

Submit To:  
CHIEF ENGINEER  
Division of Water Resources  
Kansas Department of Agriculture  
109 SW 9<sup>th</sup> Street, 2nd Floor  
Topeka, KS 66612-1283

# APPLICATION FOR ESTABLISHMENT OF FLEX ACCOUNT AND A TERM PERMIT (Groundwater only)



STATE OF KANSAS

For Additional Info:  
phone: 785-296-3717  
[www.ksda.gov/dwr](http://www.ksda.gov/dwr)

Application must be filed on or before October 10<sup>th</sup>  
preceding the year in which this flex account will begin

**Statutory filing Fee of \$400.00 Must Accompany the Application  
(Make check payable to the Kansas Department of Agriculture)**

Term Permit File No. \_\_\_\_\_ (to be completed by DWR staff)

**PLEASE PRINT**

This application must be supplemented by either a topographic map or detailed plat. (A U.S. Geological Survey Topographic Map, scale 1:24,000, is available through the Kansas Geological Survey, 1930 Constant Avenue, University of Kansas, Lawrence, Kansas 66047-3726 or at <http://www.kgs.ku.edu/>.) The following information must be shown on the map and must agree with this application:

- Show the Section, Township, Range, and County. Show the center of the Section, Section lines, and corners.
- Show the location of the point(s) of diversion as described in Item 3a of this application. Show feet measurements North and West of the Southeast corner.
- Show the location of existing water wells of any kind within 1/2 mile of the point of diversion. Identify each well as to its use, and furnish name and mailing address of the owner(s). If there are no wells within 1/2 mile, advise this office.
- Show the authorized place of use by cross-hatching on the map.

1. Application is hereby made for approval of the Chief Engineer to establish a flex account for the point of diversion authorized under (water right must be certified):

Vested Right File No(s). \_\_\_\_\_  Water Right File No(s). \_\_\_\_\_

2. Name and address of applicant: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_

Name and address of water use correspondent: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_

Applicant's Social Security Number and/or Taxpayer I.D. No. \_\_\_\_\_ (Optional)

3. Type of diversion point claimed for this account:  well  groundwater pit  battery of \_\_\_\_\_ wells

3a. The authorized point of diversion claimed for this flex account is located as follows:

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. Currently authorized rate of diversion \_\_\_\_\_ g.p.m.

3b. More than one point of diversion may be claimed for this flex account, if all are metered through a single flow meter and share the identical place of use. Complete the following if applicable.

Additional point(s) of diversion to be claimed (is) (are) \_\_\_\_\_ (give number of points) located as follows:

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. Currently authorized rate of diversion \_\_\_\_\_ g.p.m. and

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. Currently authorized rate of diversion \_\_\_\_\_ g.p.m.  
(use additional sheets if necessary)

Assisted by \_\_\_\_\_

<b>For Office Use Only:</b>							
F.O. Code	GMD	Meets K.A.R. 5-3-1 (YES / NO)	Use	Source	G / S County	By	Date
			Fee \$	TR #	Receipt Date	Check #	

4. The owner of the point of diversion, if other than the applicant is (please print):

\_\_\_\_\_ (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

5. The authorized place of use under the water right(s) pertaining to this flex account is:

Owner of Land — NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

S	T	R	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	

Owner of Land — NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

S	T	R	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	

(If there are more than two landowners, attach additional sheets as necessary.)

6. If the water right(s) pertaining to this flex account authorize more than one type of use, specify the one type of use to be claimed (i.e. irrigation, industrial, etc.). \_\_\_\_\_

7. Calculate flex account allocation using procedures set forth below.

7a. Were physical improvements made to the distribution system or were changes made in management practices that improved efficiency and resulted in significant water conservation during any of the years 1992 - 2002?

No. Complete water use data in section 7b for the years 1992 - 2002.

Yes. Specify year improvements implemented \_\_\_\_\_. Complete section 7b by furnishing water use data for the eleven (11) year period immediately prior to this year (not to precede 1987). On a separate sheet of paper, describe specific improvements in system design, changes in the number of irrigated acres and improvements such as irrigation scheduling.



I declare that I am the owner of the authorized place of use as identified herein, or that I represent the same and am authorized to make this application in his or her behalf, and declare further that the statements contained herein are true, correct, and complete.

Dated at \_\_\_\_\_, Kansas, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

State of Kansas )  
 ) SS  
County of \_\_\_\_\_)

I hereby certify that the foregoing application was signed in my presence and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

**NOTE:** The application must be signed by each owner of the authorized place(s) of use covered by the water right. If married, the spouse must also sign. Please indicate if there is no spouse. If land is being purchased under contract, the seller must sign as landowner until such time as the contract is completed.

In the event that all applicants cannot appear before one notary public, they may as necessary sign separate copies of the application before any notary public conveniently available to them. All copies signed in this manner shall be considered to be valid parts of the application.

If the request is signed on behalf of any owner by someone with legal authority to do so (for example, an agent, one who has power of attorney, or an executor, executrix, conservator), it will be necessary to attach proper documents showing such authority.