

Kansas Department of Agriculture
 Division of Water Resources
CHANGE: P/U WORKSHEET

1. File Number: 1108	2. Status Change Date: <u>1/17/18</u>	3. Change Num: C1	4. Field Office: 04	5. GMD: 03
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6. Status: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied by DWR/GMD <input type="checkbox"/> Dismiss by Request/Failure to Return	7. Filing Date of Change: 12/13/17
--	--

8a. Applicant(s) New to system <input type="checkbox"/>	Person ID <u>51617</u> Add Seq# <u>1</u>
MICHAEL S STANDLEY 14550 N VFW RD GARDEN CITY KS 67846-9237	

8c. Landowner(s) New to system <input type="checkbox"/>	Person ID <u>36508</u> Add Seq# <u>1</u>
BARBARA J STANDLEY 1101 MOCKINGBIRD LN GARDEN CITY KS 67846	

8b. Landowner(s) New to system <input type="checkbox"/>	Person ID <u>23481</u> Add Seq# <u>1</u>
JOHN S STANDLEY 1101 MOCKINGBIRD LN GARDEN CITY KS 67846	

8d. WUC New to system <input type="checkbox"/>	Person ID <u>23481</u> Add Seq# <u>1</u>
JOHN S STANDLEY 1101 MOCKINGBIRD LN GARDEN CITY KS 67846	

9. Documents and Enclosure(s): <input type="checkbox"/> DWR Meter(s) Date to Comply: <u>12/31/18</u> <input type="checkbox"/> N & P Date to Comply: _____	
<input type="checkbox"/> Anti-Reverse Meter <input type="checkbox"/> Meter Seal <input checked="" type="checkbox"/> Check Valve <input type="checkbox"/> N & P Form <input type="checkbox"/> Water Tube <input type="checkbox"/> Driller Copy <input type="checkbox"/> H & E Letter	
<input type="checkbox"/> Conservation Plan Date Required: _____ Date Approved: <u>1/17/18</u> Date to Comply: <u>12/31/18</u>	

10. Use Made of Water From: _____	To: _____
--------------------------------------	-----------

Date Prepared: 1/11/18	By: TPM
Date Entered: _____	By: _____

File No. 1108	11. County: FI	Basin: arkansas	Stream:	Formation Code:	Special Use:																																																																																																										
<p>12. Points of Diversion</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">CHK MOD DEL ENT</th> <th rowspan="2">Qualifier</th> <th rowspan="2">S</th> <th rowspan="2">T</th> <th rowspan="2">R</th> <th rowspan="2">ID</th> <th rowspan="2">'N</th> <th rowspan="2">'W</th> <th colspan="2">Comment (AKA Line)</th> <th colspan="2">Rate and Quantity</th> <th colspan="2">Additional</th> </tr> <tr> <th>Rate gpm/cfs</th> <th>Quantity af/mgy</th> <th>Rate gpm/cfs</th> <th>Quantity af/mgy</th> <th>Rate gpm/cfs</th> <th>Quantity af/mgy</th> <th>Overlap PD Files</th> </tr> </thead> <tbody> <tr> <td>PDIV</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>ENT</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						CHK MOD DEL ENT	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)		Rate and Quantity		Additional		Rate gpm/cfs	Quantity af/mgy	Rate gpm/cfs	Quantity af/mgy	Rate gpm/cfs	Quantity af/mgy	Overlap PD Files	PDIV														ENT																																																																						
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<p>13. Storage: Rate _____ NF _____ Quantity _____ ac/ft Additional Rate _____ ac/ft Additional Quantity _____ ac/ft</p>																																																																																																															
<p>14. Limitation: _____ af/yr at _____ gpm (_____ cfs) when combined with file number(s) _____ Limitation: _____ af/yr at _____ gpm (_____ cfs) when combined with file number(s) _____</p>																																																																																																															
<p>15. 5YR Allocation: Allocation Type _____ Start Year _____ 5 YR Amount _____ Amount Unit _____ Base Acres _____ Comment _____</p>																																																																																																															
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<p>Base Acres: _____ Year: _____ Minimum Reasonable Quantity: _____</p>																																																																																																															
<p>Comments: _____</p>																																																																																																															


Kansas
Department of Agriculture
Division of Water Resources

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

January 17, 2018

MICHAEL S STANDLEY
14550 N VFW RD
GARDEN CITY KS 67846-9237

RE: Change the Place of Use, File Nos File 1108,
3893, 8056

Dear Mr. Standley;

Enclosed you will find a *Summary Order Approving Application for Change in Place of Use* for the above referenced files. Since these orders modify the original documents, it should be recorded at the County Register of Deeds.

These orders modify the authorized acres that can be irrigated by these files. The authorized place of use is as shown on the plats within the change approvals.

A condition of this order is that an acceptable flow meter must be properly installed on the diversion works authorized under the referenced file number in accordance with the Kansas Administrative Regulations 5-1-4 through 5-1-12. This water flow meter shall be used to provide information required on the annual water use report (including the meter reading at the beginning and end of the report year).

This order shall become final if a request for a hearing is not filed with the Chief Engineer within 15 days of the date of service of this order. The date of service is the date listed on the enclosed *Certificate of Service*.

Should you have any questions, please feel free to call this office or arrange an appointment for additional assistance. Please refer to the file number when you contact us if you wish to discuss a specific file.

Sincerely,



Thomas P. Makens
Assistant Water Commissioner

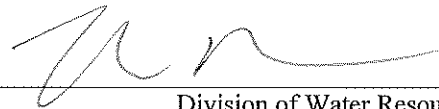
TPM:tpm
Enclosures
GMD#3

CERTIFICATE OF SERVICE

On this 19th day of January 2018, I hereby certify that the attached original Approval of Application to Change the Place of Use under Water Right File 1108, 3893, 8056 dated January 17, 2018, was mailed postage prepaid, first class, US mail to the following:

MICHAEL S STANDLEY
14550 N VFW RD
GARDEN CITY KS 67846-9237

Copy provided to GMD#3

A handwritten signature in black ink, appearing to be 'J. N.', written over a horizontal line.

Division of Water Resources

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
 11:16 AM
 DEC 13 2017

File No. 1108

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: MIKE STANDLEY
14550 N VFW RD GARDEN CITY KS 67846-9237
 Phone Number: (620)260--6354 Email address: _____
 Name and address of Water Use Correspondent: JOHN S STANDLEY
1101 MOCKINGBIRD LN GARDEN CITY KS 67846
 Phone Number: () _____ Email address: _____

3. The presently authorized place of use is:
 Owner of Land ---- NAME: BARBARA J STANDLEY
ADDRESS: 1101 MOCKINGBIRD LN GARDEN CITY KS 67846
 (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	
25	22	33w			20														20

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: BARBARA J STANDLEY
ADDRESS: 1101 MOCKINGBIRD LN GARDEN CITY KS 67846
 (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	
25	22	33w	36	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	400
																			476

For Office Use Only: Code _____ Fee \$ 200 TR # _____ Receipt Date 12/13/17 Check # 4505

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter
 of Section _____, Township _____ South, Range _____
 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 _____
 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 _____

RECEIVED
 DEC 13 2017
 Gardner Water Resources
 District
 Range City Field Office

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? _____
 no change to water wells

8. If a well, is the test hole log attached? Yes No

9. When do you propose to complete the new point of diversion?

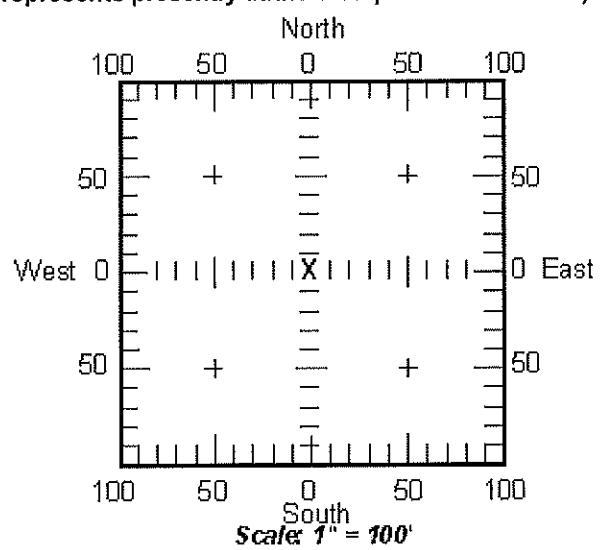
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached? Yes No

12. Assisted by tpm / AZ

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.

APPLICATION FOR APPROVAL TO CHANGE
THE PLACE OF USE AND/OR POINT OF DIVERSION
SUPPLEMENTAL SHEET
FILE NO. 1108
MAKE ADDITIONAL COPIES AS NECESSARY

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DEC 13 2017

Garden City Field Office
Division of Water Resources

3. *Continued:* The presently authorized place of use is:

Owner of Land ---- NAME: _____
ADDRESS: _____

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	

Owner of Land ---- NAME: JOHN S STANDLEY
ADDRESS: 1101 MOCKINGBIRD LN GARDEN CITY KS 67846

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	
25	22	33w									40	40	40	40					160

Owner of Land ---- NAME: _____
ADDRESS: _____

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. *Continued:* 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: _____
ADDRESS: _____

Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
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25	22	33w									40	40	40	40					160

Owner of Land ---- NAME: _____
ADDRESS: _____

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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.)

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Garden City Field Office
Division of Water Resources

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 Garden City, Kansas, this 12th day of December, 20 17.

Connie Hobstad
(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas }
County of Finney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 12th day of December, 20 17.



My Commission Expires _____

Julie Jones
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
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Dated at Garden City, Kansas, this 11th day of December, 2017.

[Signature]

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas

County of Finney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 11th day of December, 2017.



[Signature]

Notary Public

My Commission Expires

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Dated at Garden City, Kansas, this 13th day of December, 2017.

x Barbara A. Goss
 (Owner)

Barbara A. Goss
 (Please Print)

 (Owner)

 (Please Print)

 (Owner)

 (Please Print)

Larry W. Goss
 (Spouse)

Larry W. Goss
 (Please Print)

 (Spouse)

 (Please Print)

 (Spouse)

 (Please Print)

State of Kansas }
County of Finney } SS

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

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.)

RECEIVED
DEC 13 2017
 Garden City Field Office
 Division of Water Resources

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 Garden City, Kansas, this 18th day of September, 2017.

<p><u><i>John A. Stewell</i></u> (Owner)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Owner)</p> <p>_____ (Please Print)</p> <p>_____ (Owner)</p> <p>_____ (Please Print)</p>	<p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p>
---	---

State of Kansas }
 County of Finney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 18th day of September, 2017.



Julie Jones
 Notary Public

My Commission Expires _____

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

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Dated at Garden City, Kansas, this 18th day of September, 2017.

Barbara J Standley

 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

State of Kansas }
 County of Firmey } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 18th day of September, 2017.



Sue Keeny

 Notary Public

My Commission Expires _____

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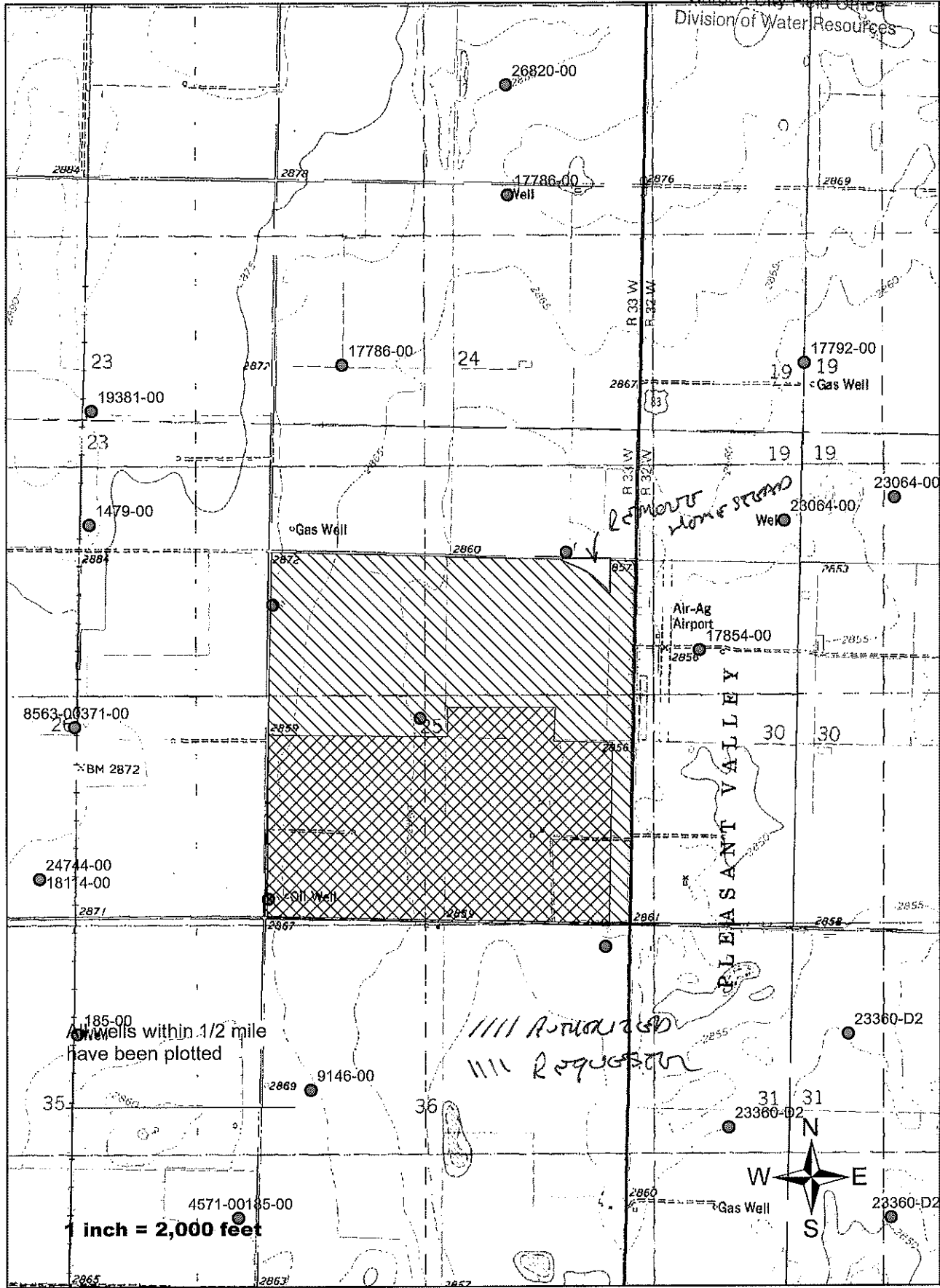
- (1) Application to change a point of diversion 300 feet or less \$100
- (2) Application to change a point of diversion more than 300 feet \$200
- (3) Application to change the place of use \$200

1108

RECEIVED

DEC 13 2017

Garden City Field Office
Division of Water Resources



All wells within 1/2 mile
have been plotted

1 inch = 2,000 feet

REMOVED HOME STAND
Requestor





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 20, 2017

Southwest Kansas Groundwater
Management District No 3
409 Campus Drive, Suite 106
Garden City KS 67846

Re: Water Right file number 1108, 3893, 8056.

Dear Mr. Norquest;

Mike Standley has applied to alter the acres authorized to divide his interests from the Goss family and then enroll in a wca.

We are delaying action for 15 days on the change application to allow you time to review and provide a recommendation if you feel one is warranted. I have enclosed a copy of the change for your perusal.

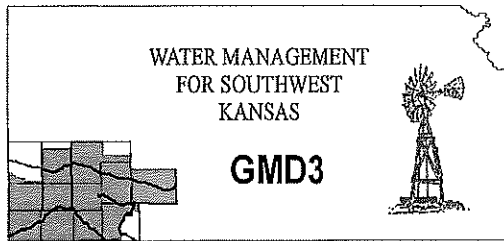
Thank you and as always feel free to call or write us at any time.

Sincerely;

A handwritten signature in black ink, appearing to read "Thomas P Makens". The signature is stylized with a long horizontal stroke at the end.

Thomas P Makens

encs.



Southwest Kansas
Groundwater Management District No. 3
2009 E. Spruce Street
Garden City, Kansas 67846
(620) 275-7147 phone (620) 275-1431 fax
www.gmd3.org

January 10, 2018

Thomas P. Makens
Division of Water Resources
2508 N Johns Street
Garden City, Kansas 67846

RECEIVED

JAN 10 2018

Garden City Field Office
Division of Water Resources

RE: Applications for Change in Place of Use
Water Rights, File Nos. 1108, 3893 & 8056

Dear Thomas:

We have completed a review of the applications for the above referenced water rights. The proposals are not in conflict with the Management Program of the Southwest Kansas Groundwater Management District No. 3 (GMD3). The proposed change in place of use, to separate existing partial overlaps and ownership, is in accordance with K.A.R. 5-5-11. It is therefore recommended that the application be approved at this time.

Thank you for the opportunity to review the applications and to provide a recommendation. If you have any questions, please don't hesitate to contact us.

Sincerely,

Jason L. Norquest
Assistant Manager