

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

1. File Number: <b>10406</b>	2. Status Change Date: <i>4-20-2020</i>	3. Change Num: <b>C1</b>	4. Field Office: <b>04</b>	5. GMD: <b>03</b>
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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: <b>4/15/2020</b>
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8a. LANDOWNER, applicant, WUC New to system <input type="checkbox"/>  <b>WESTERN FARMS INC</b> <b>1555 XX RD</b> <b>COPELAND, KS 67837</b>	Person ID <u><b>19279</b></u> Add Seq# <u><b>1</b></u>	8c. Correspondent New to system <input checked="" type="checkbox"/>	Person ID _____ Add Seq# _____
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8b. Landowner(s), New to system <input type="checkbox"/>	Person ID _____ Add Seq# _____	8d. correspondent New to system <input type="checkbox"/>	Person ID _____ Add Seq# _____
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9. Documents and Enclosure(s):  DWR Meter(s) Date to Comply: **12/31/2020**     N & P Date to Comply: **3/1/2021**

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: **4/20/20**    By: **MAM**  
 Date Entered: \_\_\_\_\_    By: \_\_\_\_\_



File No. **10406**      11. County: **HS**      Basin: **ARKANSAS RIVER**      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		NWNWNW	15	28	31W		4345	5252		1750	320	1750	320	

DEL 51639

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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	1296																								
CHK	25208																								
CHK	52929																								

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

April 20, 2020

WESTERN FARMS INC  
1555 XX RD  
COPELAND, KS 67837

RE: Water Right, File No. 10406

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 the approval for change. Conditions of the 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 the order modifies the original documents 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, appearing to read "Michael A. Meyer".

Michael A. Meyer  
Water Commissioner

MAM:  
enclosures

pc: GMD3

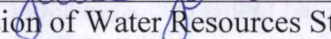
## CERTIFICATE OF SERVICE

On this 20<sup>th</sup> day of April 2020, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 10,406 dated 20<sup>th</sup> day of April 2020 were mailed postage prepaid, first class, US mail to the following:

WESTERN FARMS INC  
1555 XX RD  
COPELAND, KS 67837

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. 10406

RECEIVED  
 1:30pm  
 APR 15 2020  
 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: MAX KOEHN

1555 XX RD, COPELAND, KS 67837

Phone Number: (    )                      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: Same

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 4-15-20 Check # 1253



5. **Presently authorized point of diversion:**  
 One in the NW Quarter of the NW Quarter of the NW Quarter of Section 15, Township 28 South, Range 31 (W), in HS County, Kansas, 4640 feet North 5200 feet West of Southeast corner of section. Authorized Rate No Change Authorized Quantity No Change 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 NW Quarter of the NW Quarter of the NW Quarter of Section 15, Township 28 South, Range 31 (W), in HS County, Kansas, 4345 feet North 5252 feet West of Southeast corner of section. Proposed Rate No change Proposed Quantity No change Proposed well depth (feet) 700.  
 This point is:  Additional Well  Geo Center List other water rights that will use this point 12553

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) \_\_\_\_\_

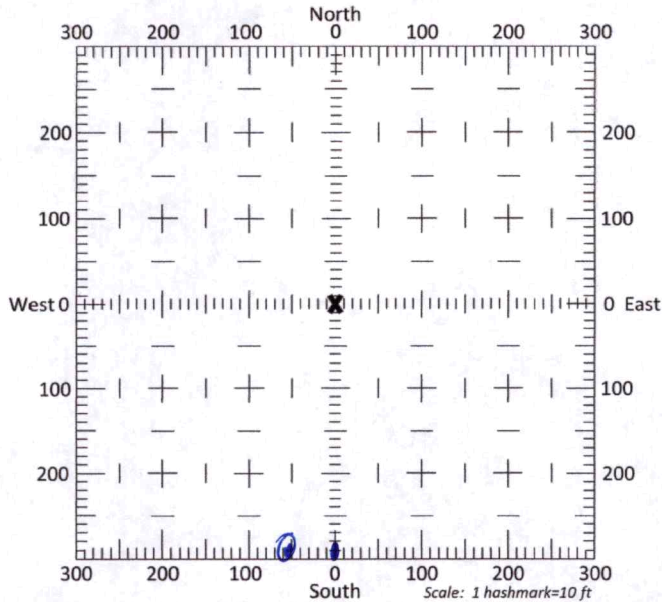
8. If a well, is the test hole log attached?  Yes  No

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 Copeland, Kansas, this 15 day of April, 2020.

Max Koehn  
\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

Max Koehn  
\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Owner)

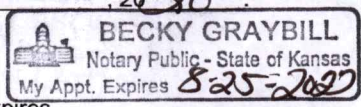
\_\_\_\_\_  
(Spouse)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Please Print)

State of Kansas  
County of Weskeel } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 15 day of April, 2020.



Becky Graybill  
\_\_\_\_\_  
Notary Public

My Commission Expires \_\_\_\_\_

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

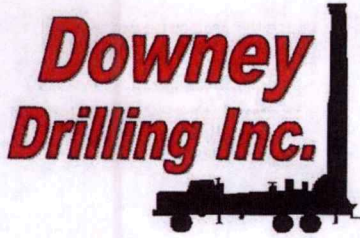






# WELL LOG

DATE: 3/12/2020



CUSTOMER NAME: MAX KOEHN

LEGAL: NW 15-28S-31W

COUNTY: HASKELL

GPS: N 37.617644

W 100.707070

TEST HOLE #1

SWL APPX. 405'

LOGGER:

DRILLER: DALE GUINN

WO: 20-076

TW	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
0	29		SANDY CLAY W/ SOME CALICHE	SOFT	BROWN	FAST		SMOOTH
29	80		CLAY	SOFT	BROWN	FAST		SMOOTH
80	104		FINE, MED SAND W/ FEW CLAY LAYERS	SOFT		FAST		SMOOTH
104	120		SANDY CLAY	SOFT	BROWN	FAST		SMOOTH
120	163		FINE, MED, COURSE SAND	SOFT		FAST		CHATTER
163	179		FINE, MED, COURSE SAND AND SMALL GRAVEL	SOFT		FAST		CHATTER
179	190		SANDY CLAY	SOFT	TAN	FAST		SMOOTH
190	275		FINE, MED, COURSE SAND, SMALL GRAVEL	SOFT		FAST		CHATTER
275	280		SANDY CLAY	SOFT	TAN	FAST		SMOOTH
280	361		FINE, MED, COURSE SAND W/ COUPLE CLAY LAYERS	SOFT		FAST		CHATTER
361	387		FINE, MED, COURSE SAND, SMALL GRAVEL	SOFT		FAST		CHATTER
387	397		FINE, MED, COURSE SAND W/ SOME CLAY STRINGERS	SOFT	TAN	FAST		CHATTER
397	406		FINE, MED, COURSE SAND, SMALL GRAVEL	SOFT		FAST		CHATTER
406	412		SANDY CLAY W/ FEW SAND STRIPS	SOFT	TAN	FAST		SMOOTH
412	431		FINE, MED, COURSE SAND, TR. FINE GRAVEL	SOFT		FAST		CHATTER
431	443		FINE, MED SAND	SOFT	TAN	FAST		LT. CHATTER
443	454		SANDY CLAY	SOFT	TAN	FAST		SMOOTH
454	473		FINE, MED, COURSE SAND	SOFT		FAST		CHATTER
473	484		SANDY CLAY	SOFT		FAST		SMOOTH
484	491		FINE, MED, COURSE SAND	SOFT		FAST		CHATTER
491	503		SANDY CLAY	SOFT	TAN	SEMI SLOW		SMOOTH
503	508		FINE SAND	SOFT		FAST		CHOPPY & VIBRATION
508	516		SANDY CLAY	SOFT	TAN / BROWN	SLOWER		SMOOTHER
516	530		FINE - MED SAND	SOFT	TAN / BROWN	FASTER		LT CHATTER
530	548		CLAY, SANDY CLAY	SOFT	TAN	SEMI SLOW		SMOOTH
548	581		FINE SAND, TR. MED SAND	SOFT	TAN / BROWN	FASTER		CHOPPY & LITTLE VIBRATION
581	612		SANDSTONE, BROWN ROCK W/ COUPLE SOAPSTONE LAYERS	LITTLE SOFT		SEMI SLOW		VIBRATION
612	618		SOAPSTONE	STIFF	YELLOW	SLOW		SMOOTH & CHOPPY
618	700		SHALE, FINE SAND LENSES @ 683' & 690' - 602'	TIGHT	BLUE	SLOW		CHOPPY
			QUIKGEL - 15					
			EZ MUD - 1/2 GAL					
			COPELAND LOADOUT \$25.00					
			CASING SEAL - 1					
			HOLEPLUG - 2					

STATIC

19

12

19

7

5

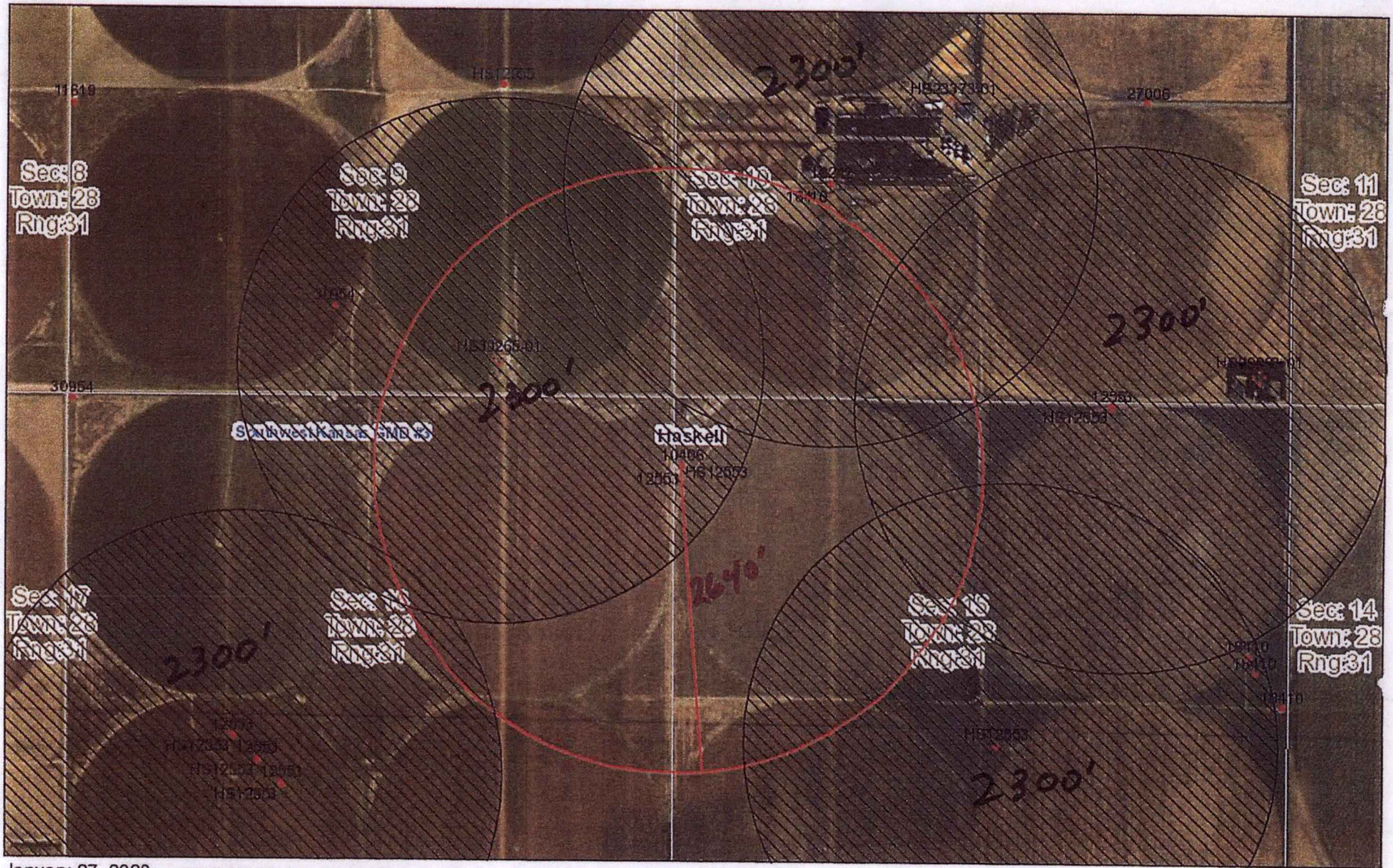
14

33

31

140





January 27, 2020  
08:42 AM

DISCLAIMER: This map is not intended for conveyances, nor is it a legal survey. The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments.

Wells	+	CON	●	FPR	▲	MUN	⚡	THX	□	Counties	
?	Other	⊠	DEW	+	HYD	⌂	REC	?	Empty	□	GMD 3
●	IRR	⊠	DOM	★	IND	⊠	STK	□	Sections		

