

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

1. File Number: 45304	2. Status Change Date: 7/30/18	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: 7/13/18
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8a. Applicant(s) Person ID 57335
 New to system Add Seq# 1

HATCHER LAND CO LP
1701 N KANSAS AVE STE 102
LIBERAL KS 67901

8c. Landowner(s) Person ID _____
 New to system Add Seq# _____

8b. Landowner(s) Person ID 57335
 New to system Add Seq# 1

HATCHER LAND CO LP
1701 N KANSAS AVE STE 102
LIBERAL KS 67901

8d. WUC Person ID 57335
 New to system Add Seq# 1

HATCHER LAND CO LP
1701 N KANSAS AVE STE 102
LIBERAL KS 67901

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: **7/19/18** By: **TPM**
 Date Entered: _____ By: _____

File No. 45304	11. County: SV	Basin: cimarron	Stream:	Formation Code: 211	Special Use:												
12. Points of Diversion CHK MOD DEL PDIV ENT																	
Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Rate gpm	Quantity af	Additional Rate gpm	Quantity af	Additional Quantity ac/ft					
ent	se	se	nw	26	34	35w	2845	2883									
del	5041																
13. Storage: Rate _____ NF _____ Quantity _____ ac/ft Additional Rate _____ NF _____ Additional Quantity _____ ac/ft																	
14. Limitation: nc 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	PUSE	S	T	R	ID	NE 1/4	SW 1/4	SE 1/4	NW 1/4	SW 1/4				
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

July 31, 2018

HATCHER LAND CO LP
1701 N KANSAS AVE STE 102
LIBERAL KS 67901

RE: Change in Point of Diversion Water Right, File No 28656, 45304

Dear Mr. Hatcher;

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 31st day of July 2018, I hereby certify that the attached original Approval of Application to Change the Point of Diversion under Water Right, File No. 28656, 45304 dated July 31, 2018 was mailed postage prepaid, first class, US mail to the following:

HATCHER LAND CO LP
1701 N KANSAS AVE STE 102
LIBERAL KS 67901

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.

RECEIVED
 3:45pm
 JUL 13 2018

File No. 45304

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: HATCHER LAND CO LP
1701 N KANSAS AVE STE 102 LIBERAL KS 67901
 Phone Number: (620)624-1186 Email address: _____
 Name and address of Water Use Correspondent: HATCHER LAND CO LP
1701 N KANSAS AVE STE 102 LIBERAL KS 67901
 Phone Number: (_____) Email address: _____

3. The presently authorized place of use is:
 Owner of Land ---- NAME: HATCHER LAND CO LP
 ADDRESS: 1701 N KANSAS AVE STE 102 LIBERAL KS 67901
 (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 \$ 100 TR # _____ Receipt Date 7/13/18 Check # 1827

5. **Presently authorized point of diversion:**
 One in the se Quarter of the se Quarter of the nw Quarter of Section 26, Township 34 South, Range 35 W, in Stevens County, Kansas, 2790 feet North 2890 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
 (DWR use only: Computer ID No. 1 GPS 2825 feet North 2883 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 se Quarter of the se Quarter of the nw Quarter of Section 26, Township 34 South, Range 35 W, in Stevens County, Kansas, 2845 feet North 2883 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 _____

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) drilling in a hurry w/o test hole.
old well needs to be replaced asap
20 feet north of old well

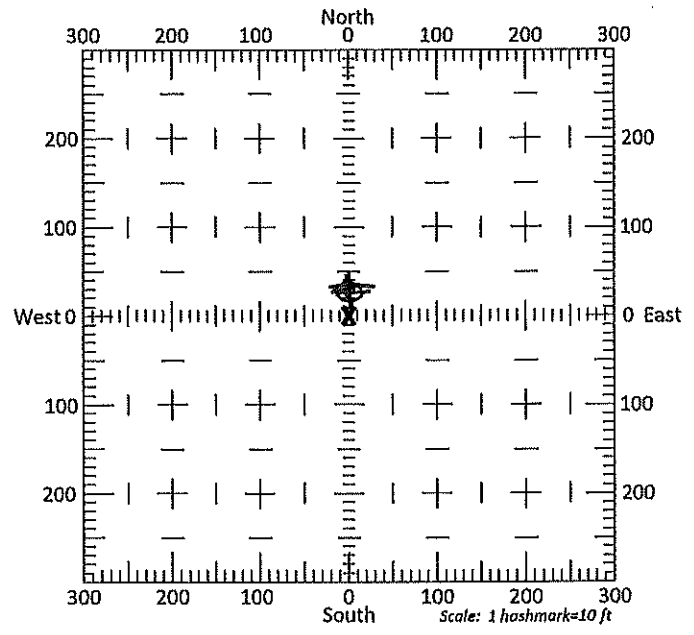
8. If a well, is the test hole log attached? Yes No
WANT TO DRILL BASED ON CURRENT LOG.
 9. The change(s) (was)(will be) completed by?
July 4, 2018

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 tpm

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 Liberal, Kansas, this 10 day of July, 2018.

<i>Nick Hatcher</i> (Owner)	_____ (Spouse)
<u>Nick Hatcher</u> (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)

State of Kansas }
 County of SEWARD } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 10th day of JULY, 2018.

My Commission Expires 9/29/18

JOYCE E. BEGLEY
 Notary Public - State of Kansas
 My Appt. Expires 9/29/18

 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

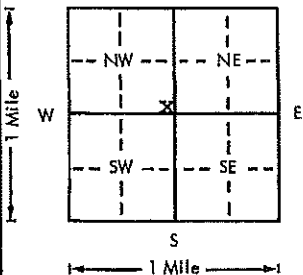
Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

(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
(3) Application to change the place of use	\$200

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment-Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

1. Location of well:		County Stevens	Fraction SE 1/4 SE 1/4 NW 1/4	Section number 26	Township number T 34 S R 35 E 0	Range number
2. Distance and direction from nearest town or city: 5W, 1 N, 4W, 2N 1/2 E 1/2 S of Liberal, Kansas. Street address of well location if in city:				3. Owner of well: R.L. Hatcher R.R. or streets: 1304 Carlton City, state, zip code: Liberal, Kansas		
4. Locate with "X" in section below: Sketch map: <div style="text-align: center;">  <p>SE corner of the NW₄, Sec. 26, T34S, R35W, Stevens County, Kansas</p> </div>				6. Bore hole dia. <u>28</u> in. Completion date _____ Well depth <u>750</u> ft. <u>5-27-77</u>		
5. Type and color of material				7. <input type="checkbox"/> Cable tool <input type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input checked="" type="checkbox"/> Reverse rotary		
				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other		
				9. Casing: Material <u>Stl.</u> Height: <u>Above</u> or below Threaded <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Surface <u>12</u> in. RMP <input type="checkbox"/> PVC <input type="checkbox"/> Weight <u>37</u> lbs./ft. Dia. <u>16</u> in. to <u>340</u> ft. depth Wall Thickness: inches or Dia. <u> </u> in. to <u> </u> ft. depth gage No. <u>.219</u>		
				10. Screens: Manufacturer's name <u>Doerr, Foster</u> <u>Louver, Millslot 16"</u> Type <u> </u> Dia. <u> </u> Slot/gauze <u>1/16"</u> Length <u>410</u> Set between <u>340</u> ft. and <u>750</u> ft. <u> </u> ft. and <u> </u> ft. Gravel pack? <input checked="" type="checkbox"/> Size range of material <u>2.0</u>		
				11. Static water level: <u>130</u> ft. below land surface Date <u>4-12-77</u> mo./day/yr.		
				12. Pumping level below land surfaces: <u>208</u> ft. after <u>1/2</u> hrs. pumping <u>1040</u> g.p.m. <u>260</u> ft. after <u>1</u> hrs. pumping <u>1248</u> g.p.m. Estimated maximum yield <u>1500</u> g.p.m.		
				13. Water sample submitted: <u> </u> mo./day/yr. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Date <u> </u>		
				14. Well head completion: <input type="checkbox"/> Pitless adapter <input checked="" type="checkbox"/> Inches above grade		
				15. Well grouted? <input checked="" type="checkbox"/> With: <input type="checkbox"/> Neat cement <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Concrete Depth: From <u>0</u> ft. to <u>10</u> ft.		
				16. Nearest source of possible contamination: <u>unk</u> ft. <u> </u> Direction <u> </u> Type <u> </u> Well disinfected upon completion? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
				17. Pump: <input type="checkbox"/> Not installed Manufacturer's name <u>Layne & Bowler</u> Model number <u>12KH</u> HP <u> </u> Volts <u> </u> Length of drop pipe <u>300</u> ft. capacity <u>1100</u> g.p.m. Type: <input type="checkbox"/> Submersible <input checked="" type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other		
				20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. <u>Layne-Western Co., Inc. 102</u> Business name License No. Address <u>Garden City, Kansas</u> Signed <u>[Signature]</u> Date <u>13 Jun 77</u> Authorized representative		
18. Elevation:		19. Remarks:				
Topography: <input checked="" type="checkbox"/> Hill <input type="checkbox"/> Slope <input type="checkbox"/> Upland <input type="checkbox"/> Valley		(Use a second sheet if needed)				

34
35
36
SE
SE
NW
1/4
1/4
1/4

