Creek Rd, Medicine Lodge, KS 67104 (620) 243-4654  
(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 Pratt County, Kansas, this 25<sup>th</sup> day of January, 2021.  
(month) (year)

[Signature]

(Applicant Signature)

By \_\_\_\_\_

(Agent or Officer Signature)

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

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Assisted by JNE

SFFO/ESII

(office/title)

Date: 12/30/2020

## FEE SCHEDULE

1. The fee for an application for a permit to appropriate water for beneficial use, except for domestic use, shall be (see paragraph No. 2 below if requesting storage):

ACRE-FEET	FEE
0-100	\$200.00
101-320	\$300.00
More than 320	\$300.00 plus \$20.00 for each additional 100 acre-feet or any part thereof.

2. The fee for an application in which storage is requested, except for domestic use, shall be:

ACRE-FEET	FEE
0-250	\$200.00
More than 250	\$200.00 plus \$20.00 for each additional 250 acre-feet of storage or any part thereof.

Note: If an application requests both direct use *and* storage, the fee charged shall be as determined under No. 1 or No. 2 above, whichever is greater, but not both fees.

3. The fee for an application for a permit to appropriate water for water power or dewatering purposes shall be \$100.00 plus \$200.00 for each 100 cubic feet per second, or part thereof, of the diversion rate requested.

Note: The applicant shall notify the Chief Engineer and pay the statutorily required field inspection fee of \$400.00 when construction of the works for diversion has been completed, except that for applications filed on or after July 1, 2009, for works constructed for sediment control use and for evaporation from a groundwater pit for industrial use shall be accompanied by a field inspection fee of \$200.00.

### MAKE CHECKS PAYABLE TO THE KANSAS DEPARTMENT OF AGRICULTURE

#### ATTENTION

A Water Conservation Plan may be required per K.S.A. 82a-733. A statement that your application for permit to appropriate water may be subject to the minimum desirable streamflow requirements per K.S.A. 82a-703a, b, and c may also be required from you. After the Division of Water Resources has had the opportunity to review your application, you will be notified whether or not you will need to submit a Water Conservation Plan. You also may be required to install a water flow meter or water stage measuring device on your diversion works prior to diverting water. There may be other special conditions or Groundwater Management District regulations that you will need to comply with if this application is approved.

#### CONVERSION FACTORS

1 acre-foot equals 325,851 gallons

1 million gallons equal 3.07 acre-feet

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**IRRIGATION USE  
SUPPLEMENTAL SHEET**

File No. 50516

Name of Applicant (Please Print): Chris Boyd

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: Calvin & Carla Boyd Rev Trust

ADDRESS: 12001 NW Spring Creek Rd, Medicine Lodge, KS, 67104

S	T	R	NE¼				NW¼				SW¼				SE¼				TOTAL
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
13	30	12W	32.5	32.5	32.5	32.5													130.0

**Landowner of Record** NAME: Calvin & Carla Boyd Rev Trust

ADDRESS: 12001 NW Spring Creek Rd, Medicine Lodge, KS, 67104

S	T	R	NE¼				NW¼				SW¼				SE¼				TOTAL
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
12	30	12W										32.5			32.5				65.0

**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	

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

*I have checked the soil maps with slope*

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 %		

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

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

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

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- 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: 10-15 psi

(2) What is the sprinkler package design rate? 800 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? TBD feet

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

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

*I plan to utilize this half pivot for grazing wheat or cover as an alternate rotation off of the full pivot. Where we have the adjoining pasture, this crop ground in the area has been winter grazed by cows after grass has went dormant.*

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).

*We utilize a crop consultant as well as vegetative maps on Climate FieldView. Subsurface irrigation might be a possibility in the distant future as the ground slope is conducive for it.*

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



Don't miss any additional information you receive in preparing the Division of the work for you.

Describe how you will determine when to change the flow when water is added (percentage).  
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Describe how you will determine when to change the flow when water is added (percentage).  
Describe how you will determine when to change the flow when water is added (percentage).

(4) Describe the control system of the distribution system: 100

What is the main diameter (inches) of the distribution system? 100 inch

(5) What is the main diameter (inches) of the distribution system? 100 inch

(6) What is the main diameter (inches) of the distribution system? 100 inch

(7) Describe the operating regime of the distribution system: 10-12 bar

For the control system:

Describe how you will control the system:

Describe the control system:

Control system (manual)

Control system (automatic)

Control system (manual)

Control system (automatic)

Control system (manual)

Control system (automatic)

(8) Describe the maximum and slope in the pipe(s):

Describe the maximum and slope in the pipe(s): \_\_\_\_\_ %

(9) Describe the average and slope in the pipe(s):

Describe the average and slope in the pipe(s): \_\_\_\_\_ %

Describe the average and slope in the pipe(s): \_\_\_\_\_ %

Describe the average and slope in the pipe(s): \_\_\_\_\_ %

Describe the average and slope in the pipe(s): \_\_\_\_\_ %

Describe the average and slope in the pipe(s): \_\_\_\_\_ %

Describe the average and slope in the pipe(s): \_\_\_\_\_ %

Describe the control system of the distribution system:

Describe the control system of the distribution system: \_\_\_\_\_

56 8030  
**WATER WELL RECORD**

**Form WWC-5**

Division of Water Resources; App. No. **46,316**

<b>1 LOCATION OF WATER WELL:</b> County: <b>Barber</b>	Fraction <b>NW 1/4 NW 1/4 NE 1/4</b>	Section Number <b>13</b>	Township Number <b>T 30 S</b>	Range Number <b>R 12 E (W)</b>
Distance and direction from nearest town or city street address of well if located within city? <b>Approximately 2 miles south and 1 1/2 miles west of Isabel.</b>		<b>Global Positioning Systems</b> (decimal degrees, min. of 4 digits) Latitude: <b>37.441578</b> Longitude: <b>-98.583219</b> Elevation: <b>Unknown</b> Datum: <b>NAD 83</b> Data Collection Method: <b>WAAS GPS Unit</b>		
<b>2 WATER WELL OWNER:</b> <b>Calvin E. and Carla J. Boyd</b> RR#, St. Address, Box # : <b>12001 NW Spring Creek Rd.</b> City, State, ZIP Code : <b>Medicine Lodge, KS 67104</b>				

<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b> N <table border="1" style="width: 100px; height: 100px; text-align: center;"> <tr><td></td><td>x</td><td></td></tr> <tr><td>--NW--</td><td></td><td>--NE--</td></tr> <tr><td></td><td></td><td></td></tr> <tr><td>--SW--</td><td></td><td>--SE--</td></tr> <tr><td></td><td></td><td></td></tr> </table> W E S		x		--NW--		--NE--				--SW--		--SE--				<b>4 DEPTH OF COMPLETED WELL</b> <b>167</b> ft. Depth(s) Groundwater Encountered (1) _____ ft. (2) _____ ft. (3) _____ ft. WELL'S STATIC WATER LEVEL <b>70</b> ft. below land surface measured on <b>6-2-06</b> Pump test data: Well water was <b>Not checked</b> ft. after _____ hours pumping _____ gpm Est. Yield <b>Unknown</b> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <b>(2)</b> Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr _____ Sample was submitted _____ Water well disinfected? Yes _____ No <input checked="" type="checkbox"/>
		x														
--NW--		--NE--														
--SW--		--SE--														

<b>5 TYPE OF CASING USED:</b> 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) <b>(2)</b> PVC 4 ABS 7 Fiberglass	5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped Welded _____ Threaded _____
Blank casing diameter <b>16</b> in. to <b>100</b> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft. Casing height above land surface <b>12</b> in., weight <b>16.15</b> lbs./ft. Wall thickness or gauge No. <b>.500</b>	
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <b>(7)</b> PVC 9 ABS 11 Other (Specify) _____ 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot <b>(3)</b> Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (Specify) _____	
SCREEN-PERFORATED INTERVALS: From <b>100</b> ft. to <b>166</b> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS: From <b>60</b> ft. to <b>168</b> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.	

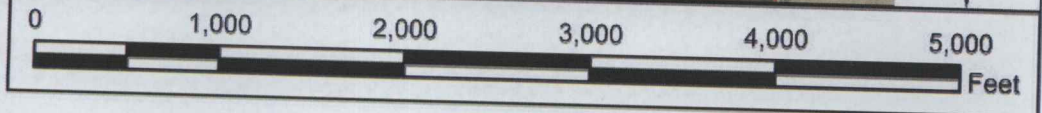
<b>6 GROUT MATERIAL:</b> 1 Neat Cement <b>(2)</b> Cement grout 3 Bentonite 4 Other _____ Fill sand _____	Grout Intervals: From <b>0</b> ft. to <b>21</b> ft., From _____ ft. to _____ ft., From <b>21</b> ft. to <b>60</b> ft.
What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well <b>None known</b>	
Direction from well? _____ How many feet? _____	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Topsoil	114	124	Clay, tan and white
3	9	Clay, tan	124	138	Sand and gravel, fine, medium
9	25	Sand and gravel, fine, medium, coarse	138	138.5	Clay, brown
25	26	Clay	138.5	154	Sand and gravel, fine, medium
26	40	Sand and gravel, fine, medium, coarse	154	161	Clay, tan
40	46	Clay, white and gray	161	166	Sand, fine, medium
46	74	Sand and gravel, fine, medium	166	168	Shale, red
74	78	Clay, tan and white			
78	98	Sand and gravel, fine, medium			
98	102	Clay			
102	114	Sand, fine, medium			

<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) <u>constructed</u> (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>6-2-06</b> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <b>185</b> This Water Well Record was completed on (mo/day/year) <b>8-12-06</b> Under the business name of <b>Clarke Well &amp; Equipment, Inc.</b> by (signature) <i>Clarke W. Clark</i>
--

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

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**Legend**

- Water Appropriation
- + Section Corner
- Section Line
- Half Mile
- Proposed Place of Use

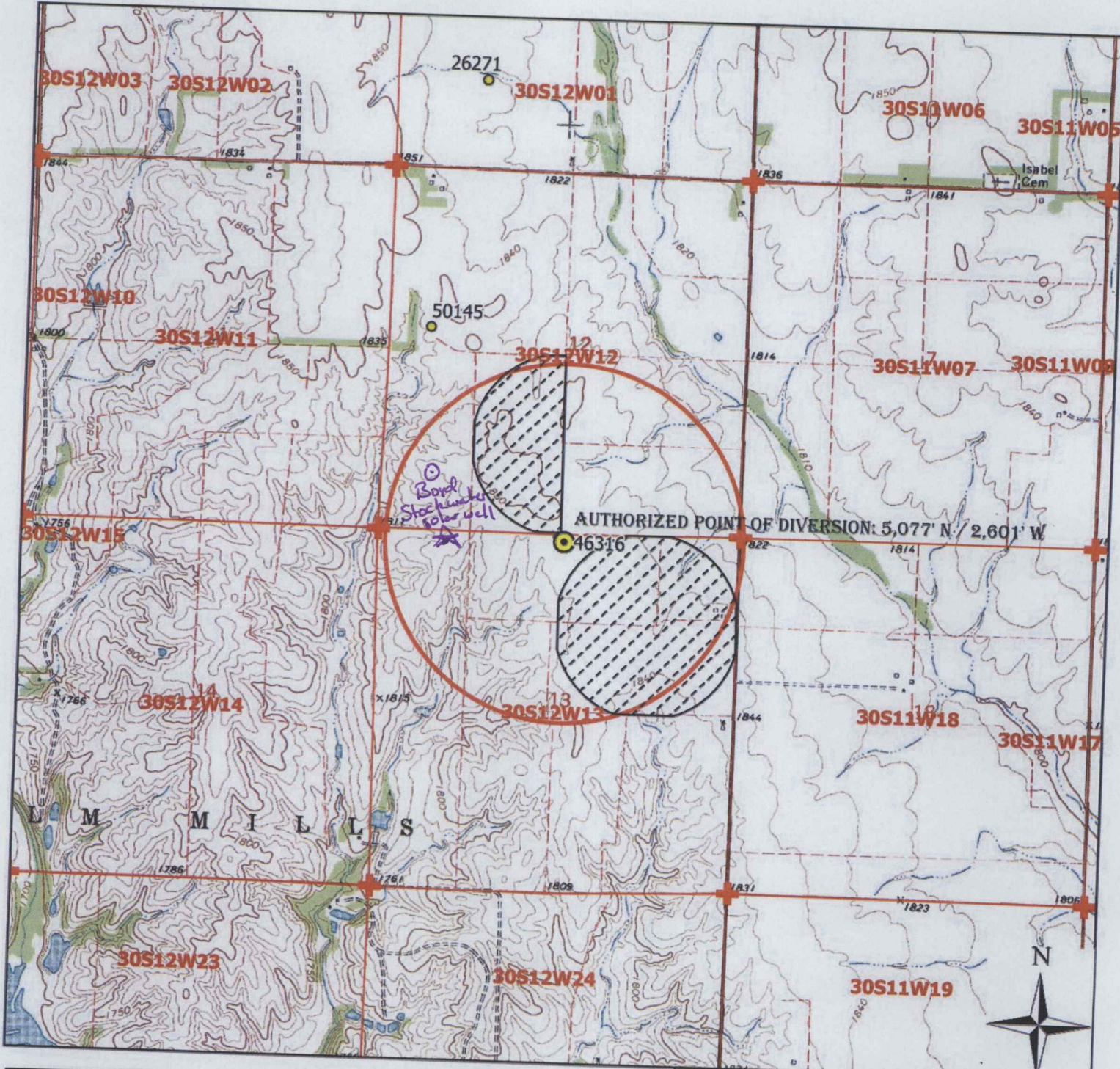
**Water Right Application, File No. 13-30-12W // Barber County**

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12/30/2020 JNE/SFFO 1:12,000 scale

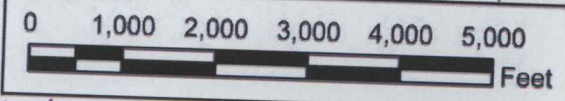


**Legend**

- Water Appropriation
- Authorized Point of Diversion
- ⊕ Section Corner
- ▭ Section Line
- ▭ Half Mile
- ▨ Proposed Place of Use

Monte Thom  
 811 N Walnut  
 Medicine Lodge, KS 67104

The star indicates a windmill for stockwater owned by Monte Thom. That is only well in radius on other owner.



**Water Right Application, File No. \_\_\_\_\_**

13-30-12W // Barber County

To the best of my knowledge, all points of diversion within one-half mile of the proposed point of diversion have been shown.

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*CE S RK* 1/25/21  
 Signature / Date

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12/30/2020 JNE/SFFO 1:24,000 scale

● indicates a stockwater solar well owned by the applicant

January 25<sup>th</sup>, 2021  
(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. 50516

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.

Chris Boyd  
Signature of Applicant

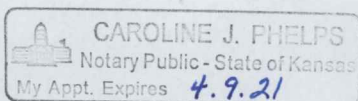
State of Kansas )  
County of Pratt ) ss  
)

Christopher E Boyd  
(Print Applicant's Name)

I hereby certify that the foregoing instrument was signed in my presence and sworn to before me this 25 day of January, 2021.

Caroline J. Phelps  
Notary Public

My Commission Expires:



WATER RESOURCES  
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FEB 01 2021

KS DEPT OF AGRICULTURE

**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

WATER RESOURCES  
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Fields

Prescriptions

Data

Import

Notifications

Chris Boyd's Operation

Buy

McEntire 80

2020

Soil (SSURGO) - Soil Type

Soil (SSURGO) - Soil Type

Area

Soil Type

3.4 ac Albion and Shellabarger sandy loams, 6 to 15 percent slopes

3.1 ac Albion-Shellabarger sandy loams, 1 to 3 percent slopes

2.4 ac Case-Clark clay loams, 3 to 7 percent slopes

45.4 ac Clark clay loam, 0 to 1 percent slopes

27.4 ac Ost clay loam, 1 to 3 percent slopes

Weather

Planting

Planted Avg Population

View Prescriptions

Harvest

Avg Yield Moisture Harvested

Field Health

Oct 14, 2020 0 Latest Image

WATER RESOURCES RECEIVED GDU FEB 01 2021

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Fields

Prescriptions

Data

Import

Notifications

Chris Boyd's Operation

Buy

McEntire 80



2020

Soil (SSURGO) - Drainage



Soil (SSURGO) - Drainage

Area	Drainage
3.4 ac	Well drained
3.1 ac	Well drained
2.4 ac	Well drained
45.4 ac	Well drained
27.4 ac	Well drained

Weather

Planting

Planted Avg Population

View Prescriptions

Harvest

Avg Yield Moisture Harvested

Field Health

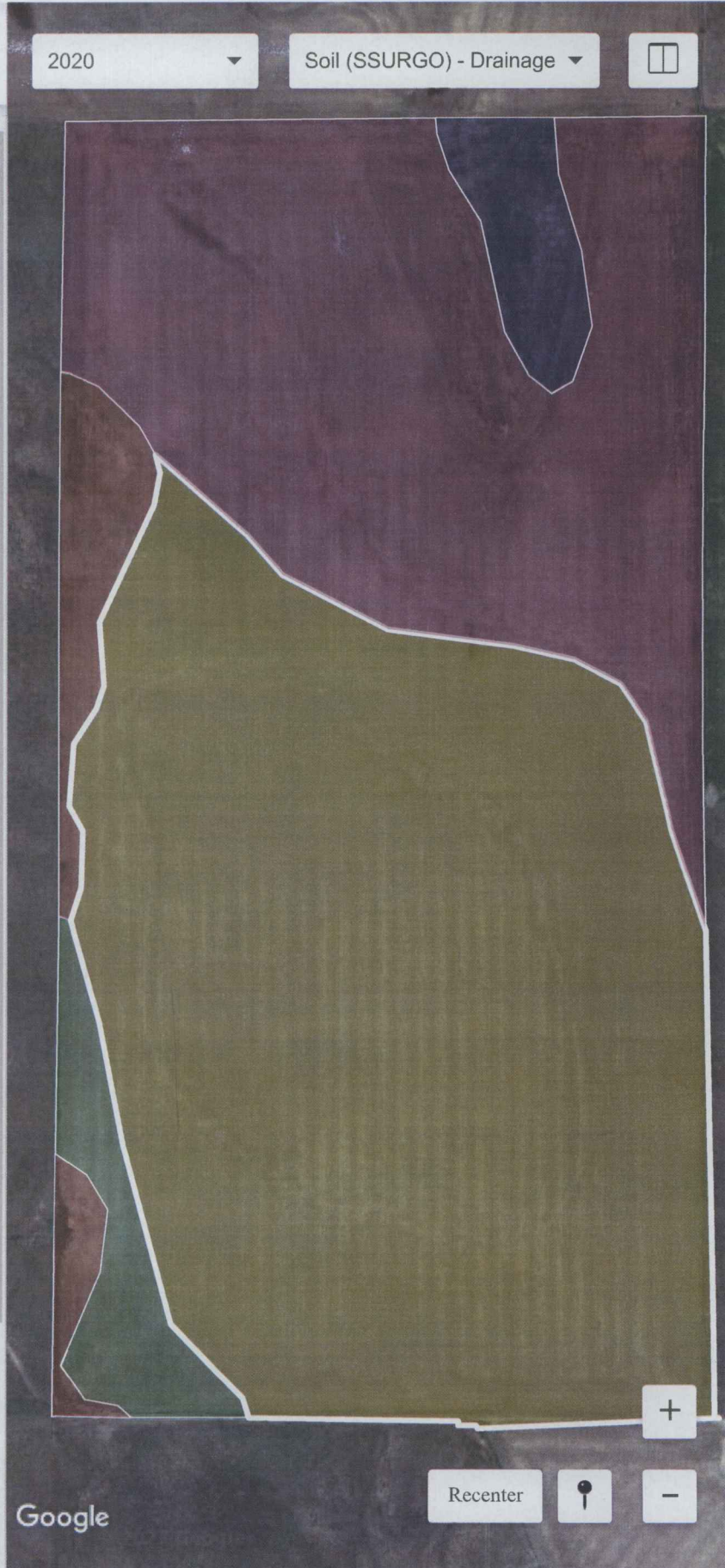
Oct 14, 2020 0 Latest Image GDUs



FEB 01 2021

View All KS DEPT OF AGRICULTURE

Activities





**DATA ENTRY SYSTEM ID NUMBER SHEET**

**FILE NUMBER** 50516

<b>APPLICANT</b>	<b>PDIV ID</b>	<b>BATTERY ID</b>
<b>PERSON ID &amp; SEQ #</b> 65911	72052	

<b>LANDOWNER</b>	<b>PUSE ID</b>
<b>PERSON ID &amp; SEQ #</b> 65912	57403
	70258

**WATER USE CORRESPONDENT**  
**PERSON ID & SEQ #**  
65912

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