

Submit To: CHIEF ENGINEER
 Division of Water Resources
 Kansas Department of Agriculture
 1320 Research Park Drive
 Manhattan, KS 66502-5000
<http://agriculture.ks.gov/dwr>

APPLICATION FOR TEMPORARY PERMIT

Groundwater Surface Water



State of Kansas

STATUTORY FILING FEE OF \$200.00 MUST ACCOMPANY THIS APPLICATION
 (Make check payable to the Kansas Department of Agriculture)

1. Applicant: (Please print or type)
 Name: _____
 Mailing Address: _____
 City and State: _____
 Zip Code: _____ Telephone No. (____) _____
 Email Address: _____

2. Location of Point of Diversion:
 Sec. _____, Twp. _____, Rng. _____, (E/W),
 _____ County, Kansas.

 Distance from Southeast Corner of Section:
 _____ feet North from Southeast Corner (FSL)
 _____ feet West from Southeast Corner (FEL)
 Existing well? Yes No
 Existing permit or water right? Yes No

 If yes, File No. _____

3. Water Use Data:
 Proposed Max. Pumping Rate (gpm) _____
 Amount Requested (gallons) _____
 (not to exceed four million gallons unless for dewatering)
 Depth of Well (feet) _____, **OR**
 Name of Stream _____

4. Water is to be used for (briefly describe proposed use):

Please note that K.A.R. 5-9-4 limits temporary permits to one (1) project per application.

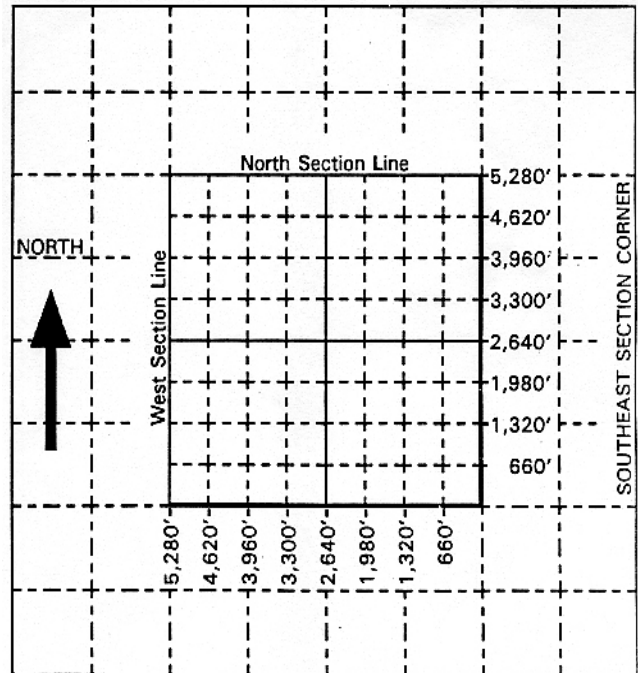
5. Location of Place of Use:
 Sec. _____, Twp. _____, Rng. _____, (E/W),
 Project name and description:

6. Period of Use (6 months maximum):
 Commencing Date: _____
 Ending Date: _____

7. Location of the proposed point of diversion shall be indicated on the diagram below. Use the center section.

If surface water, indicate on the diagram the course of the stream, and its name.

The scale of the diagram is 2 inches = 1 mile
 Each small square represents 10 acres



For Office Use Only:									
F.O. Code	GMD	Meets K.A.R. 5-9-1 (YES / NO)	Use	Source	G / S	County	By	Date	
	TMP	Fee \$ 200	TR #	Receipt Date		Check #			

