

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

1. File Number: 19722	2. Status Change Date: 5-7-19	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:
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8a. Applicant(s) Person ID 30923 New to system <input type="checkbox"/> Add Seq# _____ WAYNE & EVALENA REYNOLDS LIVING TRUSTS 601 W CITY LIMITS ST HUGOTON KS 67951-2247	8c. Landowner(s) Person ID _____ New to system <input type="checkbox"/> Add Seq# _____
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8b. Landowner(s) Person ID _____ New to system <input type="checkbox"/> Add Seq# _____ 8a	8d. WUC Person ID _____ New to system <input type="checkbox"/> Add Seq# _____ 8a
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9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: **12/31/2019** N & P Date to Comply: **2/31/2019**

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: **5/6/2019** By: **AM**
 Date Entered: _____ By: _____

File No. **19722** 11. County: **SV** Basin: **CIMARRON RIVER** Stream: _____ Formation Code: **211** Special Use: _____

12. Points of Diversion
 Rate and Quantity
 Authorized Additional
 Rate Quantity Rate Quantity
 gpm af gpm af Overlap PD Files

DEL 54697

ENT	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Rate gpm	Quantity af	Rate gpm	Quantity af	Overlap PD Files
	NE NE NW	27	31S	38W		4729	2760		705	260	705	260	NONE

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 28349																									8a	19702; 23923
CHK 10300																									8a	19702; 23923
CHK 12006																									8a	19702; 23923

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

Comments: _____

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



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

Mike Beam, Interim Secretary

Laura Kelly, Governor

WAYNE & EVALENA REYNOLDS LIVING TRUSTS
601 W CITY LIMITS ST
HUGOTON KS 67951-2247

RE: Water Right, File No. 19722

Dear Sir:

Enclosed is an 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 acceptable water flowmeter 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 this 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 to call this office. If you would prefer, you could arrange an appointment for additional assistance.

Sincerely,

A handwritten signature in blue ink, appearing to read "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM:
enclosures
pc:

GROUNDWATER MANAGEMENT DISTRICT NO. 3

CERTIFICATE OF SERVICE

On this 7th day of May, 2019, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 19,722 dated 7th day of May, 2019 was mailed postage prepaid, first class, US mail to the following:

WAYNE & EVALENA REYNOLDS LIVING TRUSTS
601 W CITY LIMITS ST
HUGOTON KS 67951-2247

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. 19722

RECEIVED
 9:00 AM
 MAY 01 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: WAYNE & EVALENA REYNOLDS LIVING TRUSTS

601 W CITY LIMITS ST, HUGOTON KS 67951-2247

Phone Number: (620)544-6600

Email address: _____

Name and address of Water Use Correspondent: Same

Phone Number: () _____

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: _____

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 5-1-19 Check # 5672

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the N2 Quarter of the N2 Quarter
 of Section 27, Township 31 South, Range 38 (W),
 in SV County, Kansas, 4665 feet North 2740 feet West of Southeast corner of section.
 Authorized Rate 705 gpm Authorized Quantity 260 AF Depth of well _____ (feet)
 (DWR use only: Computer ID No. 1 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 N2 NE Quarter of the N2 NW Quarter
 of Section 27, Township 31 South, Range 38 (W),
 in SV County, Kansas, 4729 feet North 2760 feet West of Southeast corner of section.
 Proposed Rate 705 gpm Proposed Quantity 260 AF Proposed well depth (feet) 470
 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) _____

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

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

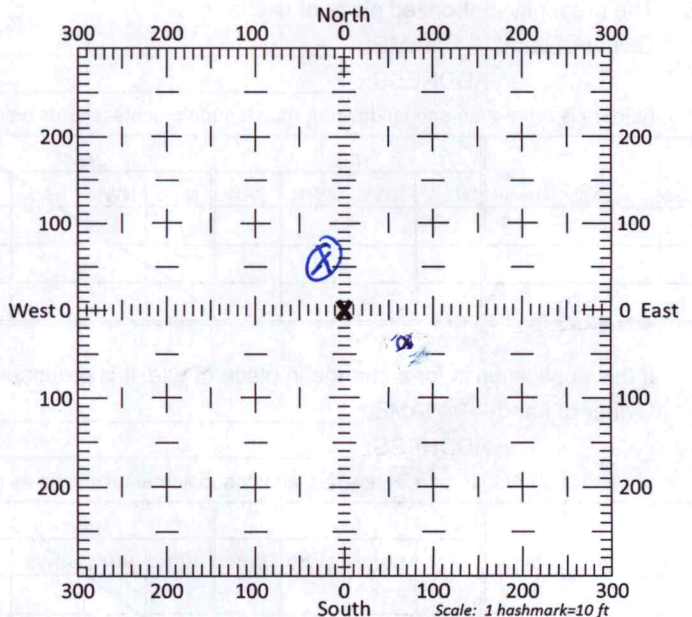
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

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 GARDEN CITY, Kansas, this 30th day of APRIL, 2019.

Wayne Reynolds
 (Owner)

 (Spouse)

WAYNE REYNOLDS
 (Please Print)

 (Please Print)

 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

State of Kansas }
 County of ANNEX } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 30TH day of APRIL, 2019.

My Commission Expires 9-14-22



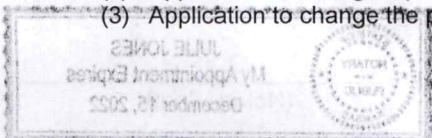
Catherine Reinert
 Notary Public

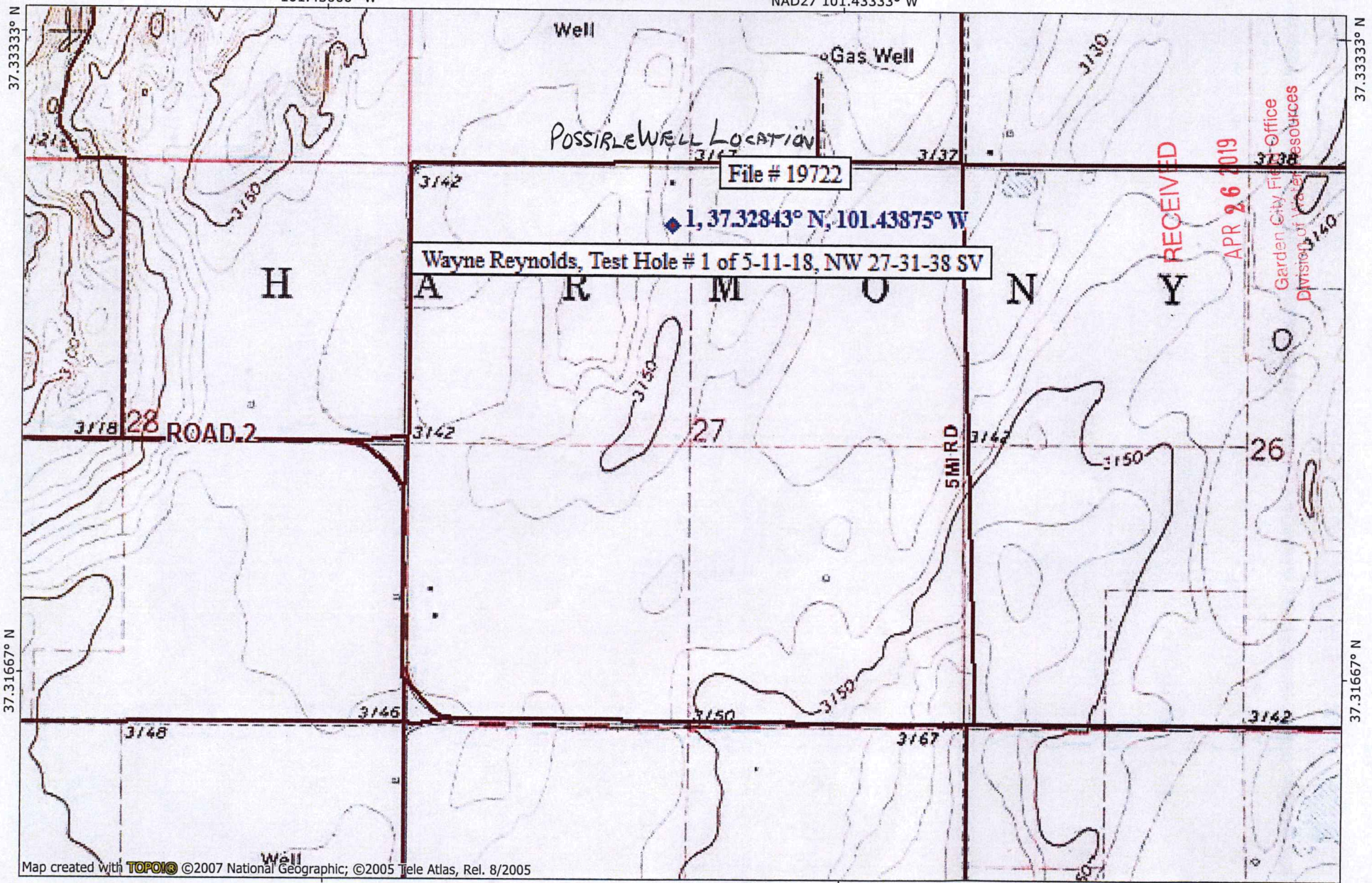
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, all of the applicable portions of the application form must be completed with accurate information; maps, if necessary, must be included; signatures of all the appropriate owners' must be affixed to the application and notarized; and the appropriate 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





Map created with TOPO! ©2007 National Geographic; ©2005 Tele Atlas, Rel. 8/2005

