

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

1. File Number: 26454	2. Status Change Date: 11/5/2019	3. Change Num: C1 C2	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: 11/1/19
8a. Landowner, applicant, WUC New to system <input type="checkbox"/> JEAN M KOELLING PO BOX 1120 DODGE CITY, KS 67801		Person ID 23311 Add Seq# 1	8c. WUC New to system <input type="checkbox"/> Person ID _____ Add Seq# 1	
8b. Landowner(s) New to system <input type="checkbox"/>		Person ID _____ Add Seq# _____	8d. New to system <input type="checkbox"/> Person ID _____ Add Seq# _____	
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: LMoody				

File No. **26454** 11. County: **HS** Basin: **CROOKED CREEK** Stream: _____ Formation Code: **211/331** Special Use: _____

12. Points of Diversion										Rate and Quantity				
CHK MOD DEL ENT	PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Authorized		Additional		Overlap PD Files
										Rate gpm	Quantity af	Rate gpm	Quantity af	
ENT	87725	NENWNW	30	28	31	W	5279'	4050'		1260	683	1260	0	NONE

DEL 43737

CHK 68506 **Lot 3 NW SW - Update per Change Order**

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		NE¼				NW¼				SW¼				SE¼				Total	Owner	Chg?	Overlap Files	
CHK MOD DEL ENT	PUSE	S	T	R	ID	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	19869																			

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



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 5, 2019

JEAN M KOELLING
PO BOX 1120
DODGE CITY, KS 67801

RE: Water Right, File Nos. 26454

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 this enclosure 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.

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

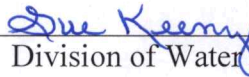
CERTIFICATE OF SERVICE

On this 6th day of November 2019, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 26,454, dated 5th day of November 2019 was mailed postage prepaid, first class, US mail to the following:

JEAN M KOELLING
PO BOX 1120
DODGE CITY, KS 67801

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.

RECEIVED

NOV 1 2019
8:30 AM
 Garden City Field Office
 Division of Water Resources

File No. 26454

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: JEAN KOELLING TRUST PO BOX 1120 DODGE CITY, KS 67801

Community foundation of SW Kansas - Koelling Trust

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: _____

JEAN KOELLING TRUST PO BOX 1120 DODGE CITY, KS 67801

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: JEAN KOELLING TRUST

ADDRESS: PO BOX 1120 DODGE CITY, KS 67801

(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>11-1-19</u>	Check # <u>33243</u>
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5. **Presently authorized point of diversion:**
 One in the CN Quarter of the NW CN Quarter of the NW Quarter of Section 30, Township 28 South, Range 31 W, in Haskell County, Kansas, 5238 feet North 4020 feet West of Southeast corner of section. Authorized Rate 1260 GPM Authorized Quantity 683 AF Depth of well _____ (feet)
(DWR use only: Computer ID No. 04 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 CN NE Quarter of the NW Quarter of the NW Quarter of Section 30, Township 28 South, Range 31 W, in Haskell County, Kansas, 5279 feet North 4050 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 NW Quarter of the NW Quarter of the LOT 3 (NW SW) Quarter of Section 30, Township 28 South, Range 31 (E/W) in Haskell County, Kansas, 2535 feet North 4645 feet West of Southeast corner of section. Authorized Rate 1520 GPM Authorized Quantity 432 AF Depth of well _____ (feet)
(DWR use only: Computer ID No. 05 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?

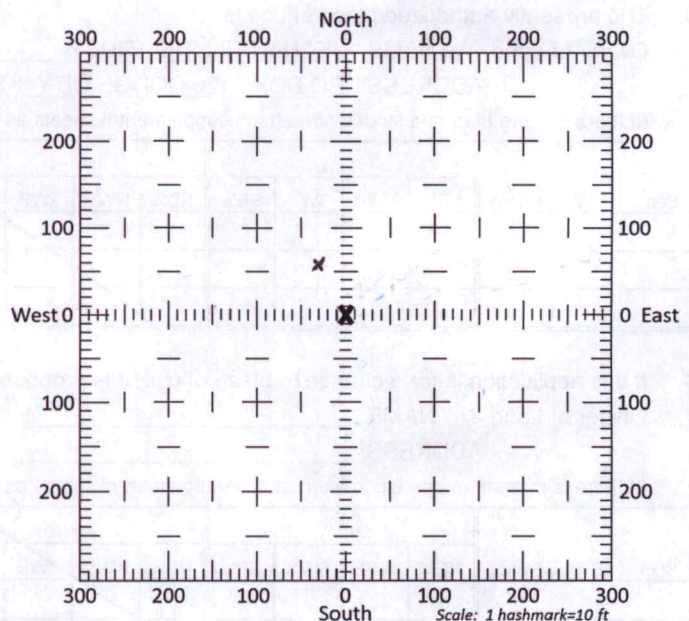
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by Sarah Zdanowski

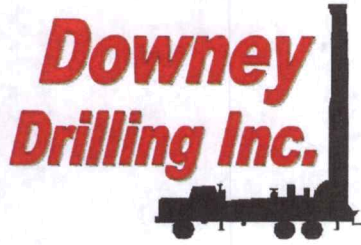
13a. If the proposed point of diversion will be relocated more than 300 feet but within 2,640 feet of the existing point of diversion, attach a topographic map or aerial photograph. For groundwater sources, show all wells (including domestic) within one-half mile of the proposed point of diversion and 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.)

WELL LOG

DATE: 10/2/2019



CUSTOMER NAME: JEAN KOELLING TRUST

LEGAL: NW 30-28S-31W

COUNTY: HASKELL

GPS: N 37.591116

W 100.757546

LOGGER:

DRILLER: DALE GUINN

WO: 19-810

TW	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
0	20	2:55 MIN						
20	40	2:05 MIN						
40	60	1:50 MIN						
60	80	2:20 MIN						
80	100	2:35 MIN						
100	120	2:55 MIN						
120	140	2:30 MIN						
140	160	2:00 MIN						
160	180	2:05 MIN						
180	200	2:25 MIN						
200	220	2:15 MIN						
220	240	2:05 MIN						
240	260	2:20 MIN						
260	280	2:10 MIN						
280	300	2:00 MIN						
300	320	2:00 MIN						
320	340	2:00 MIN						
340	360	2:00 MIN						
360	380	2:00 MIN						
380	400	2:05 MIN						
400	420	2:30 MIN						
420	440	2:10 MIN						
440	460	2:20 MIN						
460	480	2:10 MIN						
480	500	2:30 MIN						
500	520	2:55 MIN						
520	540	2:25 MIN						
540	560	2:05 MIN						
560	580	2:10 MIN						
580	600	3:15 MIN						
600	620	2:50 MIN						
620	640	3:45 MIN						
640	660	6:15 MIN						
660	680	6:10 MIN						
680	700	6:15 MIN						