STATE OF KANSAS

DEPARTMENT OF AGRICULTURE DIVISION OF WATER RESOURCES GARDEN CITY FIELD OFFICE 2508 JOHNS STREET GARDEN CITY, KS 67846-2804



Phone: (620) 276-2901 Fax: (620) 276-9315 www.agriculture.ks.gov

GOVERNOR JEFF COLYER, M.D. JACKIE McClaskey, Secretary of Agriculture

April 18, 2018

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

Re: Water Right file number 2955 7661 12343 22520

Dear Mr. Norquest;

The Hamm Estate has applied to alter the acres authorized to add a pivot location. The base acres are 750. There are three neighboring wells all belong to the same owner.

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;

Thomas P Makens

encs.

STATE OF KANSAS

DEPARTMENT OF AGRICULTURE 1320 RESEARCH PARK DRIVE MANHATTAN, KS 66502 PHONE: (785) 564-6700 FAX: (785) 564-6777



900 SW Jackson, Room 456 Topeka, KS 66612 Phone: (785) 296-3556 www.agriculture.ks.gov

March 29, 2018

JAMES A HUSH PO BOX 458 PLAINS KS 67869

RE: Water Right file no. 2955 7661 12343 22520

This is to advise you that the Hamm Estate has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the place of use under the above referenced application.

You are notified on this proposed change in place of use so that you may furnish this office with any comments or other information you may want to submit.

You can find the complete application posted by water right file number as referenced above at www.agriculture.ks.gov/divisions-programs/dwr/water-appropriation/notices Should you have any questions, please feel free to call this office. If you would prefer, an appointment could be arranged 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

Environmental Scientist III

pc: GMD#3

STATE OF KANSAS

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March 29, 2018

DOUGLAS B FOX PO BOX 235 PLAINS KS 67869

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Sincerely,

Thomas P. Makens

Environmental Scientist III

pc: GMD#3

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

Topeka -- (785) 862-6300 Stafford -- (620) 234-5311 Stockton -- (785) 426-6787 Garden City -- (620) 276-2901 www.ksda.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.

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5. [Presently authorized point of diversion:			
	One in the Quarter of the			
	of Section, Township		South, Range	W,
	In County, Kansas, feet i	Nor	rth feet West of Southeast corner of se	ction.
	Authorized Rate Authorized Quantity		Depth of well(feet)	
	Authorized Rate Authorized Quantity (DWR use only: Computer ID No GPS		feet Northfeet West)	
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	Proposed point of diversion: (Complete only if change is re		1140 48 6 000	
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	One in the Quarter of the of Section, Township in County, Kansas,feet i		South, Range Garden City Field Office	W.
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	This point is: Additional Well Geo Center List other wa			
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	of Section, Township			
	in County, Kansas, feet I	No	irth feet Meet of Southeast corner of se	ction
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	This point is: Additional Well Geo Center List other wa			
7.	Why do you need a new point of diversion?13 no change to water wells	3a.	If the proposed point of diversion will be relocated w feet of the existing point of diversion, indicate its loc the diagram below in relation to the existing point of d (PLEASE NOTE: The "X" in center of diagram represents presently authorized point of diversion North	cation on liversion. n below
В.	If a well, is the test hole log attached? Yes No		100 50 0 50 100	
Э.	When do you propose to complete the new point of diversion?		50 + = + = 50	,
10	If the point of diversion is a well:			
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	(a) What are you going to do with the old well?		F = 7	
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	(b) When will this be done?			
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11.	Groundwater Management District recommendation		100 50 _0 50 100	
	attached?		South Scale: 1" = 100'	
		3h	If the proposed point of diversion will be relocated m	ore then
12.	Assisted by tpm	ວນ.	100 feet but within 1320 feet from the existing diversion, attach a topographic map or aerial phore for groundwater sources, show all wells (including d within one-half mile of the proposed point of diversion names and mailing addresses of the owners. For water sources, show the names and addresses landowner(s) one-half mile downstream and one-lupstream from your property lines.	point of tograph. comestic) and the surface of the

RECEIVED

APPLICATION FOR APPROVAL TO CHANGE THE PLACE OF USE AND/OR POINT OF DIVERSION SUPPLEMENTAL SHEET

FILE NO. 22520

MAKE ADDITIONAL COPIES AS NECESSARY

MAR 2 9 2018

Garden City Field Office

File No.

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DWR 1-121-2 (Rev. 01/23/2008)

APPLICATION FOR APPROVAL TO CHANGE THE PLACE OF USE AND/OR POINT OF DIVERSION SUPPLEMENTAL SHEET

FILE NO. 22520

RECEIVED

MAR 2 9 2018

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	rom existing point of diversion, complete the following:
(a) Does the undersigned represent all owners of the currently aut ☐ Yes ☐ No (If no, all owners must sign this app	norized place(s) of use identified in this application? ication.)
 (b) Will the ownership interest of any owner of the currently authority affected if this application is approved as requested? Yes No Yes, all owners must sign this approved. 	
(c) If this application is not approved expeditiously, will there be su ☐ Yes ☐ No (If no, all owners must sign this app	bstantial damáge to přóperty; คือปเต ฟซล์tหิ or safety? ication.)
If the application proposes a surface water change in point of diversion, or a change in place of use, the application must be signed by all owner agent (attach notarized statement authorizing representation).	a groundwater change in point of diversion greater than 300 feet, s of the currently authorized place of use, or their duly authorized
I hereby verify, being first duly sworn upon my oath or affire age and the owner, the spouse of the owner, or a duly author their behalf, in regard to the water right(s) to which this appoint and complete.	rized agent of the owner(s) to make this application on plication pertains. I further verify that the statements
Dated at Virginia Beach Va Kansas, thi	3 18 th day of March 20 18.
As to the first of the same of	
(Owner)	(Spouse)
Scott E. Hamm	
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spanse)TTE MICHELLE CLARK Notary Public
	Commonwealth of Virginia
(Please Print)	Commonwealth of Virginia (Please Print) 7636815 My Commonwealth of Virginia
,	(Please Print) 7636815 My Commission Expires Nov 30, 2019
State of Kanage Wirginia Seach ss	(Please Print) 7636815 My Commission Expires Nov 30, 2019
,	(Please Print) 7636815 My Commission Expires Nov 30, 2019
State of Kaneas Wirginia ss County of Virginia Beach ss A hereby certify that the foregoing application was signed in	(Please Print) 7636815 My Commission Expires Nov 30, 2019
State of Kanasa Virginia Seach SS County of Virginia Beach SS Thereby certify that the foregoing application was signed in the sound of the seach SSS of the	(Please Print) 7636815 My Commission Expires Nov 30, 2019 Typresence and sworn to before me this 19 ⁺¹ day of Notary Public Notary Public
State of Kaneas Virginia Beach County of Virginia Beach Mereby certify that the foregoing application was signed in the fore	(Please Print) 7636815 My Commission Expires Nov 30, 2019 The presence and sworn to before me this 19 ⁺¹ day of Notary Public Notary Public Notary Public form must be completed with appropriate owners' must be affixed to the application and notarized; and
State of Kaneas Virginia SS County of Virginia Beach Mereby certify that the foregoing application was signed in the foregoi	(Please Print) 7636815 My Commission Expires Nov 30, 2019 The presence and sworn to before me this 19 ⁺¹ day of Notary Public Notary Publ

14. If the proposed groundwater point of diversion is 300 or fewer feet fe	om existing point of diversion, complete the following:
(a) Does the undersigned represent all owners of the currently auth ☐ Yes ☐ No (If no, all owners must sign this appl	
 (b) Will the ownership interest of any owner of the currently authors affected if this application is approved as requested? ☐ Yes ☐ No (If yes, all owners must sign this approved.) 	olication)
(c) If this application is not approved expeditiously, will there be su ☐ Yes ☐ No (If no, all owners must sign this appl	Garden City Field Office
If the application proposes a surface water change in point of diversion, or a change in place of use, the application must be signed by all owner agent (attach notarized statement authorizing representation).	a groundwater change in point পি বাগেলারটো টুল্ভিরাল than 300 feet, s of the currently authorized place of use, or their duly authorized
I hereby verify, being first duly sworn upon my oath or affirr age and the owner, the spouse of the owner, or a duly autho their behalf, in regard to the water right(s) to which this ap contained in this application are true, correct and complete.	rized agent of the owner(s) to make this application on plication pertains. I further verify that the statements
Dated at //5/1727 , Kansas, this	$s 20^{T/1}$ day of MANCH, 2018.
Yenn Jalle	
(Owner)	(Spouse)
TERRENCE L. HAMM (Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print) Ruly M. Lem (Owner) Ruly M. WAMM TERRENCE L. HAMM (Please Print) CO-EXSCUTOR	(Please Print)
(Owner).	(Spouse)
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State of Kansas County of SS	Q -41 k
***************************************	my presence and sworn to before me this day of
My Appt. Expires	Lealifu
My Commission Expires	Notary Public
ONLY COMPLETE APPLICATIONS WILL SE PROCESSED. To be complete, a accurate information; maps, if necessary, must be included; signatures of all the the appropriate fee must be paid.	ill of the applicable portions of the application form must be completed with appropriate owners' must be affixed to the application and notarized; and
FEE SCHEI	
Each application to change the place of use or the point of diversion un forth in the schedule below: Make checks payable to: Kansas Depart	der this section shall be accompanied by the application fee set ment of Agriculture
(1) Application to change a point of diversion 300 feet or less. (2) Application to change a point of diversion more than 300 feet (3) Application to change the place of use	eet\$100

14. If the proposed groundwater point of diversion is 300 or fewer fee	et from existing point of diversion, complete the following:
(a) Does the undersigned represent all owners of the currently a ☐ Yes ☐ No (If no, all owners must sign this a	
(b) Will the ownership interest of any owner of the currently at affected if this application is approved as requested? ☐ Yes ☐ No (If yes, all owners must sign this.)	application.) MAR 2 9 2018
(c) If this application is not approved expeditiously, will there be ☐ Yes ☐ No (If no, all owners must sign this a	substantial damage to property, public health or safety?
	Garden City Fleid Office
If the application proposes a surface water change in point of diversion or a change in place of use, the application must be signed by all own agent (attach notarized statement authorizing representation).	on, a groundwater change in point of diversibli greater than 300 feet, ners of the currently authorized place of use, or their duly authorized
age and the owner, the spouse of the owner, or a duly aut their behalf, in regard to the water right(s) to which this contained in this application are true, correct and complete	firmation and under penalty of perjury, that I am of lawful horized agent of the owner(s) to make this application on application pertains. I further verify that the statements to.
Dated at Jenhs, Kansas,	
W/schaf & James	Jacquelini J. Damas (Spouse)
Michael L. James	Jacqueline J Hamm (Please Print)
Holle Lolan	(Spouse)
Unllin Roych	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print) OKICHOMA State of Kansas. SS	AMBER LOZANO (Please Print) Notary Public State of Oklahoma Commission # 14010900
County of My C	ommission Explres Dec 1, 2018 n my presence and sworn to before me this 19 th day of
March, 20 3.	O O O O O O O O O O O O O O O O O O O
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My Commission Expires DeCo1, 2018.	Notary Public
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complet accurate information; maps, if necessary, must be included; signatures of all the appropriate fee must be paid.	e, all of the applicable portions of the application form must be completed with the appropriate owners' must be affixed to the application and notarized; and
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(3) Application to change the place of use	\$200
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14. If the proposed groundwater point of diversion is 300					
(a) Does the undersigned represent all owners of the ☐ Yes ☐ No (If no, all owners must	et sian this applica	tion.)			
(b) Will the ownership interest of any owner of the affected if this application is approved as reques	currently authoriz	ed place			ation be adversely
☐ Yes ☐ No (If yes, all owners mutually) (c) If this application is not approved expeditiously,	- ,,	-		AR 2 9 2018	safetv?
☐ Yes ☐ No (If no, all owners mu	st sign this applica	tion.)	Gardei	n City Field Office	
If the application proposes a surface water change in poi	int of diversion, a	roundwa	Division ter change	of Water Resources In point of diversion g	eater than 300 feet
or a change in place of use, the application must be sign agent (attach notarized statement authorizing representa	ied by all owners o	f the cur	ently author	rized place of use, or t	heir duly authorized
I hereby verify, being first duly sworn upon my	oath or affirma	tion and	d under pe	enalty of perjury, th	nat I am of lawfu
age and the owner, the spouse of the owner, or their behalf, in regard to the water right(s) to v	' a dulv authoriz	ed ager	nt of the o	wner(s) to make th	is application of
contained in this application are true, correct ar	nd complete.	cation	portunio.	i i	
Dated at 1615 met	, Kansas, this _	19	_ day of	March	, 20/&
pportunity Souders LLC			•		·
(Owner)				(Spouse)	***************************************
Schn Lee (Please Print)				(Please Print)	
(i lodge i lility				(
(Owner)			***************************************	(Spouse)	
(Please Print)	 			(Please Print)	
(Owner)	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	(Spouse)	
(Please Print)				(Please Print)	
State of Kansas					
County of <u>JUMMU</u>					Osts
I hereby certify that the foregoing application w	as signed in my	presend	e and swe	orn to before me th	nis <u>///</u> day of
	WOINE C	4	100 V	i R/itho	
My Commission Expires 11.17.21	Y Appt Exphes _	**************************************		Notary Public	
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED accurate information; maps, if necessary, must be included; see the appropriate fee must be paid.	To be complete, all on ap	of the appli propriate o	cable portion owners' must	s of the application form be affixed to the applicat	must be completed w ion and notarized; an
	FEE SCHEDU				
Each application to change the place of use or the point forth in the schedule below: Make checks payable to: I (1) Application to change a point of diversion 3	t of diversion unde Kansas Departme	r this sec ent of Ag	riculture		
(2) Application to change a point of diversion n(3) Application to change the place of use	nore than 300 feet				\$200
					٠.

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File No. ____

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