

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

1. File Number: 18672	2. Status Change Date: 11-4-19	3. Change Num: C1	4. Field Office: 04	5. GMD: 03
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: 10/31/19
8a. Landowner, applicant New to system <input type="checkbox"/> COX LAND 1111 RD 90 SUBLETTE KS 67877		Person ID 60323 Add Seq# 1	8c. WUC New to system <input type="checkbox"/> KENNETH COX 1111 RD 90 SUBLETTE KS 67877	
8b. Landowner(s) New to system <input type="checkbox"/>		Person ID _____ Add Seq# _____	8d. New to system <input type="checkbox"/>	
9. Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: 12/31/20		<input checked="" type="checkbox"/> N & P Date to Comply: 12/31/21		
<input type="checkbox"/> Anti-Reverse Meter <input type="checkbox"/> Meter Seal <input checked="" type="checkbox"/> Check Valve <input checked="" type="checkbox"/> N & P Form <input checked="" type="checkbox"/> Water Tube <input checked="" type="checkbox"/> Driller Copy <input type="checkbox"/> H & E Letter <input type="checkbox"/> Conservation Plan Date Required: _____ Date Approved: _____ Date to Comply: _____				
10. Use Made of Water From: _____ To: _____				
Date Prepared: 11/4/19 By: MAM Date Entered: 11/6/2019 By: L Moody				



Garden City Field Office
2508 Johns Street
Garden City, Kansas 67846-2804

Jackie McClaskey, Secretary
David W. Barfield, Chief Engineer
Michael A. Meyer, Water Commissioner

Phone: (620) 276-2901
Fax: (620) 276-9315
www.agriculture.ks.gov
Sam Brownback, Governor

November 4, 2019

KENNETH COX
1111 ROAD 90
SUBLETTE KS 67877-8033

RE: Water Right, File Nos. 18672 & 28195

Dear Sir:

Enclosed are orders executed by the designee of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, approving the applications for change under the above referenced file numbers.

Your attention is directed to these enclosures and to the terms, conditions, and limitations specified in these approvals for change. A condition of these approval is that acceptable water flowmeter must be installed on the diversion works authorized under the referenced file numbers 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 this order modifies the original document referred to above, it should be recorded with the Register of Deeds as other instruments affecting real estate.

The abandoned well must be plugged in accordance with the requirements of Article 30 of the Rules and Regulations as adopted by the Kansas Department of Health and Environment.

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,

A handwritten signature in blue ink that reads "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM:
enclosures
pc: GMD3

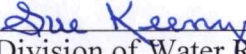
CERTIFICATE OF SERVICE

On this ^{5th} day of November 2019, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File Nos. 18,672 and 28,195, dated ^{4th} day of November 2019 was mailed postage prepaid, first class, US mail to the following:

KENNETH COX
1111 ROAD 90
SUBLETTE KS 67877-8033

With photocopies to:

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. 18672

RECEIVED
 2:00 pm
 OCT 31 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: COX LAND

1111 ROAD 90 SUBLETTE, KS. 67877

Phone Number: (620)272 1671 Email address: _____

Name and address of Water Use Correspondent: KENNETH COX

1111 ROAD 90 SUBLETTE, KS. 67877

Phone Number: (620)272-1671 Email address: _____

3. The presently authorized place of use is:

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	

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

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 \$ 100.00 TR # _____ Receipt Date 10-31-19 Check # 1728

5. **Presently authorized point of diversion:**
 One in the CN Quarter of the NE Quarter of the NE Quarter
 of Section 5, Township 28 South, Range 32 (W),
 in HASKELL County, Kansas, 5230 feet North 700 feet West of Southeast corner of section.
 Authorized Rate 1,115GPM Authorized Quantity 803AF Depth of well _____ (feet)
 (DWR use only: Computer ID No. 3 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 NW Quarter of the NE Quarter of the SOT/ (W)NE Quarter
 of Section 5, Township 28 South, Range 32 (W),
 in HASKELL County, Kansas, 5188 feet North 953 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) lack of production on current PD

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

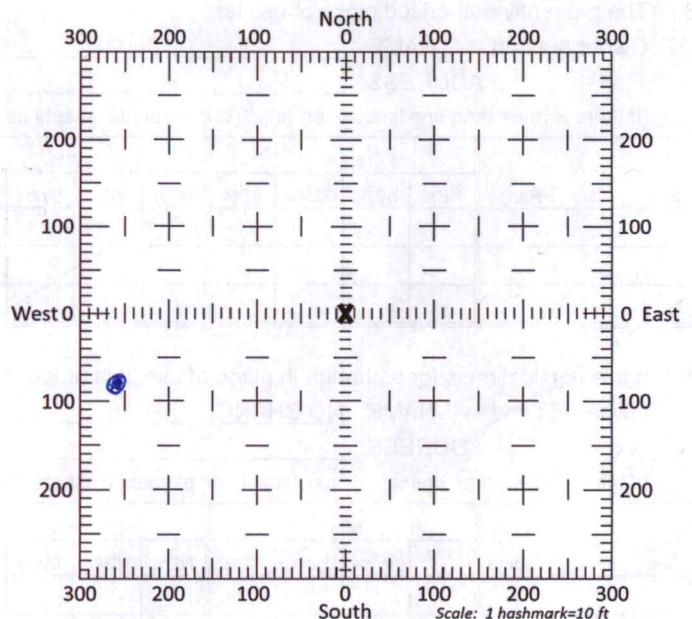
9. The change(s) (was)(will be) completed by?

10. If the point of diversion is a well:
 (a) What are you going to do with the old well?
To be plugged
 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by CAC

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.)

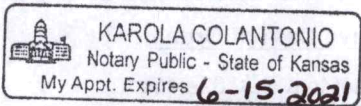
If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized 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 Sublette, Kansas, this 31 day of October, 2019.

<u>Kenneth Cox</u> (Owner)	_____ (Spouse)
<u>KENNETH COX</u> (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)

State of Kansas }
County of Waskell } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 31 day of Oct, 2019.

Karola Colantonio
Notary Public

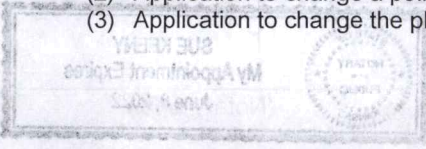
My Commission Expires 6-15-2021

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

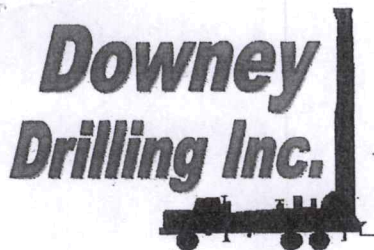
Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

- (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: 10-7-19



CUSTOMER NAME: Cox Farms

LEGAL: NE 5-28S-32W

#2

28195 COUNTY: Haskell
18672

GPS: N 37.649115 W 100.837946

NW NE NE UR
5188'N / 953'W

156' West & 54' South of Existing Well

DRILLER: Rocky

WO: 19-970

FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
0	9	Sandy Clay		Brown			
9	46	Clay		Brown w/ little Tan			
46	58	Sandy Clay w/ some Caliche		Brown			
58	94	Fine med sand w/ few clay stringers					
94	101	Sandy Clay		Brown & Tan			
101	118	Fine Med Course w/ couple clay ledges	Hard spot 118'				
118	131	Med Course small med few large gravel					Chatter
131	144	Sandy Clay		Brown			
144	167	Fine Med Course small gravel					Chatter
167	174	Med course few small gravel					Chatter
174	183	Med course few small gravel w/ little clay					Chatter
183	207	Med course small couple med gravel					Chatter
207	223	Med course small few med w/ few clay ledges					Chatter
223	229	Sandy Clay w/ few sand strips					
229	244	Fine Med course					Chatter
244	265	Sandy Clay w/ some fine sand strips		Tan			
265	270	Fine med course					Chatter
270	281	Sandy Clay w/ some sand strips		Tan			
281	328	Clay		Blue & Brown			Sticky
328	349	Med Course small gravel					Chatter
349	355	Sandy Clay		Brown			
355	396	Med course small gravel w/ couple clay ledges					Chatter
396	402	Sandy Clay		Tan			
402	427	Fine Med Course few small gravel w/ some clay stringers					Chatter
427	449	Fine Med Course					Chatter
449	458	Sandy Clay		Tan			
458	489	Fine Med Sand w/ some clay ledges					
489	510	Fine Med sand w/ few clay stringers					Drilled little Tight
510	529	Clay		Tan			Sticky
529	538	Fine Med Course w/ brown & tan rock & small gravel					
538	553	Med Course small grave w/ brow & tan rock					
553	574	Sandstone & Soapstone					
574	610	Shale					
610	625	Sandstone					
625	660	Shale					