

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

November 6, 2018

HAMILTON RWD 01
BOX 69
KENDALL KS 67857

RE: Water Right, File No. 28893

Dear Madame or Sir:

This is to advise you that Matthew and Charity Medill has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the point of diversion under the above referenced application.

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

You are notified on this proposed change in point of diversion so that you may furnish this office with any comments or other information you may want to submit. Such comments or other information must be received in this office within 15 days from the date of this letter.

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,

Michael A. Meyer
Water Commissioner

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November 6, 2018

JED A. AND STEPHANIE F. SIMON
PO BOX 781
SYRACUSE, KS 67878-0781

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November 6, 2018

LELAND SLATE
12032 REX SMITH RD.
KINGSTON, OK 74349-5607

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Sincerely,

A handwritten signature in black ink, appearing to read "Michael A. Meyer", with a stylized flourish at the end.

Michael A. Meyer
Water Commissioner

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JACKIE McCLASKEY, SECRETARY OF AGRICULTURE

November 6, 2018

SKYLAND GRAIN
LLC PO BOX 280
JOHNSON, KS 67855

RE: Water Right, File No. 28893

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Sincerely,

Michael A. Meyer
Water Commissioner

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. 28893

RECEIVED
 4:30 pm
 NOV 02 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: Mathew & Charity Medill

PO Box 955, Lakin, KS 67860

Phone Number: () 580-254-1224 Email address: medill-roy@hotmail.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: Mathew & Charity Medill

ADDRESS: PO Box 955, Lakin, KS 67860

(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	24s	39w			15.0												8.0			23.0

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: Mathew & Charity Medill

ADDRESS: PO Box 955, Lakin, KS 67860

(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	24s	39w		21.0	2.0															23.0

For Office Use Only: Code _____ Fee \$ <u>200.00</u> TR # _____ Receipt Date <u>11-2-18</u> Check # <u>2014</u>
--

5. **Presently authorized point of diversion:**
 One in the SE Quarter of the SW Quarter of the NE Quarter
 of Section 25, Township 24 South, Range 39 W,
 in HM County, Kansas, 3000 feet North 1900 feet West of Southeast corner of section.
 Authorized Rate 675gpm Authorized Quantity 25AF blanket Depth of well _____ (feet)
(DWR use only: Computer ID No. 01 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 _____

** COMBINED RATE & QUANTITY FOR BOTH WELLS.*

6. **Presently authorized point of diversion:**
 One in the NW Quarter of the SW Quarter of the NE Quarter
 of Section 25, Township 24 South, Range 39 W,
 in HM County, Kansas, 3650 feet North 2575 feet West of Southeast corner of section.
 Authorized Rate 675gpm Authorized Quantity 25AF blanket Depth of well _____ (feet)
(DWR use only: Computer ID No. 02 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) rearrange acres

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

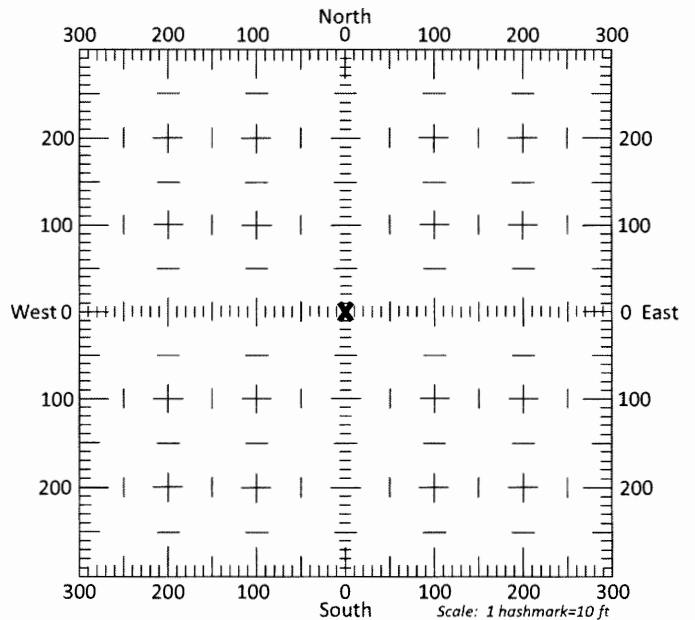
9. The change(s) (was)(will be) completed by?
As soon as approved

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 _____



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.)**

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?
 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 Keosau County Bank in Lakin, Kansas, this 30th day of October, 2018.

<p><u>Mathew Medill</u> (Owner)</p> <p><u>Mathew Medill</u> (Please Print)</p> <p>_____ (Owner)</p> <p>_____ (Please Print)</p> <p>_____ (Owner)</p> <p>_____ (Please Print)</p> <p>_____ (Owner)</p> <p>_____ (Please Print)</p>	<p><u>Charity M. Medill</u> (Spouse)</p> <p><u>Charity M. Medill</u> (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 Kansas } SS



(Please Print)

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 31st day of October, 2018.

Taryn Ramey
Notary Public

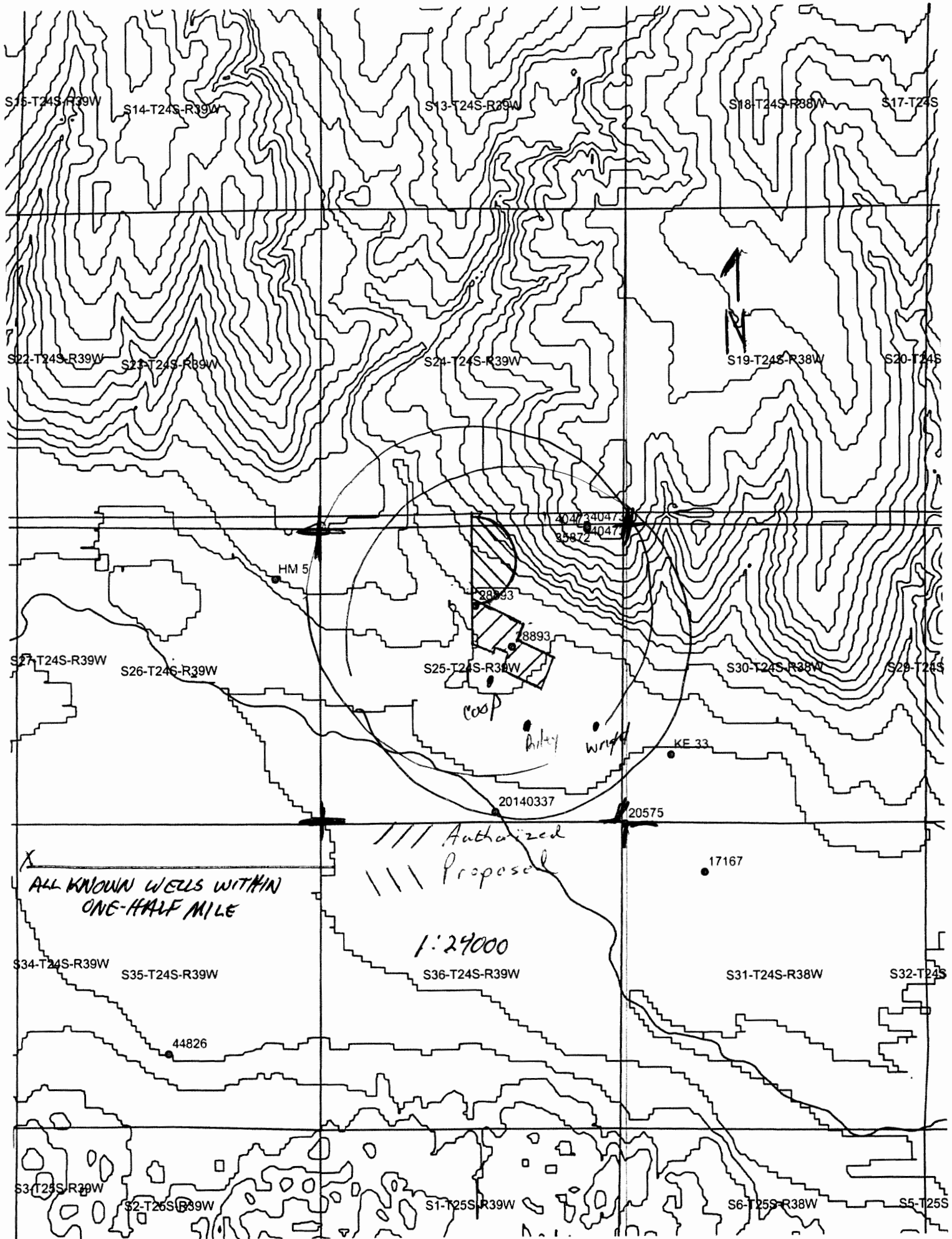
My Commission Expires ~~10/10/18~~ 10/14/22

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



ALL KNOWN WELLS WITHIN ONE-HALF MILE

Authorized
Proposed

1:24000