

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

1. File Number: 17989	2. Status Change Date:	3. Change Num: C2	4. Field Office: 4	5. GMD: 3
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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: 8/23/2019
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8a. Applicant(s) Person ID 57221
 New to system Add Seq# _____

MICHAEL S & JANA E ESAU
4706 CC RD
COPELAND, KS 67837

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

8b. Landowner(s) Person ID 4925
 New to system Add Seq# _____

SHERRILL D & JOYCE M ESAU
300 E PARKS AVE
MONTEZUMA, KS 67867-8808

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

8a

9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: 12/31/2019 N & P Date to Comply: 12/31/2020

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: **8/26/2019** By: **AM**
 Date Entered: _____ By: _____

File No. **17989** 11. County: **GY** Basin: **CROOKED CREEK** Stream: _____ Formation Code: **211** Special Use: _____

12. Points of Diversion
 CHK
 MOD
 DEL PDIV
 ENT

Rate and Quantity

Authorized Additional

Qualifier S T R ID 'N 'W Comment (AKA Line) Rate gpm Quantity af Rate gpm Quantity af Overlap PD Files

DEL 72562

ENT SE NE NW 21 28S 30W 4557 2792 1050 200 1050 200

13. Storage: Rate _____ NF Quantity _____ ac/ft Additional Rate _____ NF Additional Quantity _____ ac/ft

14. Limitation: _____ 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 CHK MOD DEL ENT	PUSE	S	T	R	ID	NE¼				NW¼				SW¼				SE¼				Total	Owner	Chg?	Overlap Files	
						NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼					
CHK 16495																									8b	N

Base Acres: _____ Year: _____ Minimum Reasonable Quantity: _____

Comments: _____

Garden City Field Office
4532 W. Jones, Suite B
Garden City, KS 67846



Phone: 620-276-2901
Fax: 620-276-9315
www.agriculture.ks.gov

Mike Beam, Secretary

Laura Kelly, Governor

August 26, 2019

MICHAEL S & JANA E ESAU
4706 CC RD
COPELAND, KS 67837

RE: Water Right, File No. 17989

Dear Sir or Madam:

Enclosed is the order executed by the designee of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, approving the application for change under the above referenced file number.

Your attention is directed to the enclosures and to the terms, conditions, and limitations specified in this approval for change. A condition of this approval is that an acceptable water flow meter must be installed on the diversion works authorized under the referenced file number and meet current specifications. Please return the required notification of completion of the diversion works and installation of the required meter as soon as these actions are completed.

Since the order modifies the original document referred to above, it should be recorded with the Register of Deeds as other instruments affecting real estate.

Should you have any questions, please feel free contact this office. If you would prefer, you could arrange an appointment for additional assistance.

Sincerely,

A handwritten signature in blue ink that reads "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc:
Sherrill & Joyce Esau
GROUNDWATER MANAGEMENT DISTRICT NO. 3

CERTIFICATE OF SERVICE

On this 26th day of August, 2019, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 17,989 dated 26th day of August, 2019 was mailed postage prepaid, first class, US mail to the following:

MICHAEL S & JANA E ESAU
4706 CC RD
COPELAND, KS 67837

Pc:

SHERRILL D & JOYCE M ESAU
300 E PARKS AVE
MONTEZUMA, KS 67867-8808

GROUNDWATER MANAGEMENT DISTRICT NO. 3



Division of Water Resources Staff

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. 17989

RECEIVED
 11:15 AM
 AUG 23 2019

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: MICHAEL S & JANA E ESAU

4706 CC RD, COPELAND, KS 67837

Phone Number: (620)846.2989 Email address: mesau@ucom.net

Name and address of Water Use Correspondent: Same

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: SHERRILL D & JOYCE M ESAU

ADDRESS: 300 E PARKS AVE, MONTEZUMA, KS 67867-8808

(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: _____

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>100.00</u> TR # _____ Receipt Date <u>8-23-19</u> Check # <u>8406</u>
--

5. **Presently authorized point of diversion:**
 One in the NE Quarter of the NE Quarter of the NW Quarter of Section 21, Township 28 South, Range 30 (W), in GY _____ County, Kansas, 4575 feet North 2745 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
(DWR use only: Computer ID No. 5 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 NE Quarter of the NE Quarter of the NW Quarter of Section 21, Township 28 South, Range 30 (W), in GY _____ County, Kansas, 4557 feet North 2792 feet West of Southeast corner of section.
 Proposed Rate _____ Proposed Quantity _____ Proposed well depth (feet) 460.
 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) Casing collapsed

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

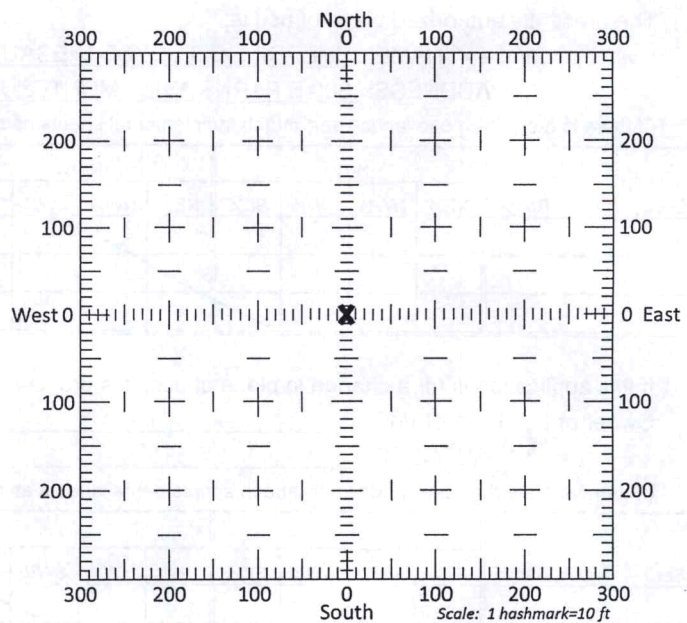
9. The change(s) (was)(will be) completed by?
ASAP

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

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.)

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 Copeland, Kansas, this 23 day of August, 2019.

<u>[Signature]</u> (Owner)	_____ (Spouse)
<u>Michael Esay</u> (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)

State of Kansas }
County of Gray } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 23 day of August, 2019.

[Signature]
Notary Public

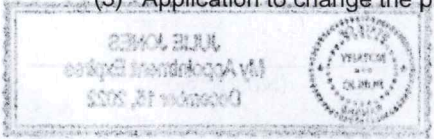
My Commission Expires 2-19-2021

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

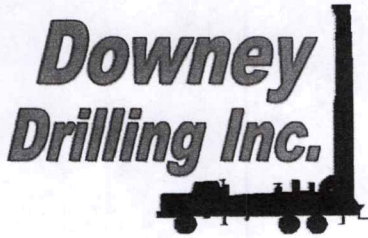
Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

- (1) Application to change a point of diversion 300 feet or less \$100
- (2) Application to change a point of diversion more than 300 feet \$200
- (3) Application to change the place of use \$200



WELL LOG

DATE: 8/16/2019



CUSTOMER NAME: SHERRILL & JOYCE ESAU

LEGAL: NENW 21-28S-30W

COUNTY: GRAY

GPS: N 37.603757

W 100.607375

TEST HOLE #1

DRILLER: ROCKY / DIEGO (LOGGER)

WO: 19-737

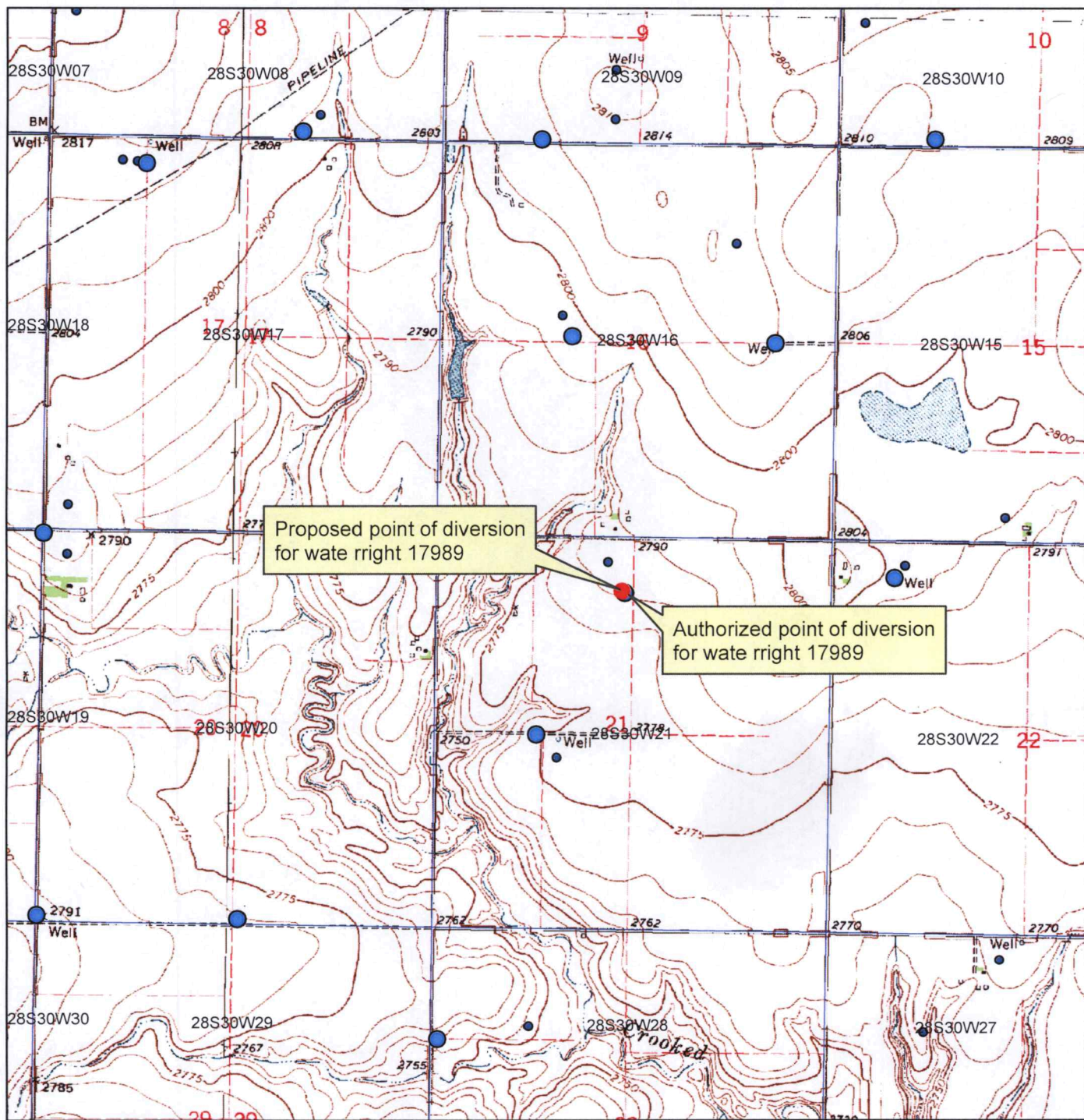
TW	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
	0	2	TOPSOIL	SOFT	DARK BROWN	FAST	NO	SMOOTH
	2	100	CLAY	SOFT	LIGHT BROWN	FAST	NO	SMOOTH
	100	120	CLAY WITH LIME	SOFT	LIGHT BROWN	FAST	NO	SMOOTH
	120	125	CLAY MIXED WITH LITTLE LIME	SOFT	WHITE, BROWN	FAST	NO	SMOOTH
	125	140	FIEN, MED. GRAVEL	SOFT	RED	FAST	NO	CHATTER
	140	201	MEDIUM-FINE SAND	SOFT	RED / TAN	FAST	NO	CHATTER
	201	207	MEDIUM, VERY COARSE SAND, FINE GRAVEL	SOFT	RED	FAST	NO	CHATTER
	207	215	MED. SAND W/SANDY CLAY	SOFT	LIGHT BROWN	FAST	NO	LT. CHATTER
	215	240	FINE, MED. GRAVEL	SOFT	RED	FASTER	NO	CHATTER
	240	260	MED, COARSE SAND W/FINE GRAVEL	SOFT	RED / TAN	FAST	NO	CHATTER
	260	265	MED. SAND W/SANDY CLAY	SOFT	BROWN	FASTER	NO	SMOOTH
	267	289	MED, COARSE SAND	SOFT	BROWN	NOT AS FAST	NO	CHATTER
	289	300	SANDY CLAY W/MED. SAND LENSES	SOFT	TAN	SAME AS ABOVE	NO	LT. CHATTER
	300	318	SANDY CLAY W/MED. SAND LENSES	SOFT	TAN	FASTER	NO	LT. CHATTER
	318	376	MED TR. COARSE SAND	SOFT	LIGHT BROWN	FAST	NO	SOME VIBRATION
	376	379	SANDY CLAY	FIRM	TAN	SLOWER	NO	CHOPPY
	379	389	MED. SAND W/SANDY CLAY	SOFTER	TAN	FASTER	NO	SOME CHATTER
	389	392	CLAY	STIFF	BROWN	SLOWER	NO	SMOOTH
	392	415	BROWN ROCK (SS), MED SAND W/TRCLAY	SOFTER	BROWN	LITTLE FASTER	NO	LT. CHOPPY
	415	423	CLAY	STIFF	BROWN /GRAY	SLOW	NO	SMOOTHER
	423	435	BROWN ROCK (SS), TR.CLAY	SOFTER	BROWN/GRAY	LITTLE FASTER	NO	LT. CHOPPY
	435	460	SHALE /CLAY	DENSE	RED, BLUE	SLOW	NO	SMOOTH
			QUIKGEL - 4 BAGS					
			SODA ASH - 1/4 BAG					
			WATER - 1 LOAD					
			HOLEPLUG - 2					
			CASING SEAL - 1					
			TEST HOLE IS PLUGGED.					

RECEIVED

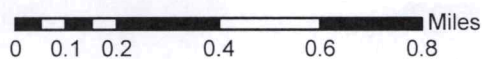
AUG 21 2019

Garden City Field Office
Division of Water Resources

Proposed change in point of diversion for water right 17989



- Authorized Point of Diversion
- Proposed Point of Diversion
- WWC5 well locations



All wells located within 1/2 mile are depicted on this map.