

NOTICE

This scan only represents the application as filed. The information contained herein meets the requirements of K.A.R. 5-3-1 or K.A.R. 5-5-1, and has been found acceptable for filing in the office of the Chief Engineer. The application should not be considered to be a complete application as per K.A.R. 5-3-1b or K.A.R. 5-5-2a.

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. 16629

RECEIVED
 11:20 AM
DEC 04 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: R & R BERT LC ATTN: DAVID L & DONNA K SCHELL
4331 E HWY 160 ULYSSES KS 67880

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: SAME AS ABOVE

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 \$ 200.00 TR # _____ Receipt Date 12-4-20 Check # 3782

5. **Presently authorized point of diversion:**
 One in the (LOT 3) SE Quarter of the NE Quarter of the NW Quarter of Section 1, Township 28 South, Range 36 (W), in GRANT County, Kansas, _____ feet North _____ feet West of Southeast corner of section.
 Authorized Rate 1,150 GPM Authorized Quantity 640 AF Depth of well _____ (feet)
(DWR use only: Computer ID No. 02 GPS 4642 feet North 3906 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 SW Quarter of the NE Quarter of the NW Quarter of Section 1, Township 28 South, Range 36 (W), in GRANT County, Kansas, 4211 feet North 3867 feet West of Southeast corner of section.
 Proposed Rate 1,150 GPM Proposed Quantity 640 Proposed well depth (feet) 802'
 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) LOSS OF PRODUCTION

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

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

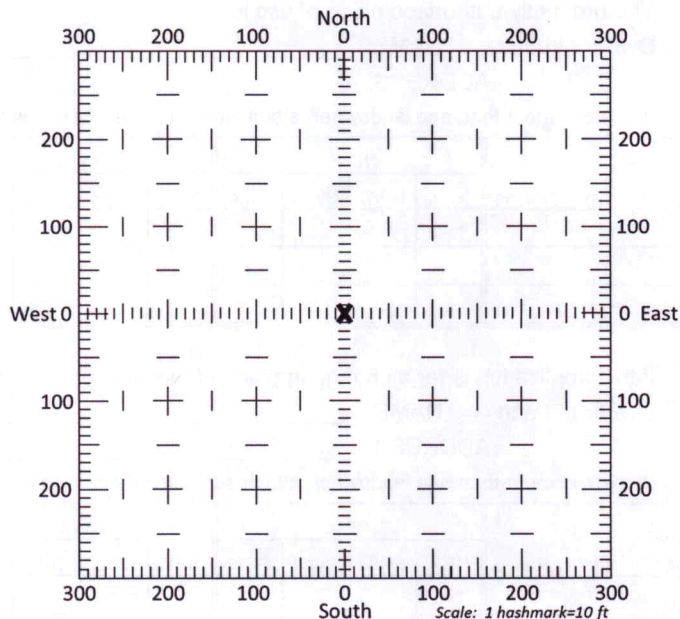
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by AM/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 4th day of December, 2020.

David Schell
 (Owner)
David Schell
 (Please Print)

Donna K Schell
 (Spouse)
Donna K Schell
 (Please Print)

 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

State of Kansas }
 County of Finney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 4th day of December, 2020.



My Commission Expires _____

Julie Jones
 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.

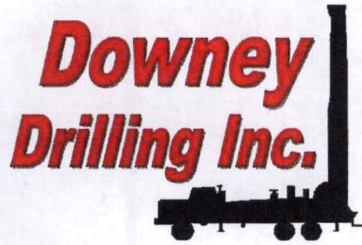
FEE SCHEDULE

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

WELL LOG

DATE: 9/16/2020



CUSTOMER NAME: DAVID SCHELL TH#2

LEGAL: NW 1-28S-36W

COUNTY: GRANT

GPS: 37.64597

-101.212333

LOGGER:

DRILLER: ROGELIO

WO: 19-117

TW	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
0	5		TOPSOIL	SOFT	BROWN	FAST		SMOOTH
5	22		BROWN CLAY	SOFT	LIGHT BROWN	FAST		SMOOTH
22	88		SANDY CLAY W/ CALICHE	SOFT	TAN & WHITE	FAST		SMOOTH & SLIGHTLY CHOPPY AT TIMES
88	110		FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
110	152		SMALL-MED GRAVEL W/ BIG ROCKS	STIFF		FAST		CHATTER
152	190		FINE-MED-COARSE SAND W/ SMALL GRAVEL	STIFF		FAST		CHATTER
190	205		YELLOW SANDY CLAY	SOFT	YELLOW	FAST		SMOOTH
205	230		BLUE CLAY	SOFT	BLUE	FAST		SMOOTH
230	279		COARSE SAND, FINE GRAVEL	SOFT	TAN / RED	FAST		FAST CHATTER
279	283		BROWN & BLUE CLAY	STICKY	BROWN & BLUE	FAST		SMOOTH
283	299		COARSE SAND W/ SANDY CLAY LENSES	SOFT	TAN & WHITE	FAST		VIBRATION & SMOOTH
299	323		MED-COARSE SAND, FINE GRAVEL	SOFT	TAN / RED	FAST		FAST CHATTER
323	325		SAND, SANDY CLAY	SOFT		FAST		VIBRATION
325	331		MED-COARSE SAND, FINE GRAVEL	SOFT	TAN / RED	FAST		CHATTER
331	341		CLAY, SANDY CLAY	STICKY	BROWN	FAST		SMOOTH
341	359		MED-COARSE, VERY COARSE SAND, FINE GRAVEL	SOFT	TAN	FAST		FAST CHATTER
359	363		CLAY	STICKY	BROWN	FAST		SMOOTH
363	388		VERY COARSE SAND, FINE-MED GRAVEL	SOFT	TAN / RED	FAST		VIBRATION SOME CHATTER
388	393		CLAY, SANDY CLAY	STICKY	BROWN	FAST		SMOOTH
393	413		MED-COARSE SAND, FINE TR. MED GRAVEL	SOFT	TAN / RED	FAST		FAST CHATTER
413	415		CEMENTED SAND	HARD		SLOW		CHATTER
415	441		MED-COARSE SAND W/ SMALL GRAVEL	LITTLE STIFF		FAST		FAST CHATTER
441	444		SANDY CLAY	SOFT	TAN	FAST		SMOOTH
444	449		FINE-MED-COARSE SAND W/ SMALL GRAVEL	LITTLE STIFF		FAST		FAST CHATTER
449	452		SANDY CLAY	SOFT	TAN	FAST		SMOOTH
452	457		FINE-MED-COARSE SAND W/ SMALL GRAVEL	FIRM		FAST		FAST CHATTER
457	485		CLAY, SANDY CLAY	SOFT	BROWN	FAST		SMOOTH
485	510		FINE-MED-COARSE SAND W/ BROWN ROCK	SEMI-FIRM	BROWN	FAST		CHATTER
510	521		CLAY/SHALE?	SOFT	BLUE	SLOW		SMOOTH
521	540		MED., TR. COARSE SAND	SOFT	TAN	FAST		CHATTER
540	549		CLAY/SHALE	STIFF	BLUE	SLOWER		SMOOTH
549	550		IRON PYRITE	HARD		SLOW	X	CHATTER
550	600		BLUE SHALE (TRIP OUT USE PDC)	SOFT	BLUE	SLOW		SMOOTH
600	610		BLUE SHALE	SOFT	BLUE	SLOW		SMOOTH
610	625		SAND, SANDSTONE	SEMI-SOFT	TAN	FASTER		LT. CHATTER
625	649		SHALE	SEMI-SOFT	BLUE	SLOW		SMOOTH

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

December 8, 2020

JERRELL D & ALFREDA P NIGHTINGALE
7600 E ROAD 8
ULYSSES, KS 67880-8043

RE: Water Right, File No. 16629

Dear Sir and Madam:

This is to advise you that R&R Bert LC has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to point of diversion under the above referenced application. An irrigation well is proposed to be relocated.

You can find the complete application posted by water right file number as referenced above at www.agriculture.ks.gov/divisions-programs/dwr/water-appropriation/notices

You are notified on this proposed point of diversion (well) so that you may furnish this office with any comments or other information you may want to submit. Such comments or other information must be received in this office within 15 days from the date of this letter.

Should you have any questions, please feel free to call this office. If you would prefer, an appointment could be arranged for additional assistance. Please refer to the file number when you contact us if you wish to discuss a specific file.

Sincerely,

A blue ink signature of Michael A. Meyer, written in a cursive style.

Michael A. Meyer
Water Commissioner

MAM
Pc:

MARSHALL K & SHAWNA B SMITH
14548 E ROAD 5
SATANTA, KS 67870-8700

Groundwater Management District No. 3

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

December 8, 2020

KIPP SMITH
14548 E ROAD 5
SATANTA, KS 67870

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Sincerely,

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

Michael A. Meyer
Water Commissioner

MAM
Pc:

Groundwater Management District No. 3