

GMD1 Water Conservation Fund

2019 Automated Soil Probe Cost-Share Application

- All applicants must be within GMD 1 boundaries
- Applications awarded on 1st come 1st serve basis
- Priority given to Applicants enrolled in an Approved Water Conservation Area (WCA)
- WCA applicants – up to \$1500 for 1st probe; \$1000 per additional probes, as funds allow
- Non-WCA applicants – up to \$1000 per probe, as funds allow
- Applicants may apply for multiple Probes (with the exception of previously approved locations)
- Limit – 1 Probe per QTR.
- GMD 1 Board of Directors have final approval for all applications
- Applications will be accepted via mail, email, fax or in person
- Application period – November 1, 2018 – May 31, 2019 @ 5pm. If funds remain after the 1st application period a second application period may be established.

1. Applicant: (Print or type)

Name _____ Address _____
City & State _____ Zip Code _____ Phone _____
E-Mail _____ Landowner ___ Tenant ___ WCA Participant _____

2. Land Location where Soil Probe will be installed:

QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

3. Brand of Soil Probe (If Known) _____

4. IF applying for Multiple Probes: Number of Probes _____

Provide additional Land Locations on supplemental page 2.

Approved Applicant agrees an automated soil probe to be installed at the location(s) indicated on this application. Payment will be made to Vendor upon receipt of invoice at the District Office. Invoices must be submitted by 12/31/2019. Data collected from these probes to be available to WKGMD1 upon request.

Signature _____ Date _____

WKGMD1
Phone 620-872-5563:

P.O. Box 604

906 W. 5th
Fax 620-872-7315:

Scott City, KS. 67871:
E-mail: admin@wbsnet.org

Supplemental Page 2: Land Locations of Probes

- 1. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

- 2. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

- 3. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

- 4. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

- 5. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

- 6. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

- 7. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

- 8. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

- 9. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

- 10. QTR. ____ Sec. ____ TWP. ____ RG. ____ County _____ KS. Water Right # _____

Must accompany Page 1 of Application:

Print Name: _____ Date: _____

Signature: _____