

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.

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



WATER RESOURCES
RECEIVED

OCT 17 2022
1:10
900 SW Jackson, Room 456
Topeka, KS 66612
KS DEPT OF AGRICULTURE
785-296-3556

Mike Beam, Secretary

Laura Kelly, Governor

50888

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.)

*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): STEVEN & SHERRY JOHNSON
Address: 1536 NAIL RD
City: ENTERPRISE State KS Zip Code 67441
Telephone Number: (785) 263-5651

2. The source of water is: surface water in _____ (stream)
OR groundwater in SOLOMON 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 104 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) 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. Code	<u>3</u>	GMD	<u>RE2</u>	Meets K.A.R. 5-3-1 (YES/NO)	Use	<u>IRR</u>	Source	<u>G/S</u>	County	<u>SA</u>	By	<u>ALB</u>	Date	<u>10/18/22</u>
				Fee	<u>\$200</u>	TR #		Receipt Date	<u>10/17/22</u>	Check #	<u>9534</u>			

11/2/2022
LMoody

60 DTL
3960'
1320'

File No. _____

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 ^{SW} quarter of the ^{NE} E 1/2 quarter of the NE 1/4 quarter of Section 07, more particularly described as being near a point 3987 feet North and 1281 feet West of the Southeast corner of said section, in Township 13 South, Range 01 WEST, SALINE County, Kansas.

1/25/2023
BMM

(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):

_____ (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 _____, 20____.  _____
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 BATTERY OF 4 WELLS _____
(number of wells, pumps or dams, etc.)
and WILL completed (by) 12/31/23 _____
(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 2023 _____

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- 9. Will pesticide, fertilizer, or other foreign substance be injected into the water pumped from the diversion works?
 Yes No If "yes", a check valve shall be required.

All chemigation safety requirements must be met including a chemigation permit and reporting requirements.

- 10. If you are planning to impound water, please contact the Division of Water Resources for assistance, prior to submitting the application. Please attach a reservoir area capacity table and inform us of the total acres of surface drainage area above the reservoir.

Have you also made an application for a permit for construction of this dam and reservoir with the Division of Water Resources? Yes No

- If yes, show the Water Structures permit number here 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.
- (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.

REQUEST 60 DAYS TO PROVIDE A TEST HOLE LOG

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File No. _____

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):

(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 _____, Kansas, this _____ day of _____, _____
(month) (year)



(Applicant Signature)

By _____
(Agent or Officer Signature)

(Agent or Officer - Please Print)

Assisted by MB _____ ASST WC _____ Date: 10/10/22
(office/title)

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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: TILLAGE METHODS

ii. For sprinkler systems:

(1) Estimate the operating pressure at the distribution system: 35 _____ 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? _____ feet

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

e. Crop(s) you intend to irrigate. Please note any planned crop rotations: CORN, SOYBEANS, ALFALFA, WHEAT, SORGHUM

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). SOIL MOISTURE MONITORING

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

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(Date)

Kansas Department of Agriculture
Division of Water Resources
Earl D. Lewis, Jr., Chief Engineer
1320 Research Park Drive
Manhattan, Kansas 66502

Re: Application
File No. _____

Minimum Desirable Streamflow

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

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

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

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

Stuart John
Signature of Applicant

State of Kansas)
County of Dickinson) ss

Stuart John
(Print Applicant's Name)

I hereby certify that the foregoing instrument was signed in my presence and sworn to before me this 11 day of October, 2022.



Carla Hajek
Notary Public

My Commission Expires:

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**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

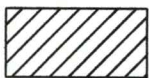
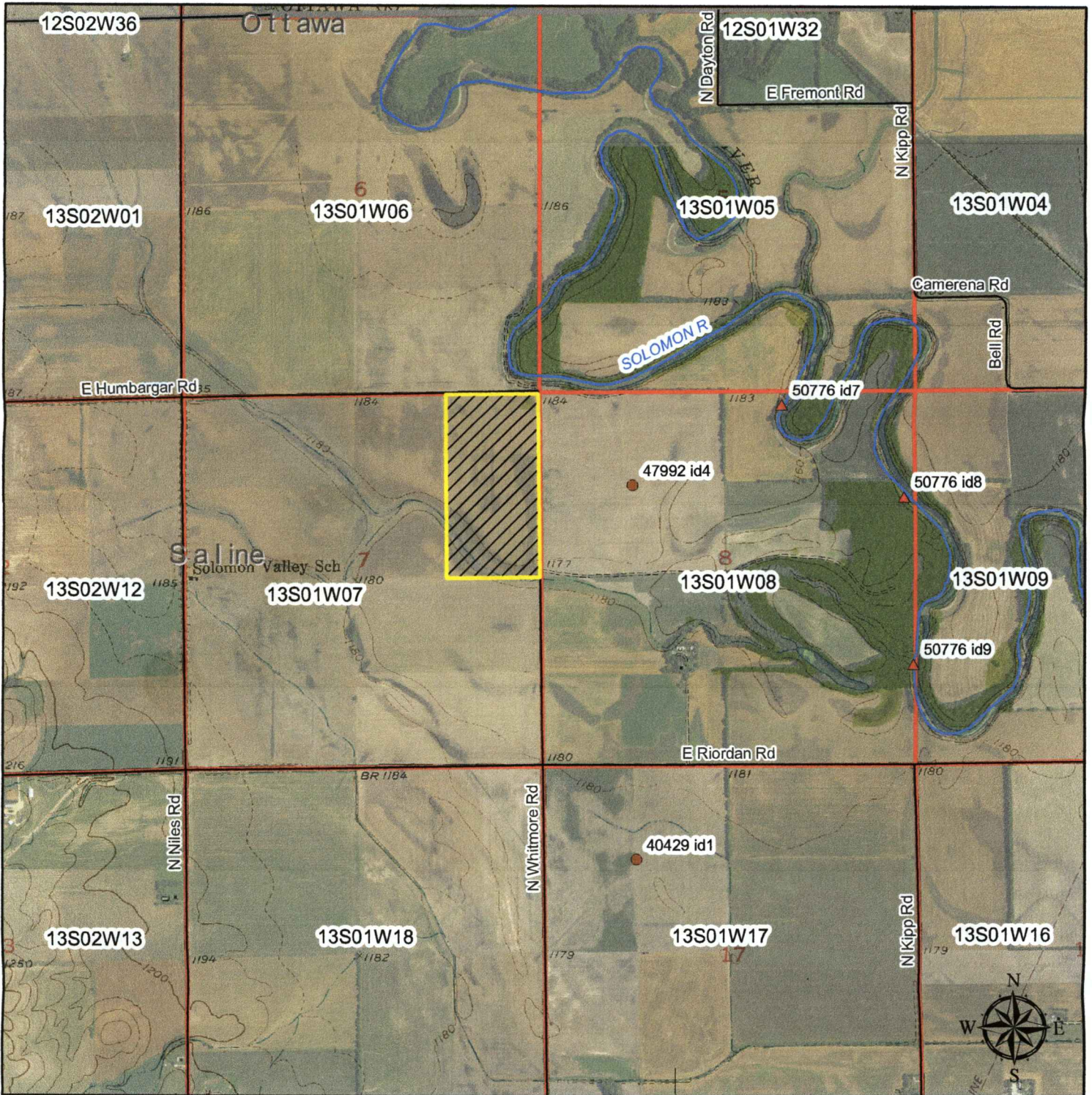
Ninnescah River
North Fork Ninnescah River
Rattlesnake Creek
Republican River
Saline River
Smoky Hill River
Solomon River
South Fork Ninnescah
Spring River
Walnut River
Whitewater River

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New Application - Groundwater



Proposed Place of Use

▲ Surface Water Point of Diversion

1:24,000

● Groundwater Point of Diversion



Proposed Test Hole Exploration Area

Signature Required

By signing this I am stating that to the best of my knowledge that all wells within 1/2 mile of proposed well location are identified on this map.

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IRRIGATION USE SUPPLEMENTAL SHEET

File No. _____

Name of Applicant (Please Print): STEVEN & SHERRY JOHNSON

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: STEVEN & SHERRY JOHNSON

ADDRESS: 1536 NAIL RD 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	
07	13S	01W	40			40													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	

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	

DATA ENTRY SYSTEM ID NUMBER SHEET

FILE NUMBER 50888

APPLICANT PERSON ID & SEQ #	PDIV ID	BATTERY ID
<u>66009</u>	<u>89867</u>	

LANDOWNER PERSON ID & SEQ #	PUSE ID
<u>66009</u>	<u>71091</u>

WATER USE CORRESPONDENT PERSON ID & SEQ #
<u>66009</u>