

WATER RIGHT TRANSITION ASSISTANCE PROGRAM

REQUEST TO REDUCE A PORTION OF AN EXISTING WATER RIGHT (NO FEE REQUIRED)

Identify the file which is the subject of this request:

- Vested Right, File No. _____
(CHECK ONE) Water Right, File No. _____

To: Chief Engineer
Division of Water Resources
Kansas Department of Agriculture
1320 Research Park Drive
Manhattan, Kansas 66502-5000

Assisted by: _____ Date: _____

From: (Names and addresses of owners of authorized place of use. Please see instructions on back.)

This request form is only valid to accompany an application being submitted for approval of a portion of a water right to be permanently reduced and retired under the Kansas Department of Agriculture, Division of Conservation Water Right Transition Assistance Program.

REQUEST

The above listed owners request a:

[Complete only the sections that apply. Check only the boxes that apply. Fill in only the blanks that apply.]

- A. REDUCTION IN AUTHORIZED MAXIMUM ANNUAL QUANTITY OF WATER.

It is requested that the maximum annual quantity of water be reduced to _____
(acre-feet or million gallons; circle one) per calendar year.

- B. REDUCTION IN AUTHORIZED MAXIMUM RATE OF DIVERSION OF WATER.

It is requested that the maximum rate of diversion of water be reduced to _____ gallons per minute
(____ c.f.s.).

- C. REDUCTION IN THE SIZE OF THE AUTHORIZED PLACE OF USE OF WATER.

(A reduction in place of use may result in a reduction of the authorized rate and quantity to reflect reasonable needs.)

It is requested that the authorized place of use be reduced to:

Owner of Land NAME: _____

ADDRESS: _____

IRRIGATION USE

Sec. Twp. Rng.	NE¼				NW¼				SW¼				SE¼				Total	
	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼		

OR

NON-IRRIGATION USE

Describe:

(If more space is needed, attach additional sheets as necessary.)

A copy of a topographic map is attached showing the place of use after the requested reduction.

D. REDUCTION IN THE NUMBER OF **POINTS OF DIVERSION** AUTHORIZED.

(A reduction in the point(s) of diversion may result in the reduction of the rate and quantity authorized by the amounts associated with those points of diversion.)

It is requested that the number of authorized points of diversion be reduced to:

_____ located as follows:
 (No. of points of diversion) (wells, pumps, or other works for diversion of water)

One in the _____ quarter of the _____ quarter of the _____ quarter of Section _____, also described as _____ feet North and _____ feet West of the southeast corner of said section, Township _____ South, Range _____, in _____ County, Kansas, and

One in the _____ quarter of the _____ quarter of the _____ quarter of Section _____, also described as _____ feet North and _____ feet West of the southeast corner of said section, Township _____ South, Range _____, in _____ County, Kansas.

(If more space is needed, attach additional sheets as necessary.)

A copy of a topographic map is attached, showing the location of the remaining point(s) of diversion after the requested reduction.

ATTENTION: Kansas law requires that a well authorized by a water right approved for permanent retirement under WTAP must be properly capped, plugged, or reconstructed to domestic use according to the rules and regulations of the Kansas Department of Health and Environment.

E. REDUCTION IN THE **TYPES OF BENEFICIAL USE** AUTHORIZED.

It is requested that the types of beneficial use of water be reduced to: _____.

I, the undersigned owner of this water right or permit declare that: (1) I am freely and voluntarily choosing to reduce the water right listed; and (2) I am waiving any rights to a hearing or an appeal that I may have had regarding the reduction of the water right listed.

I declare that I am an owner, as identified herein, or that I represent an owner, as identified herein, and am authorized to make this request on his or her behalf.

Dated at _____, Kansas, this _____ day of _____, _____.
(City) (Month) (Year)

(Owner)

(Spouse)

(Owner)

(Spouse)

(Owner)

(Spouse)

(Owner)

(Spouse)

or

(Signature of Authorized Agent and Legal Capacity – i.e. Trustee, President)

(Print Name and Legal Entity Represented – i.e. Trust, Corporation, Partnership)

State of Kansas)
County of _____) ss

I hereby certify that the foregoing application was signed in my presence and sworn to before me this _____ day of _____, _____.
(Month) (Year)

Notary Public

My Commission Expires _____

For Division of Conservation Use Only

I, _____, as the program administrator, acknowledge that the subject water right is eligible for acceptance into the Water Right Transition Assistance Program and will be forwarded to the Chief Engineer for reduction upon final approval of the grant application.

Signed and dated this _____ day of _____, 20_____.

Signature of Program Administrator _____

INSTRUCTIONS:

The request must be signed by each owner of the place of use authorized by the water right or permit and his or her spouse, if married. All water right or permit owners, including spouses, must sign this request for it to be valid. Unless the water right or permit has been legally severed from the authorized place of use, the owners of the water right or permit are the owners of the authorized place of use. Please indicate if there is no spouse. If land is being purchased under contract, the seller must sign as owner until such time as the contract is completed.

In the event that all owners cannot sign together in front of one notary public, they may, as necessary, sign appropriate copies of the request in front of any notary public conveniently available to them. All copies signed in this manner shall be accepted as valid parts of the request.

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.