

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. 16826

RECEIVED
 3:47pm
 AUG 27 2018

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

Garden City Field Office
 Division of Water Resources

2. Name and address of Applicant: VULGAMORE FAMILY FARMS LLC

1550 W ROAD 70, SCOTT CITY KS 67871

Phone Number: (620)874-5076

Email address: mylesvulgamore@gmail.com

Name and address of Water Use Correspondent: Same

Phone Number: ()

Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: Same

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	
14	20	31									40	40	40	40					160
15	20	31	40	40	40	40									35	39	32	34	300
22	20	31	40	40	40	40													160

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: Same

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	
14	20	31					40	40	40	40	40	40	40	40					320
15	20	31	40	40	40	40	5			6					29	30			230

For Office Use Only: Code _____ Fee \$ 200 TR # _____ Receipt Date 8/27/18 Check # 27567

14. If the proposed groundwater point of diversion is 300 or fewer feet from the 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?
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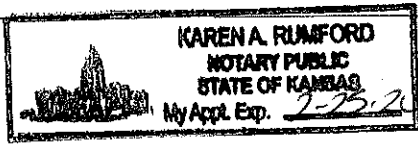
If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized 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 Scott City, Kansas, this 22nd day of August, 20 18.

<u>Robert W. Hawkins</u>		
(Owner)		(Spouse)
<u>Robert W. Hawkins</u>		
(Please Print)		(Please Print)
(Owner)		(Spouse)
(Please Print)		(Please Print)
(Owner)		(Spouse)
(Please Print)		(Please Print)

State of Kansas }
 County of Scott } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 22nd day of August, 20 18.

Karen A. Rumpf
 Notary Public

My Commission Expires 2-25-20.

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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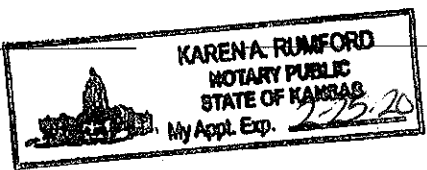
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 (Owner)	(Spouse)
<u>Myles Wilgemore</u> (Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)

State of Kansas }
 County of Scott } SS



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Karena Rumford
 Notary Public

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Dated at Scott City, Kansas, this 22nd day of August, 2018.

 (Owner)	(Spouse)
<u>RIEK C. STEVENS</u> (Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)

State of Kansas }
 County of Scott } SS



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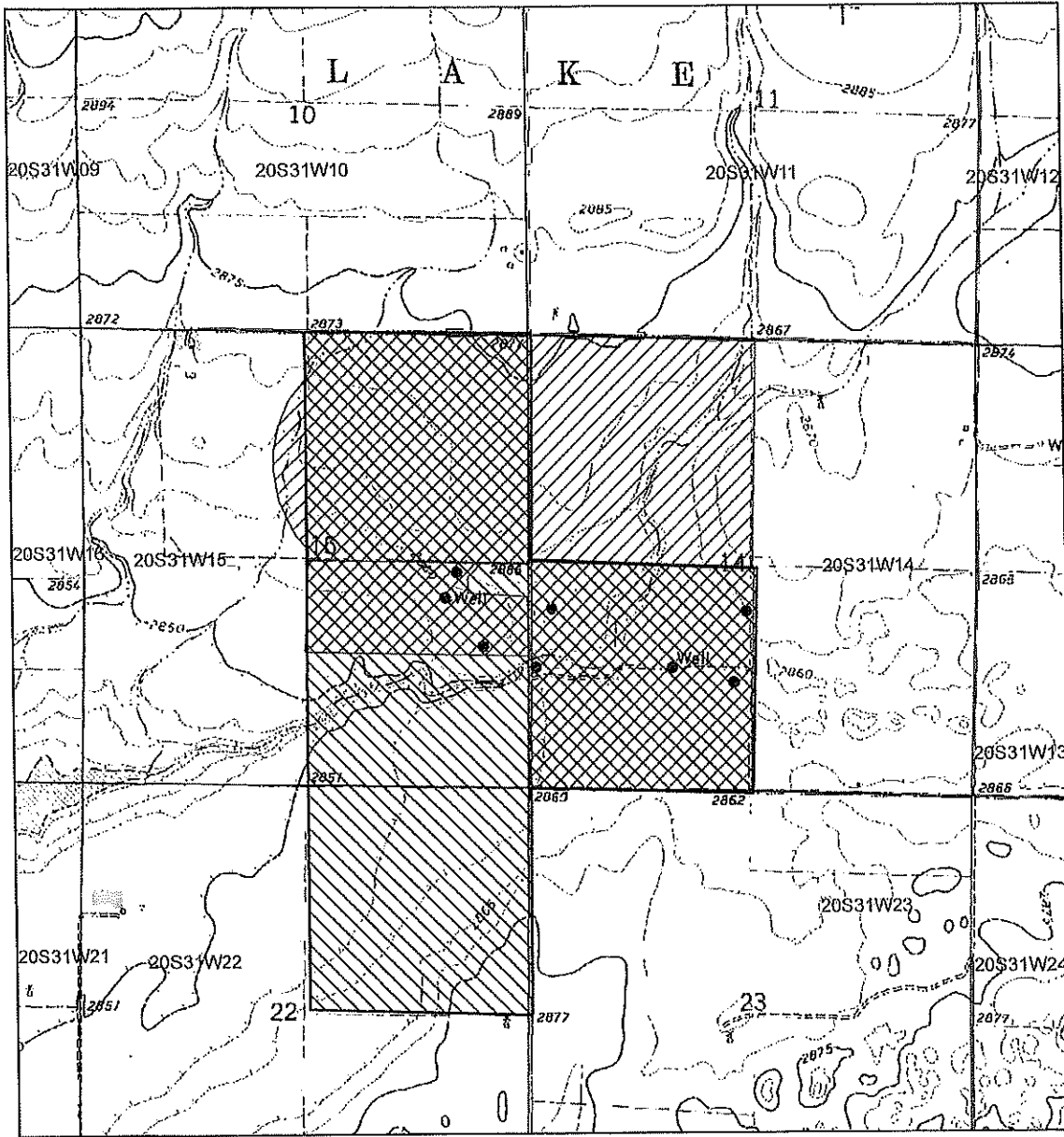
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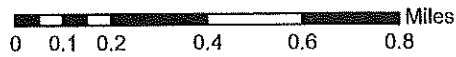
Change in Place of Use for Water Rights 7767, 9309, 10443, 12741, 16826, 19192



Authorized Place of Use



Proposed Place of Use



All wells within 1/2 miles are on this map.

X _____