

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

1. File Number: 13294 D1	2. Status Change Date: 6/27/18	3. Change Num: C2	4. Field Office: 04	5. GMD: 03
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6. Status: <input type="checkbox"/> Approved <input type="checkbox"/> Denied by DWR/GMD <input type="checkbox"/> Dismiss by Request/Failure to Return	7. Filing Date of Change: 6/27/18
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8a. Applicant(s) Person ID 55234 New to system <input type="checkbox"/> Add Seq# 1 RAPP FARMS PO BOX 459 HOLCOMB KS 67851-0459	8c. Landowner(s) Person ID _____ New to system <input type="checkbox"/> Add Seq# _____
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8b. Landowner(s) Person ID _____ New to system <input type="checkbox"/> Add Seq# _____ NC	8d. WUC Person ID _____ New to system <input type="checkbox"/> Add Seq# _____ nc
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9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: **12/31/18** N & P Date to Comply: **12/31/18**

Anti-Reverse Meter Meter Seal Check Valve N & P Form Water Tube Driller Copy H & E Letter
 Conservation Plan Date Required: _____ Date Approved: _____ Date to Comply: _____

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

Date Prepared: **6/27/18** By: **TPM**
 Date Entered: _____ By: _____

File No. 13294 D1	11. County: FI	Basin: ark	Stream:	Formation Code: 211	Special Use:																															
12. Points of Diversion CHK MOD PDIV DEL ENT																																				
Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Rate gpm/cfs	Quantity af/mgy	Additional Rate gpm/cfs	Quantity af/mgy	Additional Quantity ac/ft																								
ent	ne	nw	sw	34	23	32	2617	4085	1050	373	1050	373																								
del	46799																																			
13. Storage: Rate _____ NF _____ Quantity _____ ac/ft Additional Rate _____ NF _____ Additional Quantity _____ ac/ft																																				
14. Limitation: na af/yr at _____ gpm (_____ cfs) when combined with file number(s) _____ Limitation: _____ af/yr at _____ gpm (_____ cfs) when combined with file number(s) _____																																				
15. 5YR Allocation: Allocation Type _____ Start Year _____ 5 YR Amount _____ Amount Unit _____ Base Acres _____ Comment _____																																				
16. Place of Use						NE 1/4						NW 1/4				SW 1/4				SE 1/4				Total		Owner		Chg?		Overlap Files						
CHK																																				
MOD																																				
DEL																																				
ENT																																				
NC																																				
Base Acres: _____ Year: _____ Minimum Reasonable Quantity: _____ Comments: _____																																				

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

June 27, 2018

RAPP FARMS
PO BOX 459
HOLCOMB KS 67851-0459

RE: Change in Point of Diversion Water Right, File No 13294 D1

Dear Mr. Rapp;

Enclosed you will find a *Summary Order Approving Application for Change in Points of Diversion* for the above referenced file. This order modifies the authorized well location under the referenced file. This order modifies the original document; it should be recorded at the County Register of Deeds.

Your attention is directed to the enclosures and to the terms, conditions, and limitations specified in this order. The diversion works should be completed and reported to the Division of Water Resources **by December 31, 2018**. Enclosed is a form for this purpose, along with other information for reference.

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.

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. If you would prefer, you could arrange an appointment for additional assistance.

Sincerely,

Thomas P. Makens
Assistant Water Commissioner

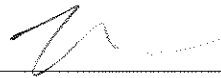
TPM:tpm
Enclosures
GMD#3

CERTIFICATE OF SERVICE

On this 29th day of June 2018, I hereby certify that the attached original Approval of Application to Change the Point of Diversion under Water Right, File No. 13294 D1 dated June 27, 2018 was mailed postage prepaid, first class, US mail to the following:

RAPP FARMS
PO BOX 459
HOLCOMB KS 67851-0459

Copy provided to GMD#3



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.

File No. 13294-D1

RECEIVED
 10:00 AM
 JUN 28 2018
 27 7PM

Garden City Field Office
 Division of Water Resources

1. Application is hereby made for approval of the Chief Engineer to change the (check one or both):

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: RAPP FARMS

PO BOX 459, HOLCOMB KS 67851-0459

Phone Number: (620)277-2650 272-6666 Email address: _____

Name and address of Water Use Correspondent: Same

Phone Number: () _____ Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: RAPP & REED, MICHAEL A REED

ADDRESS: 4455 E ANTELOPE RD, 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		

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 to Acres irrigated

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>6/27/18</u> Check # <u>5463</u>

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the NC Quarter of the W2 Quarter
 of Section 34, Township 23 South, Range 32 (W),
 in FI County, Kansas, 2590 feet North 3910 feet West of Southeast corner of section.
 Authorized Rate 1050 Authorized Quantity 373 Depth of well _____ (feet)
 (DWR use only: Computer ID No. 2 GPS 2628 feet North 4040 feet West) *QMD
 This point will not be changed This point will be changed as follows: No change, point better described with GPS as follows:
Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)
 One in the NE Quarter of the NE NW Quarter of the W2 SW Quarter
 of Section 34, Township 23 South, Range 32 (W),
 in FI County, Kansas, 2617 feet North 4085 feet West of Southeast corner of section.
 Proposed Rate 1050 Proposed Quantity 373 Proposed well depth (feet) 274
 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: No change, point better described with GPS as follows:
Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)
 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. The changes herein are desired for the following reasons?
 (please be specific) Old well lost production

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

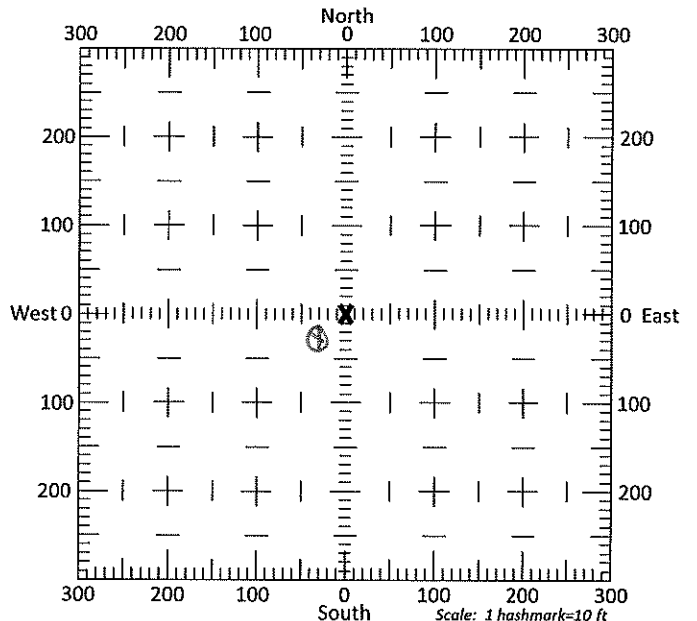
9. The change(s) (was)(will be) completed by?
ASAP June 28, 2018

10. If the point of diversion is a well:
 (a) What are you going to do with the old well?
Plug
 (b) When will this be done? 2018

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by mf/GCFO

13a. If the proposed point of diversion will be relocated more than 300 feet but within 2,640 feet of 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



13b. If the proposed point of diversion will be relocated within 300 feet of the existing point of diversion, indicate its location on the diagram shown above in relation to the existing point of diversion. (PLEASE NOTE: The "X" in center of diagram above represents the presently authorized point of diversion.)

APPLICATION FOR APPROVAL TO CHANGE
THE PLACE OF USE AND/OR POINT OF DIVERSION
SUPPLEMENTAL SHEET
FILE NO. 13294 D1

Presently authorized point of diversion:

One in the _____ Quarter of the NC Quarter of the E2 Quarter
of Section 34, Township 23 South, Range 32 W,
in FINNEY County, Kansas, 2570 feet North 1320 feet West of Southeast corner of section.

Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)

(DWR use only: Computer ID No. 1 GPS _____ feet North _____ feet West)

This point will not be changed This point will be changed as follows: No change, point better described with GPS as follows:

Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)

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 _____

Presently authorized point of diversion:

One in the _____ Quarter of the _____ Quarter of the NC Quarter
of Section 34, Township 23 South, Range 32 W,
in FINNEY County, Kansas, 2600 feet North 2640 feet West of Southeast corner of section.

Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)

(DWR use only: Computer ID No. 5 GPS 2621 feet North 2660 feet West)

This point will not be changed This point will be changed as follows: No change, point better described with GPS as follows:

Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)

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 _____

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: No change, point better described with GPS as follows:

Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)

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 _____

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: No change, point better described with GPS as follows:

Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)

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 _____

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.)

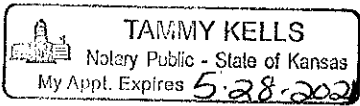
If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized 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 regards 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 27th day of JUNE, 2018.

<u><i>[Signature]</i></u> (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 27 day of June, 2018.

[Signature]
Notary Public

My Commission Expires 5-28-2021.

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	<u>\$100</u>
(2) Application to change a point of diversion more than 300 feet	\$200
(3) Application to change the place of use	\$200

SUMMARY ORDER APPROVING APPLICATION FOR CHANGE AND IMPOSING CONDITIONS

This Summary Order is issued under authority of K.S.A. 82a-708b, as amended, and K.A.R. 5-5-1, *et seq.* and other applicable provisions of the *Kansas Water Appropriation Law, K.S.A. 82a-701 et seq.*, and rules and regulations promulgated thereunder, With the exception of those conditions expressly contained herein, this Summary Order does not change the terms, conditions and limitations of File No. 13294 D1.

1. A change application was received on June 27, 2018 requesting that the place of use and / or point of diversion authorized under the above-referenced file number be changed as described in the application.
2. On and after the effective date of this summary order, the authorized place(s) of use shall be located substantially as shown on the topographic map accompanying the application to change the place of use. Applicable Not Applicable
3. The change in point of diversion shall not impair existing rights and shall be limited to the same source or sources of water as previously authorized. The point of diversion authorized by this summary order shall be located within a 50 foot radius of the authorized point(s) of diversion. Applicable Not Applicable
4. The point(s) of diversion described herein is administratively corrected to be more accurately described using the Global Positioning System (GPS), as described in the application. Applicable Not Applicable
5. The point(s) of diversion authorized herein shall not actually be located more than _____ feet from the previously authorized point(s) of diversion. Applicable Not Applicable
6. As required by K.A.R. 5-3-5d, if the works for diversion is a well with a diversion rate of 100 gallons per minute or more, a tube or other device suitable for making water level measurements shall be installed, operated and maintained in accordance with K.A.R. 5-6-13. Applicable Not Applicable
7. The owner of the authorized place(s) of use shall properly install an acceptable water flow meter on or before **December 31, 2018**, or before the first use of water, whichever occurs first. The water flow meter shall be installed, operated and maintained in accordance with K.A.R. 5-1-4 through 5-1-12. As required by K.S.A. 82a-732, as amended, and K.A.R. 5-3-5e, the owner shall maintain records and report the reading of the water flow meter and the total quantity of water diverted annually to the Chief Engineer by March 1 following the end of each calendar year.
 Applicable Not Applicable
8. Installation of the works for diversion of water shall be completed on or before **December 31, 2018**, or within any authorized extension of time. By March 1, 2019 the applicant shall notify the Chief Engineer that construction of the works for diversion has been completed, on the form provided by the Chief Engineer, as required by K.A.R. 5-8-4e.
 Applicable Not Applicable
9. The completed well log shall be submitted with the required notice. Applicable Not Applicable
10. All diversion works into which any type of chemical or other foreign substance will be injected into the water shall be equipped with an in-line, automatic, quick-closing check valve capable of preventing pollution of the source of the water supply. The check valve(s) shall be installed, operated and maintained in accordance with K.A.R. 5-3-5c. Applicable Not Applicable
11. Additional Conditions are attached. Yes No
12. In accordance with K.S.A. 82a-708a, as amended, and K.A.R. 5-5-14, all of the owners of the authorized place(s) of use of water appropriated under the above-referenced file number are responsible for compliance with its terms, conditions and limitations, as amended and/or supplemented by this Summary Order, and with applicable provisions of the *Kansas Water Appropriation Law* and the *Rules and Regulations* promulgated thereunder. Failure to comply with these provisions may result in civil penalties pursuant to K.S.A. 82a-737, as amended, and/or the suspension or revocation and dismissal of the water or appropriation right or any other enforcement actions authorized by law.

Administrative Appeal and Effective Date of Order

If you are aggrieved by this order, pursuant to K.S.A. 82a-1901, you may request an evidentiary hearing before the Chief Engineer or request administrative review by the Secretary of Agriculture. A request for hearing by the Chief Engineer must be filed within **15 days** of service of this Order and a request for administrative review by the Secretary must be filed within **30 days** pursuant to K.S.A. 77-531. Any request for administrative review must state a basis for review pursuant to K.S.A. 77-527. File any request with **Kansas Department of Agriculture, Legal Division, 1320 Research Park Drive, Manhattan, KS 66502**. Failure to timely request a hearing or review may preclude review under the Kansas Judicial Review Act.

For Use by Register of Deeds

FOR OFFICE USE ONLY
APPLICATION APPROVED AND SUMMARY ORDER ISSUED

By: 
Duly Authorized Designee of the Chief Engineer

(Print Name): Thomas P Makens
Division of Water Resources - Kansas Department of Agriculture

Date of Issuance: JUNE 27, 2018

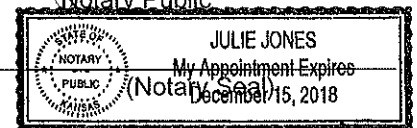
State of Kansas)

County of Finney) SS

Acknowledged before me on June 27, 2018
by Thomas P. Makens

Signature: 
Notary Public

My commission expires: _____
(Notary Seal)



3795 W. Jones Ave.
Garden City, KS 67846
PH: 620-277-2389



PO Box 639
Garden City, KS 67846
Fax: 620-277-0224

GEORGE RAPP CELL 620-272-6666

Customer Name: Rapp Farms WO#: 14110 Date: 6-26-18
 Street Address: 3810 N. IBP ROAD Test #: 1 E LOG: Yes
 City, State: HULCOMB, KS 67851 Driller: Dale Guinn
 County: Finney Quarter: NW Section: 34 Township: 23 Range: 32
 Location: 35' West & 27' South of Existing Well GPS: N38.01091 W100.82465
 Rig #: 10002 Elevation: 2840' Static WL: 125' Estimated?
 Proposed Well Depth 274
 Old Gas Line 3' to 4' East of Test Hole 20' SUMP

%	Footage			WELL LOCATION Description of Strata
	From	Pay	To	
	0		2	Top Soil
	2		20	Brown Sandy Clay
	20		29	Brown Sandy clay w/ fine sand Mixed a few thin Caliche strips
	29		41	Fine Sand w/ few clay stringers & some Caliche & Lime Rock strip
	41		54	Sand fine to med course
	54		59	Tight Fine Sand
	59		64	Brown Sandy Clay
	64		112	Sand fine to med course some small gravel - Drilled loose -
30	112	3	128	Sand fine to med course small gravel - Drilled loose -
35	128	22	150	Sand fine to med course small med gravel w/ couple thin clay stringers - Drilled loose -
10	150	6	156	Fine sand
5	156	10	166	Fine sand w/ Yellow & Brown clay
30	166	10	176	Sand fine to med course - Drilled loose -
10	176	29	205	Fine sand w/ couple clay stringers
20	205	21	226	Sand fine few med w/ few small white rock & couple clay ledges - Drilled loose -
10	226	28	254	Fine sand w/ few clay stringers
	254		258	Yellow Soapstone
	258			Black Shale
				Super Coal X -1
				Coat -2
				Bent Plus 3/4 -6
				Perm Plus -1
				4 3/4 Oreg Black -1

TOPO! map printed on 06/27/18 from "Untitled.tpo"

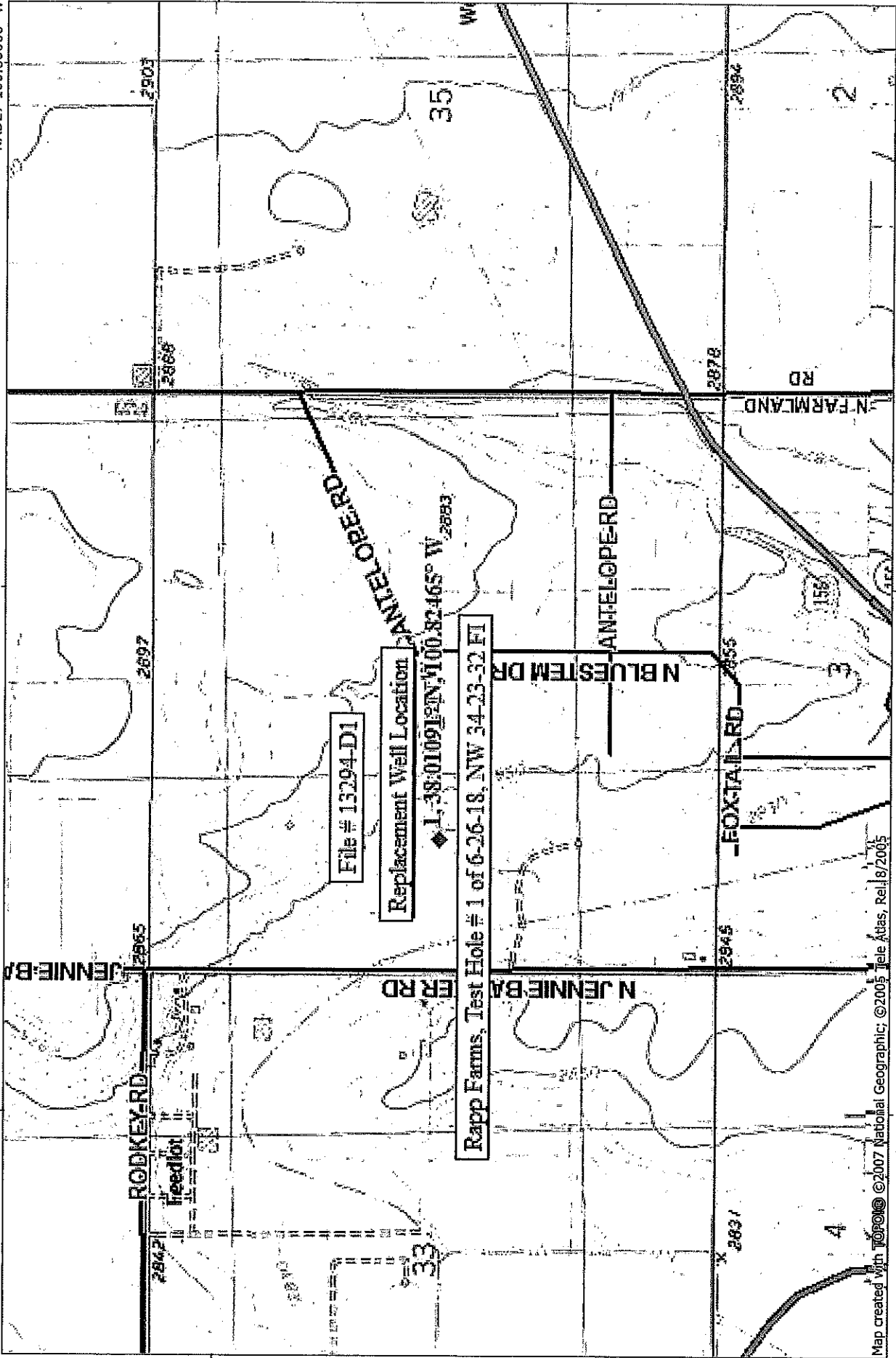
NAD27 100.80000° W

100.81667° W

100.83333° W

38.01667° N

38.01667° N



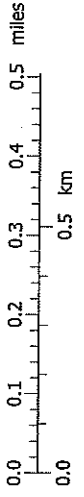
Map created with TOPO! © 2007 National Geographic; © 2005 Tele Atlas, Rel. 8/2005

NAD27 100.80000° W

100.81667° W

100.83333° W

TN MN



5 1/2°

06/27/18

NATIONAL GEOGRAPHIC

