

CHECK SHEET Short Change

(To be completed and attached to each application)

File No. 23650

Field Office No. 4

GMD No. 3

1. **Plugging agreement obtained for GMD?** Yes No Non Applicable
2. **Is Landowner correct as currently shown in WRIS?** Yes No **Address Change?** NO
If applicable, list Place of Use Overlap File Nos. _____
3. **Is Water Use Correspondent correct as currently shown in WRIS?** Yes No **Address Change?** NO
Name of Former WUC _____ Name of New WUC _____
4. a. **Point of diversion computer ID No(s).** 8 **for point(s) being changed.**
- b. **Show feet distances from the** SE **corner of the section for the new point(s) of diversion:**

Action	PDIV ID	Geo Ctr?	Sec	Twp	Rng	'N	'W	County	Qualifiers
ENT	15608		22	27	34w	1300	4290	Haskell	NESWSW
DEL	84879								

c. **If multiple points of diversion exist and rates and quantities are individually assigned, show:**

Old PDIV ID	Authorized Rate	Additional Rate	Authorized Quantity	Additional Quantity
_____	_____ gpm	_____ gpm	_____ af	_____ af
_____	_____ gpm/cfs	_____ gpm/cfs	_____ af/mgy	_____ af/mgy
_____	_____ gpm/cfs	_____ gpm/cfs	_____ af/mgy	_____ af/mgy

- d. **Name of Drainage Basin** arkansas **Is this correctly shown in WRIS?** Yes No
- e. **Formation Name & No.** 211 oglala **Special Use Area** na

5. **Distances from the original p/d:** _____ 127 ' N _____ 40 ' W

6. WATER RIGHT ACTION TRAIL COMMENTS

11/18/16 Change Application Received (date accepted for priority)
12/29/16 Change Approved
 Notice and Proof by 12/31/17
12/29/16 Completion Requirement Removed (Change No. C 1)

7. METER ACTION TRAIL COMMENTS

12/29/16 DWR Meter Required by 12/31/17

8. Base Acres _____ Year _____ Minimum Reasonable Quantity _____

Date Created **11/22/16** by **tpm**

Date Entered _____ by _____

CHECK SHEET ATTACHMENT

9. Changes to the place of use will be:

File Number 23650

Action	Owner Person ID	Place Use ID #	Sec. Twp. Range		NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
					NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
NO CHG				Acres Authorized																	
				New Acres																	
				Acres Authorized																	
				New Acres																	
				Acres Authorized																	
				New Acres																	
				Acres Authorized																	
				New Acres																	

Names and Address:

1. Person ID # _____	2. Person ID # _____	3. Person ID # _____

GENERAL INSTRUCTIONS

- | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>1. Give to Applicant:</p> <ul style="list-style-type: none"> a. <u>Original</u> application/approval b. Original receipt (one for <u>each</u> application) c. Information packet containing: <ul style="list-style-type: none"> ● Notice and Proof form ● Water Meter Specifications ● Acceptable Meter list ● Water level measurement tube specifications ● Check Valve specifications ● Pink Sheet - K.S.A. 82a-728 letter ● Form stating to record in Register of Deeds Office (OPTIONAL AS NEEDED) | <p>2. Send to headquarters:</p> <ul style="list-style-type: none"> a. Good, microfilmable copy of application and/or approval and this check sheet b. Original check and copy of receipt c. Test hole log d. GMD recommendation, if any e. Map or aerial photograph, if any <p>3. Send to KDHE: Letter (KDHE.LT) advising of location of abandoned well. <input type="checkbox"/></p> <p align="center"><u>CONDITIONS</u></p> <ul style="list-style-type: none"> 1. Insert notice and proof date. 2. Type or print applicant's/owner's name on line. 3. Complete notary statement. | <p>4. Date stamp received and approved.</p> <p>5. Complete ownership and WUC change information.</p> <p><u>ADDITIONAL PHOTOCOPIES</u></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> |
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Garden City Field Office
2508 Johns Street
Garden City, Kansas 67846-2804
Jackie McClaskey, Secretary
David W. Barfield, Chief Engineer
Michael A. Meyer, Water Commissioner

Phone: (620) 276-2901
Fax: (620) 276-9315
www.agriculture.ks.gov
Sam Brownback, Governor

December 29, 2016

DESERET CATTLE FEEDERS LLC
ARMANDO CABALLERO GM
521 RD 50
SATANTA KS 67870

RE: Application to Change the Point of Diversion
Water Right, File No. 23650

Dear Sir:

Enclosed is an order executed by the designee of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, approving the application for change under the above referenced file number.

Your attention is directed to the enclosures and to the terms, conditions, and limitations specified in this approval for change. A condition of this approval is that an acceptable water flow meter must be installed on the diversion works authorized under the referenced file number and meet current specifications. Please return the required notification of completion of the diversion works and installation of the required meter as soon as these actions are completed.

Since this order modifies the original documents referred to above, it should be recorded with the Register of Deeds as other instruments affecting real estate. Please also submit a copy of the current ownership deed to have our records changed.

The abandoned well must be plugged in accordance with the requirements of Article 30 of the Rules and Regulations as adopted by the Kansas Department of Health and Environment.

Should you have any questions, please feel free to call this office. If you would prefer, you could arrange an appointment for additional assistance.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael A. Meyer". The signature is written in a cursive style with a long, sweeping underline.

Michael A. Meyer
Water Commissioner

MAM:
enclosures
pc: Groundwater Management District No. 3

Submit completed application to:
 Kansas Department of Agriculture
 Division of Water Resources
 Field Office for your area.

Call for address:

Topeka -- (785) 296-5733
 Stafford -- (620) 234-5311
 Stockton -- (785) 425-6787
 Garden City -- (620) 276-2901
<http://agriculture.ks.gov/dwr>

DWR FIELD OFFICE APPLICATION FOR APPROVAL TO CHANGE THE PLACE OF USE AND/OR THE POINT OF DIVERSION



STATE OF KANSAS

Filing Fee Must Accompany the Application, K.S.A. 82a-708b(b), as amended.
 Fee Schedule is on the third page of this application form.

Paragraph Nos. 1, 2, 3 & 5 must be completed. Complete all other applicable portions. If change in point of diversion is greater than 100 feet, or if place of use will be changed, include a topographic map or detailed plat showing the authorized and proposed point(s) of diversion and/or place of use.

RECEIVED
 3:31pm
 NOV 18 2016

 File No. 23650

1. Application is hereby made for approval of the Chief Engineer to change the (check one or both): Garden City Field Office
Division of Water Resources

Place of Use Point of Diversion

under the water right which is the subject of this application in accordance with the conditions described below.

The source of supply is: Groundwater Surface water

2. Name and address of Applicant: DESERET CATTLE FEEDERS LLC
521 RD 50 SATANTA KS 67870

Phone Number: () _____ Email address: _____

Name and address of Water Use Correspondent: DESERET CATTLE FEEDERS LLC
521 RD 50 SATANTA KS 67870

Phone Number: () _____ Email address: _____

3. The presently authorized place of use is:
 Owner of Land ---- NAME: DESERET CATTLE FEEDERS LLC
 ADDRESS: 521 RD 50 SATANTA KS 67870

(If there is more than one landowner, attach supplemental sheets as necessary.)

Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES		
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼			

4. If this application is for a change in place of use, it is proposed that the place of use be changed to:
 Owner of Land ---- NAME: no change in acres
 ADDRESS: _____

(If there is more than one landowner, attach supplemental sheets as necessary.)

Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES			
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼				

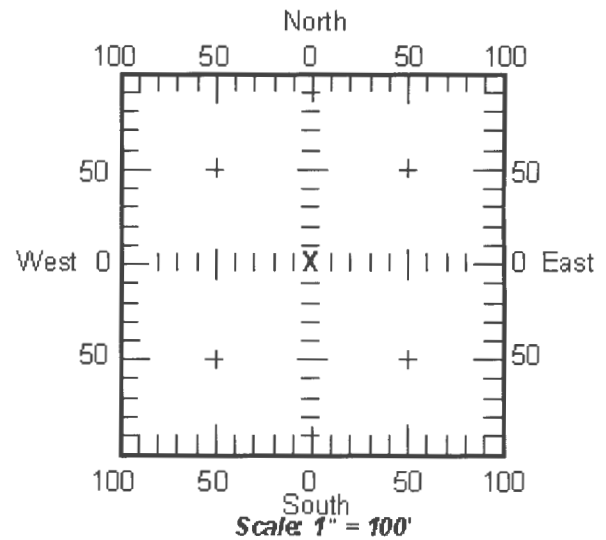
For Office Use Only: Code _____ Fee \$ <u>100</u> TR # _____ Receipt Date <u>11/18/16</u> Check # <u>8380</u>

5. **Presently authorized point of diversion:**
 One in the NE Quarter of the SW Quarter of the SW Quarter of Section 22, Township 27 South, Range 34 W, in Haskell County, Kansas, 1173 feet North 4250 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
 (DWR use only: Computer ID No. 08 GPS _____ feet North _____ feet West)
 This point will not be changed This point will be changed as follows:
Proposed point of diversion: (Complete only if change is requested)
 One in the NE Quarter of the SW Quarter of the SW Quarter of Section 22, Township 27 South, Range 34 W, in Haskell County, Kansas, 1300 feet North 4290 feet West of Southeast corner of section.
 Proposed Rate _____ Proposed Quantity _____ Proposed well depth (feet) _____
 This point is: Additional Well Geo Center List other water rights that will use this point _____

6. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter of Section _____, Township _____ South, Range _____ (E/W), in _____ County, Kansas, _____ feet North _____ feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
 (DWR use only: Computer ID No. _____ GPS _____ feet North _____ feet West)
 This point will not be changed This point will be changed as follows:
Proposed point of diversion: (Complete only if change is requested)
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter of Section _____, Township _____ South, Range _____ (E/W), in _____ County, Kansas, _____ feet North _____ feet West of Southeast corner of section.
 Proposed Rate _____ Proposed Quantity _____ Proposed well depth (feet) _____
 This point is: Additional Well Geo Center List other water rights that will use this point _____

7. Why do you need a new point of diversion? _____
Well move authorized in 2015 was not completed. This application proposes to revert to previous location.
8. If a well, is the test hole log attached? Yes No
9. When do you propose to complete the new point of diversion?
Upon approval by DWR; this is an existing well.
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?
Use as a domestic well to serve a rural fire station.
 (b) When will this be done? 2017
11. Groundwater Management District recommendation attached? Yes No
12. Assisted by tpm

13a. If the proposed point of diversion will be relocated within 100 feet of the existing point of diversion, indicate its location on the diagram below in relation to the existing point of diversion. (PLEASE NOTE: The "X" in center of diagram below represents presently authorized point of diversion.)



13b. If the proposed point of diversion will be relocated more than 100 feet but within 1320 feet from the existing point of diversion, attach a topographic map or aerial photograph. For groundwater sources, show all wells (including domestic) within one-half mile of the proposed point of diversion and the names and mailing addresses of the owners. For surface water sources, show the names and addresses of the landowner(s) one-half mile downstream and one-half mile upstream from your property lines.

14. If the proposed groundwater point of diversion is 300 or fewer feet from existing point of diversion, complete the following:
- (a) Does the undersigned represent all owners of the currently authorized place(s) of use identified in this application?
 Yes No (If no, all owners must sign this application.)
 - (b) Will the ownership interest of any owner of the currently authorized place(s) of use identified in this application be adversely affected if this application is approved as requested?
 Yes No (If yes, all owners must sign this application.)
 - (c) If this application is not approved expeditiously, will there be substantial damage to property, public health or safety?
 Yes No (If no, all owners must sign this application.)

If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized statement authorizing representation).

I hereby verify, being first duly sworn upon my oath or affirmation and under penalty of perjury, that I am of lawful age and the owner, the spouse of the owner, or a duly authorized agent of the owner(s) to make this application on their behalf, in regard to the water right(s) to which this application pertains. I further verify that the statements contained in this application are true, correct and complete.

Dated at Sawata, Kansas, this 15th day of November, 2016.

<p><u>[Signature]</u> (Owner) <u>General Manager</u> <u>Armando Caballero, Manager, Deseret Cattle Feeders LLC</u> (Please Print)</p>	<p>_____ (Spouse)</p>
<p>_____ (Owner)</p>	<p>_____ (Spouse)</p>
<p>_____ (Please Print)</p>	<p>_____ (Please Print)</p>
<p>_____ (Owner)</p>	<p>_____ (Spouse)</p>
<p>_____ (Please Print)</p>	<p>_____ (Please Print)</p>

State of Kansas }
 County of Haskell } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 15th day of November, 2016.

My Commission Expires 6/20/2020

[Signature]
 Notary Public

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, all of the applicable portions of the application form must be completed with accurate information; maps, if necessary, must be included; signatures of all the appropriate owners' must be affixed to the application and notarized; and the appropriate fee must be paid.

FEE SCHEDULE

Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

(1) Application to change a point of diversion 300 feet or less	\$100
(2) Application to change a point of diversion more than 300 feet	\$200
(3) Application to change the place of use	\$200

