

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. 28200

RECEIVED
 8:00 AM
 JUN 22 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

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2. Name and address of Applicant: HOWARD C SMITH PO BOX 429 ELKHART, KS 67950

Phone Number: () _____ Email address: _____

Name and address of Water Use Correspondent: JOHN B SMITH JR & HOWARD C SMITH Attn: LOGAN SMITH 630 S BLVD
 RICHFIELD, KS 67953

Phone Number: () _____ Email address: _____

KS DEPT OF AGRICULTURE

3. The presently authorized place of use is:

Owner of Land ---- NAME: See supplemental

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: See supplemental

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 6-22-20 Check # 3318

F.O. 4, GMD 3, 5-5-1 Y, Use IRR, Source G, County MT, By BMM, 6-25-20

6/29/2020
 LMoody

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter
 of Section _____, Township _____ South, Range _____ 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 _____ 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 _____

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) _____

over top place of use

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

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

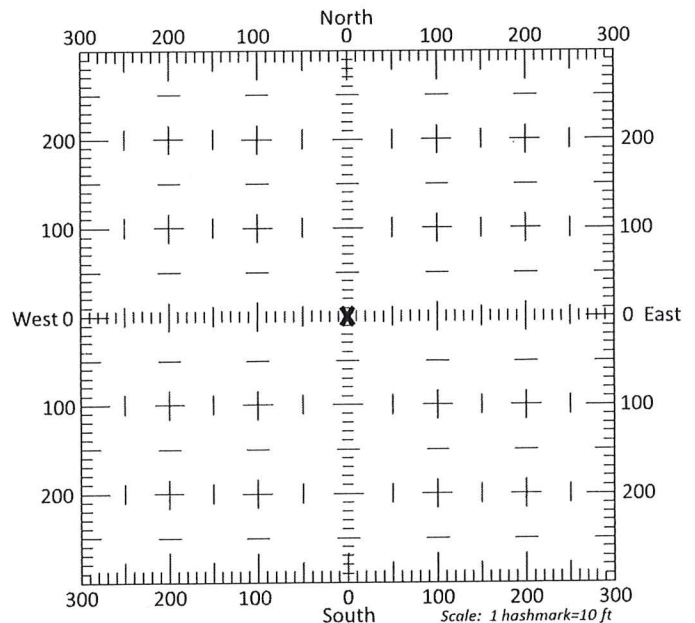
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (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.)

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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 E/Okla, Kansas, this 13th day of May, 2020.

John B Smith Jr
 (Owner)
John B Smith Jr
 (Please Print)

Howard C Smith
 (Owner)
HOWARD C. SMITH
 (Please Print)

Janis R Smith
 (Owner)
Janis R Smith
 (Please Print)

Shirley M Smith
 (Spouse)
Shirley M Smith
 (Please Print)

Janis R Smith
 (Spouse)
Janis R Smith
 (Please Print)


~~_____~~
 (Spouse)

~~_____~~
 (Please Print)

State of Kansas }
 County of Morton } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 13 day of May, 2020

My Commission Expires 8/21/2022



Vickie Coen
 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

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APPLICATION FOR APPROVAL TO CHANGE
THE PLACE OF USE AND/OR POINT OF DIVERSION
SUPPLEMENTAL SHEET

FILE NO. 28200
MAKE ADDITIONAL COPIES AS NECESSARY

3. *Continued:* The presently authorized place of use is:

Owner of Land ---- NAME: HOWARD C SMITH
ADDRESS: PO BOX 429 ELKHART, KS 67950

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	
23	32S	43W	40	40	40	40									40	40	40	40	320
24	32S	43W					40	40	40	40									160

Owner of Land ---- NAME: JOHN B SMITH JR & HOWARD C SMITH Attn: LOGAN SMITH
ADDRESS: 630 S BLVD RICHFIELD, KS 67953

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	
13	32S	43W										40	40	40	40				160

4. *Continued:* 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: HOWARD C SMITH
ADDRESS: PO BOX 429 ELKHART, KS 67950

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	
23	32S	43W	40	40	40	40									40	40	40	40	320
24	32S	43W					40	40	40	40									160

Owner of Land ---- NAME: JOHN B SMITH JR & HOWARD C SMITH Attn: LOGAN SMITH
ADDRESS: 630 S BLVD RICHFIELD, KS 67953

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	
13	32S	43W										40	40	40	40				160

Owner of Land ---- NAME: Martin Smith
ADDRESS: 625 S BLVD. Richfield, KS 67953

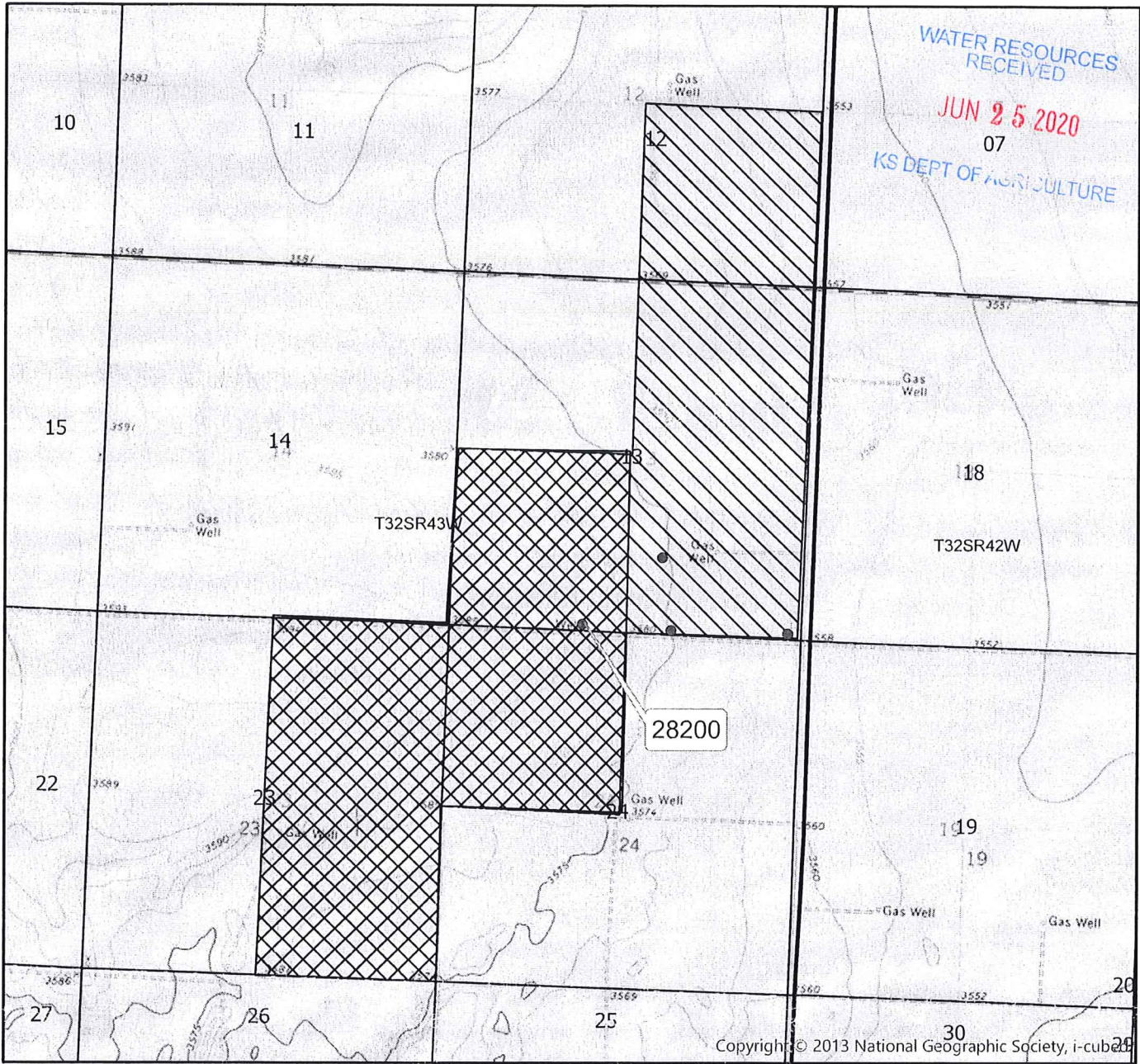
Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
12	32S	43W													40	40	40	40	160
13	32S	43W	40	40	40	40									40	40	40	40	320

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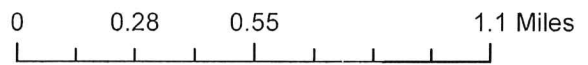
CHANGE IN PLACE OF USE WATER RIGHT, FILE NO. 28200



Township 32 South Range 43 West

Morton

~~Finney~~ County



Authorized Place of Use



Proposed Place of Use

All wells of any kind within 1/2 mile of the requested place of use have been plotted.

John B. Smith Jr.

(Signature)



Created by: SZ/GCFO

Kansas Department of Agriculture / Division of Water Resources
Garden City Field Office

TO: HEADQUARTERS attn richelle krueger

RE Vested Right; Water Right; Appropriation of Water; Application

File No(s). 20210 & 28200 County st

Enclosed are the following checked items:

A _____ FIR Full Partial Inspection Return to Field Office
 Proposed Certificate to deliver to Certificate Unit

A Compliance Check Inspection on _____
 Meter Install New App Chg App Other _____
 In Compliance Not in Compliance, why _____
Modify Point of Diversion No Yes, document attached
Indicate all overlapping p/d files _____

An application and judgment sheet with recommendation.
 A memorandum dated _____
 A request for an extension of time to perfect or complete.
 A verified report.
 A closure request.
 A field investigation report.
 Notice of Non-Compliance
 An ownership change (name(s) and address(es) below).
 A water use report for _____
 A letter dated _____

A copy of an **Approval** to Change the place of use and/or point of diversion,
 Filing Fee attached.

An Advanced **copy** of a change application and the filing fee, to be processed at the field office.

An original field office change **application** and the filing fee needing headquarters office review and further processing.

Other: **file no. 28200 is an unofficial KAR 5-5-11 current rotation with limiting acres condition, therefore, current proposal needs reiewed to now meet KAR 5-5-11**


Water Commissioner

6-22-2020
Date

1320 Research Park Drive
Manhattan, KS 66502
785-564-6700
www. agriculture.ks.gov



900 SW Jackson, Room 456
Topeka, KS 66612
785-296-3556

Mike Beam, Secretary

Laura Kelly, Governor

June 30, 2020

HOWARD C SMITH
PO BOX 429
ELKHART KS 67950

RE: File No(s). **28200**

Dear Sir or Madam:

The Division of Water Resources (Division) has received your application(s) to change the place of use, point of diversion or use made of water for the file number(s) referenced above. Please be aware that the Division may have a large number of pending applications on hand at times and makes every attempt to process them in the order in which they are received. You will be contacted if additional information is required.

Please note, this letter only acknowledges receipt of your application(s) and does not guarantee approval. In accordance with the provisions of the Kansas Water Appropriation(s) Act, the use of water as proposed prior to approval of the application(s) is unlawful.

Additional information about the process may be found on our website at agriculture.ks.gov/divisions-programs/dwr. If you have any other questions, please contact our office at 785-564-6640 or your local Garden City Field Office at 620-276-2901. If you call, please reference the file number so we can help you more efficiently.

Sincerely,

A handwritten signature in blue ink that reads "Richelle A. Krueger". The signature is written in a cursive style.

Richelle Krueger
Change Unit Lead
Water Appropriation Program