#### 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



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 <a href="www.agriculture.ks.gov/divisions-programs/dwr/water-appropriation/notices">www.agriculture.ks.gov/divisions-programs/dwr/water-appropriation/notices</a> 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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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) 425-6787 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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							F	ile No.	7661										292	
1.	under	the	n is he	right w	hich is	the su	⊠ Pl ıbject (	ace of of this	Use applic		acco	Point o	of Dive with the	rsion he con			Divisio	on of V		d Office Resources
2.	The source of supply is:																			
3.	Owner of Land NAME: RUBY M HAMM LIFE ESTATE  ADDRESS: BOX 457 PLAINS KS 67869																			
	(If there is more than one landowner, attach supplemental sheets as necessary.)  NE¼ NW½ SW½ SE½ TOTAL ACRES																			
Se		мр. 33	Range 30w	NE¼ 30	NW½ 40	SW1/4 40	SE1/4 35	NE1/4 40	NW¼ 40	8W1/4 40	SE1/4 40	NE1/4 40	NW¼ 40	SW1/4 40	SE1/4 40	NE1/4 40	NW1/4 40	8W¼ 40	SE1/4 40	625
4.	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: RUBY M HAMM LIFE ESTATE																			
			,	ADDRI	ESS:	BOX 4	57 F	LAINS	KS (	37869						.,				
	(If the	re is	more th	nan one	landov	vner, at	tach su	ppleme			neces	sary.)				<u> </u>				
g.	an Ti	wp.	Range	NF1/		SW1/4	SE1/4	NE1/4		sw4	SE1/4	NE1/4		V¼ SW¼	SE1/4	NE1/4		≣¼ SW¼	SE1/4	TOTAL ACRES
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		<u></u>		1	<u> </u>					<u></u>		][	<u> </u>		<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	
	For 0	Offic	ce Use	Only:	Code		Fe	e \$ <u>2</u>	00	TR	#		Re	eceipt	Date _	3/29	/18	Chec	:k#_	6636

5.	Presently authorized point of diversion:			
	One in the Quarter of the		Quarter of the	Quarter
- [	of Section, Township		South, Range	, W,
İ	in County, Kansas, 1	feet Nor	rth feet West of Southeast corne	r of section.
	Authorized Rate Authorized Quantity		Depth of well (fee	it)
	(DWR use only: Computer ID No GPS		feet NorthREGeet.We	(St)
- 1	☐ This point will not be changed ☐ This point will b			
		•	. 1	10
ı	One in the Quarter of the		Quarter of the	Quarter
	of Section, Township		South, Range Cordon City Field	Office W.
	in County, Kansas,1	feet Nor	rth feet West of Southeast corne	rof section.
	Proposed Rate Proposed Quantity			
	This point is: Additional Well Geo Center List other			
L.	The points. Eliteration and control electric	.,		
۾ آ	Presently authorized point of diversion:			
٥.	One in the Quarter of the		Quarter of the	Quarter
	of Section, Township			
- 1	in County, Kansas,1			
	Authorized Rate Authorized Quantity			
	(DWR use only: Computer ID No GPS		feet North feet We	eti
ı	☐ This point will not be changed ☐ This point will b			,30,
	Proposed point of diversion: (Complete only if change		<del>**</del>	
	One in the Quarter of the			Quarter
	of Section, Township		Couth Dongs	Quarter
1	in County, Kansas,1			
	Proposed Rate Proposed Quantity			
ı	This point is: Additional Well Geo Center List other			
L	This point is. [] Additional well [] Geo Center List office	o water	r rights that will use the point	·
7.	Why do you need a new point of diversion?	13a.	If the proposed point of diversion will be reloc	ated within 100
• •			feet of the existing point of diversion, indicate	its location on
	no change to water wells		the diagram below in relation to the existing po (PLEASE NOTE: The "X" in center of co	liagram below
			represents presently authorized point of div	/ersion.)
			North	
8.	If a well, is the test hole log attached?  Yes No		100 50 0 50 1	
	•			4
9,	When do you propose to complete the new point of	;	— — — — — — — — — — — — — — — — — — —	1
	diversion?		50 = + = + =	50
			~~` <u> </u>	130
40	16 the water of diversion is a well.			-
10.	If the point of diversion is a well:		West 0 -	0 East
	(a) What are you going to do with the old well?			.1
			50 - + - + -	<b>]</b> 50
	(b) When will this be done?		<u> </u>	-
	(b) Wholl will the be doller		<u> </u>	1
11	Groundwater Management District recommendation		100 50 .0 50 1	
• 1,	attached?  Yes  No		South Scale: 1" = 100"	00
	Guasioa: Prop Erro			
12.	Assisted by tpm	13b.	If the proposed point of diversion will be reloce 100 feet but within 1320 feet from the expression of the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of diversion will be relocated to the proposed point of the proposed	ated more than disting point of
	•		diversion, attach a topographic map or aer	ial photograph.
			For groundwater sources, show all wells (including within one-half mile of the proposed point of di	udina domestic):
			names and mailing addresses of the owners	s. For surface
			water sources, show the names and add	dresses of the
			landowner(s) one-half mile downstream and upstream from your property lines.	i One-Han IIII0

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

## FILE NO. 7661 MAKE ADDITIONAL COPIES AS NECESSARY

RECEIVED

MAR 2 9 2018

Garden City Field Office Division of Water Resources

3. Co Oi	o <i>ntinue</i> wner of	d: The Land - A	presei NA NDDRE	ME:	TERRE	NCE	L & TR	REY L	MICH	AEL L	. & JA(	CQUE	LINE J	SCO	T HAI	<b>ΜΜ΄&amp;</b> Ϊ	HOLLI	E ROE	Resources SCH
NE¼						NV	11/4		SW¼				SE¼				TOTAL		
Sec.	Twp.	Range	NE%	NW%	SW1/4	SE¼	NE¼	NW14	SW¼	SE1/4	NE%	NWW	SW%	SE14	NE%	NW%	<u>\$W¼</u>	SE1/4	ACRES
15	33	30w	18	23	37	37													115
																			<u>'. '</u>
0	wner of	Land -	NA			ENCE	 L, & TF	REY L,	MICH	AEL L	& JAC			HAMN	Λ			<u></u>	
	NE%			NW1/				SW¼			SE¼				TOTAL ACRES				
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15	33 Owner o	30w	N ADDR	AME: ESS;				N				S			30	30	29	29	118
15	33 Owner o	30w	N ADDR	AME: ESS;	EW			N	N%			S	W¼		30	30	29 E¼	29	118
15	33 Owner o	30w	N ADDR	AME: ESS;	EW			N	N%			S	W¼		30	30	29 E¼	29	118

14. If the proposed groundwater point of diversion is 300 or fewer feet f	rom existing point of diversion, complete the following?
(a) Does the undersigned represent all owners of the currently aut	horized place(s) of use identified in this application?
(b) Will the ownership interest of any owner of the currently authorized affected if this application is approved as requested?  Yes No (If yes, all owners must sign this ap	Division of Water Recourses
(c) If this application is not approved expeditiously, will there be surely Yes  No  (If no, all owners must sign this app	ibstantial damage to property, public health or safety? lication.)
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 owne agent (attach notarized statement authorizing representation).	a groundwater change in point of diversion greater than 300 feet, rs of the currently authorized place of use, or their duly authorized
I hereby verify, being first duly sworn upon my oath or affir 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 appointment in this application are true, correct and complete.  Dated at Virginia Beach, Va., Kansas, this	orized agent of the owner(s) to make this application of oplication pertains. I further verify that the statements
Action (Owner)	(Spouse)
Scott & Hamm	• • • • • • • • • • • • • • • • • • • •
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
State of Kansas - Virginia } ss	ANNETTE MICHELLE CLARK Notary Public Commonwealth of Virginia
I hereby certify that the foregoing application was signed in	7636815 my presence and sWefforten this 30.220 day of
mactt , 20 18	
	antt M. E.
My Commission Expires 11-30 - 2019.	Notary Public
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, accurate information; maps, if necessary, must be included; signatures of all the appropriate fee must be paid.	all of the applicable portions of the application form must be completed with a appropriate owners' must be affixed to the application and notarized; and
EBE SOHE	
Each application to change the place of use or the point of diversion upon the schedule below: Make checks payable to: Kansas Depar (1) Application to change a point of diversion 300 feet or less (2) Application to change a point of diversion more than 300 (3) Application to change the place of use	tment of Agriculture

14. If the proposed groundwater point of diversion is 30	00 or fewer feet fro	m existing	point of di	version, com	nplete the follo	wing:	
(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 m (b) Will the ownership interest of any owner of th	e currently author		s) of use	identified in	RECEIVI	ED on be adversely	
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(c) If this application is not approved expeditiously ☐ Yes ☐ No (If no, all owners m	/, will there be sub ust sign this appli	stantial dan cation.)	nage to pi	Gar	ic health or sa den City Fiel on of Water F	d Office	
If the application proposes a surface water change in proposes a change in place of use, the application must be significant agent (attach notarized statement authorizing represent	ned by all owners	groundwal of the curre	ter change ently auth	in point of o	diversion grea	ter than 300 feet,	
I hereby verify, being first duly sworn upon my age and the owner, the spouse of the owner, o their behalf, in regard to the water right(s) to contained in this application are true, correct a	or a duly author which this app and complete.	ized agen dication p	t of the opertains.	owner(s) to I further	o make this verify that t	application on the statements	
Dated at KINST	, Kansas, this	200	_day of _,	MARCH	/	, 20 <u>/8</u> .	
Guran & De							
(Owner)	<del></del>			(Spous	se)		
TERRENCE L. HAMM							
(Please Print)				(Please I	Print)		
(Owner)	······································			(Spou	se)		
(Owner)  RUBY M. HAMM TEARENCE L. HAMM (Please Print) CO. Ex ECVT					<del></del>		
(Please Print) CO · Ex ECVT	67		•	(Please l	Print)		
(Owner)				(Spou	se)		
(Please Print)				(Please	Print)		
State of Kansas SS						014L	
I hereby certify that the foregoing application v	vas signed in m	y presence	e and sv	worn to bef	fore me this	day of	
My Appt. Expires			X	DARKH	U		
My Commission Expires	600 200 1982 1982 1980 1980 1880 1880 1880 1880 1880 1880			Notary F	<sup>o</sup> ub <b>l</b> ic		
ONLY COMPLETE APPLICATIONS WIT REPROGESSED accurate information; maps, if necessary, frust be included; at the appropriate fee must be paid.	To be complete, a ignatures of all the a	l of the applic appropriate o	cable portio wners' mus	ons of the appl at be affixed to	lication form mu the application	st be completed with and notarized; and	
	FEE SCHED	<u>ULE</u>					
Each application to change the place of use or the poir forth in the schedule below: Make checks payable to:  (1) Application to change a point of diversion  (2) Application to change a point of diversion  (3) Application to change the place of use	Kansas Departn 300 feet or less . more than 300 fee	nent of Agr  et	iculture	,		\$100 \$200	

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(a) Does the undersigned represent all owners of the currently auti	norized place(s) of use identified in this application?
(b) Will the ownership interest of any owner of the currently author	
affected if this application is approved as requested? ☐ Yes ☐ No (If yes, all owners must sign this app	Garden City Field Office
(c) If this application is not approved expeditiously, will there be su ☐ Yes ☐ No (If no, all owners must sign this appl	Division of Water Resources bstantial damage to property, public health or safety?
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, is of the currently authorized place of use, or their duly authorized
I hereby verify, being first duly sworn upon my oath or affirm 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 appropriate true, correct and complete.  Dated at	rized agent of the owner(s) to make this application on plication pertains. I further verify that the statements
Daleu at	
Michael & Camm (Owner)	(Jacqueline (J. Kamm)
michael Libann	Jacqueline J Hamm
(Please Print)	(Please Print)
(Owner)	(Spouse)
H0111e LOGEN	(Please Print)
(Please Print)	(Flease Fill)
(Owner)	MBER LOZANO Notary Public
(Please Print) St	ate of Oklahoma (Please Print)
State of Kanoas & Commis	assion Expires Dec 1, 2018
	anth
hereby certify that the foregoing application was signed in	my presence and sworn to before me this day of
	mule ronano
My Commission Expires Do Co 12018	Notary Public
	all of the applicable portions of the application form must be completed with
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, accurate information; maps, if necessary, must be included; signatures of all the the appropriate fee must be paid.	appropriate owners' must be affixed to the application and notarized; and
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accurate information; maps, if necessary, must be included; signatures of all the the appropriate fee must be paid.  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  (1) Application to change a point of diversion 300 feet or less.	DULE  der this section shall be accompanied by the application fee set ment of Agriculture  \$100
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(a) Does the undersigned represent all owners of the currently auth ☐ Yes ☐ No (If no, all owners must sign this appli	cation.)
(b) Will the ownership interest of any owner of the currently autho	rized 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 app	lication.) Garden City Field Office Division of Water Resources
(c) If this application is not approved expeditiously, will there be sul ☐ Yes ☐ No (If no, all owners must sign this appli	bstantial damage to property, public health or safety?
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Dated at Colora do Spring's , Kaneas, this	26th day of MAICH , 2018
(Owner)	(Spouse)
Tra las an Hann	
(Please Print)	(Please Print)
(Owner)	(Spouse)
(c.m.c.)	
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
State of Kansas-	
County of <u>61 P450</u>	
I hereby certify that the foregoing application was signed in massing the massing application was signed in massing the massing application was signed in massing the massing application was signed in massing application was signed in massing application.	
BRYAN F NOTARY F	PUBLIC 9 /
My Commission Expires May 10, 2021 MY COMMISSION EXP	134022182 / Notary Public
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, a	The same of the same same same same same same same sam
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Flle No.

2955 7661 12343 22520

