

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

1. File Number: 14266-D1	2. Status Change Date: 5-26-2020	3. Change Num: C5	4. Field Office: 04	5. GMD: 03
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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: 4/30/2020
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8a. LANDOWNER, New to system <input type="checkbox"/> FRED RITSEMA & YOKA RODENHUIS TRUSTS ATTN: LAKIN DAIRY PO BOX 389 LAKIN, KS 67860-0389	Person ID 67267 Add Seq# _____	8c. Correspondent New to system <input type="checkbox"/> Person ID _____ Add Seq# _____
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8b. Landowner(s), applicant, WUC New to system <input checked="" type="checkbox"/> QUALITY HAY LLC C/O MILTON BOEHS 1707 ROAD 45 LAKIN KS 67860	Person ID 67267 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: **5/26/2020** By: **MAM**

Date Entered: _____ By: _____

File No. **14266-D1** 11. County: **KE** 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		SENWSW	9	26	36W		1464	4059		1125	260	1125	260	
DEL 39891														

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	NE ¼	NW ¼	SW ¼					SE ¼	
CHK	949	9	26	S36W	5					40	40	40	40									160	8a	Y	MULTIPLE	
CHK	3162	5	26	S36W	1							6	13	40	38	23	38			17	10		185	8a	Y	MULTIPLE
MOD	14006	8	26	S36W	3					40	40	40	40					40	40	40	40		320	8b	Y	MULTIPLE
CHK	14915	9	26	S36W	4									40	40	40	40						160	8b	Y	MULTIPLE
MOD	4895	8	26	S36W	1	40	40	40	40														160	8a	Y	MULTIPLE

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

May 26, 2020

QUALITY HAY LLC
1707 ROAD 45
LAKIN KS 67860

RE: Water Right, File No. 14266-D1

Dear Sir and Madam:

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 that reads "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM:
enclosures

pc: FRED RITSEMA & YOKA RODENHUIS TRUSTS
ATTN: LAKIN DAIRY
PO BOX 389
LAKIN, KS 67860-0389

GMD3

CERTIFICATE OF SERVICE


On this 26th day of May 2020, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 14,266-D1 dated 26th day of May 2020 were mailed postage prepaid, first class, US mail to the following:

QUALITY HAY LLC
C/O MILTON BOEHS
1707 ROAD 45
LAKIN KS 67860

With photocopies to:

FRED RITSEMA & YOKA RODENHUIS TRUSTS
ATTN: LAKIN DAIRY
PO BOX 389
LAKIN, KS 67860-0389

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. 14266-D1

RECEIVED
 3:00 PM
MAY 22 2020

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

Garden City Field Office
 DIVISION OF WATER RESOURCES

2. Name and address of Applicant: CORWIN SMITH 1604 ROAD 45 LAKIN, KS 67860-6205 Quality Hay LLC
1707 Rd 45 Lakin KS 67860

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: FRED RITSEMA & YOKA RODENHUIS TRUSTS Attn: LAKIN DAIRY PO BOX
389 LAKIN, KS 67860-0389 SAME as Quality Hay LLC

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 5-22-20 Check # 40000

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the NC Quarter of the SW Quarter
 of Section 9, Township 26 South, Range 36 W,
 in Kearny County, Kansas, 1335 feet North 3960 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ 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 SE Quarter of the NE NW Quarter of the SW Quarter
 of Section 9, Township 26 South, Range 36 W,
 in Kearny County, Kansas, 1464 feet North 4059 feet West of Southeast corner of section.
 Proposed Rate _____ Proposed Quantity _____ Proposed well depth (feet) 520
 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?

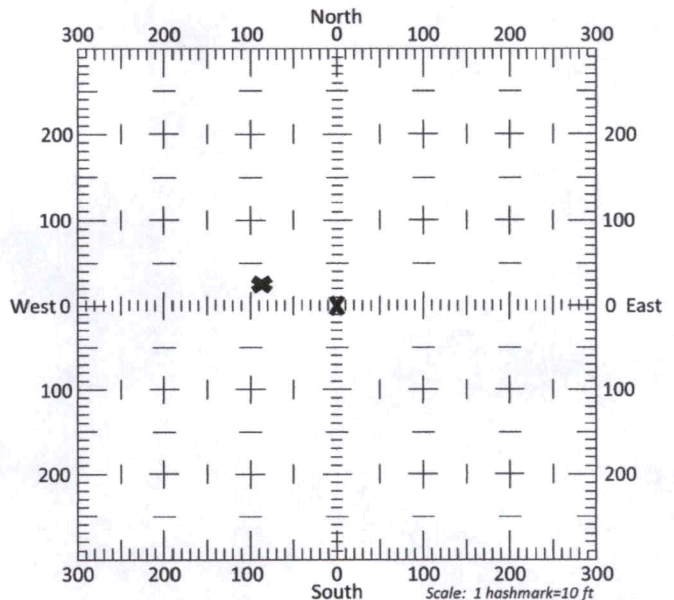
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by GCFO/SZ

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 _____, Kansas, this _____ day of _____, 20_____.

Quality Hay LLC by Darin Smith
(Owner)

(Spouse)

Darin Smith
(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas }
County of Kearny } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 22 day of May, 2020.

Paige D. Wideman
Notary Public

My Commission Expires 12/12/2023

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

#14266-01

DATE: 5/15/2020

Downey Drilling Inc.



CUSTOMER NAME: GORWIN SMITH *Quality Hay LLC 90 Darin Smith*

LEGAL: SW 9-26S-36W

COUNTY: KEARNY

GPS: 37.79803

TEST HOLE #1

-101.26761

DRILLER: REGELIO

WO: 20-316

TW	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
	0	5	TOPSOIL AND FINE SAND	SOFT	TAN	FAST		SMOOTH
	5	15	FINE-MEDIUM-COARSE GRAVEL	SOFT	RED	FAST		FAST CHATTER
	15	18	SANDY CLAY	SOFT	TAN	FAST		SMOOTH
	18	60	FINE-MEDIUM-COARSE SAND, FINE-MEDIUM-COARSE GRAVEL	SOFT	RED	FAST		FAST CHATTER
	60	100	MEDIUM-COARSE SAND, FINE-MEDIUM-COARSE GRAVEL	SOFT	RED	FAST		FAST CHATTER
	100	125	FINE-MEDIUM-COARSE GRAVEL AND VERY COARSE GRAVEL (INCREASE DRILLING FLUID VISCOSITY)	SEMI-FIRM	RED	FAST		CHOPPY / ROUGH
	125	130	SANDY CLAY, W/MED SAND	SOFT	TAN	FAST		FAST CHATTER
	130	148	FINE-MEDIUM-COARSE SAND, FINE-MEDIUM-COARSE GRAVEL, W/VERY COARSE GRAVEL	SOFT	RED	FAST		FAST CHATTER
	148	151	SANDYCLAY, W/FINE GRAVEL	SOFT	TAN	FAST		LT. CHATTER
	155	194	FINE-MEDIUM-COARSE GRAVEL, FINE-MEDIUM-COARSE SAND, AND FINE SAND	FIRM	RED	FAST		FAST CHATTER
	194	197	SANDY CLAY	SOFT	TAN	FAST		SMOOTH
	197	208	FINE-MEDIUM-COARSE SAND, FINE-MEDIUM-COARSE GRAVEL	FIRM	RED	FAST		FAST CHATTER
	208	222	SANDY CLAY	SOFT	TAN	FAST		SMOOTH
	222	260	MEDIUM-COARSE SAND	FIRM	RED	FAST		FAST CHATTER
	260	268	SANDY CLAY	SOFT	TAN	FAST		SMOOTH
	268	303	FINE-MEDIUM-COARSE SAND AND FINE SAND WITH SANDY CLAY	SOFT	TAN	FAST		FAST CHATTER
	303	325	FINE-MEDIUM-COARSE SAND, TR. SANDSTONE, TR. YELLOW / GRAY SOAPSTONE	SOFT	TAN / YELLOW	FAST		CHATTER AT TIMES
	325	345	CLAY	TIGHT	BLACK	SLOW		SMOOTH
	345	363	CLAY	TIGHT	GRAY / BROWN	SLOW		SMOOTH
	363	370	SANDSTONE	FIRM	BROWN	FAST		CHATTER
	370	387	CLAY / SHALE	TIGHT	LT GRAY	SLOW		SMOOTH
	387	401	CLAY / SHALE W/ SAND, SANDSTONE LENSES	SEMI-FIRM	GRAY	NOT AS SLOW		LT. CHATTER / SMOOTH
	401	406	SAND, SANDSTONE	SOFTER	GRAY / BROWN	FASTER		LT. CHATTER
	406	408	SHALE	DENSE	GRAY	SLOW		SMOOTH
X	408	458	BROWN ROCK, FINE-MED SAND, SANDSTONE	FIRM	BROWN	FAST		FAST CHATTER
	458	460	SHALE	DENSE	GRAY	SLOW		SMOOTH
X	460	508	FINE-MED SAND, SANDSTONE	SOFTER	BROWN / TAN	FAST		CHATTER
	508	520	SHALE	DENSE / STIFF	BLACK	SLOW		SMOOTH
	520	540	SHALE W/LIMESTONE AT 522	HARD	BLACK	SLOW	X	CHOPPY
			QUIK GEL - 7 SACKS					RECEIVED
			SODA ASH - 1 SACK					MAY 19 2020
			EZ MUC - 1 GAL.					
			WATER LOADS - 1 1/2					

Garden City Field Office
DIVISION OF WATER RESOURCES