

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

1. File Number: 11217	2. Status Change Date: <u>1-22-2021</u>	3. Change Num: 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: 1/15/2021
--	---

8a. LANDOWNER, applicant, Correspondent Person ID **31817**
 New to system Add Seq# _____

W E LAND & CATTLE CO INC
ATTN: GENE WRIGHT
PO BOX 864
SUBLETTE, KS 67877-0864

8c. LANDOWNER Person ID **60507**
 New to system Add Seq# _____

ALICE LAVELLE KING
612 SUNDANCE DR
LOVELAND, CO 80538

8b. Landowner(s), Person ID **18802**
 New to system Add Seq# _____

PHILLIP WALLACE
PO BOX 493
SUBLETTE, KS 67877

8d. correspondent Person ID _____
 New to system Add Seq# _____

9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: 12/31/2021 N & P Date to Comply: 3/1/2022

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: **1/22/2021** By: **MAM**
 Date Entered: _____ By: _____

File No. **11217** 11. County: HS Basin: CIMARRON RIVER Stream: _____ Formation Code: **211/331** Special Use: _____

12. Points of Diversion Rate and Quantity
CHK Authorized Additional
MOD Rate Quantity
DEL PDIV Qualifier S T R ID 'N 'W **Comment (AKA Line)** gpm af gpm af Overlap PD Files
ENT

DEL 12481

ENT NWNESW 31 30 32W 2066 4618 2060 1177 2060 0 none

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 2553																				
CHK 9369																				
CHK 23339																				
CHK 29710																				
CHK 23200																				

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

January 22, 2021

W E LAND & CATTLE CO INC
Attn: GENE WRIGHT
PO BOX 864
SUBLETTE, KS 67877-0864

RE: Water Right, File No. 11217

Dear Sir:

Enclosed is the 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 the enclosures and to the terms, conditions, and limitations specified in the approval for change. A condition of the approval is that an acceptable water flow meter 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 contact 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:

PHILLIP WALLACE

ALICE LAVELLE KING

GMD3

CERTIFICATE OF SERVICE

On this 22nd day of January 2021, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 11, 217 dated 22nd day of January 2021 was mailed postage prepaid, first class, US mail to the following:


W E LAND & CATTLE CO INC
Attn: GENE WRIGHT
PO BOX 864
SUBLETTE, KS 67877-0864

Pc:

PHILLIP WALLACE
PO BOX 493
SUBLETTE, KS 67877

ALICE LAVELLE KING
612 SUNDANCE DR
LOVELAND, CO 80538

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. 11217

RECEIVED

JAN 15 2021

4:09 PM

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: WE LAND & CATTLE CO INC Attn: GENE WRIGHT
PO BOX 864 SUBLETTE KS 67877-0864

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 \$ 100.00 TR # _____ Receipt Date 1-15-21 Check # 4767

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the LOT 3 Quarter
 of Section 31, Township 30 South, Range 32 (W),
 in HASKELL County, Kansas, 1773 feet North 4578 feet West of Southeast corner of section.
 Authorized Rate 2060 GPM Authorized Quantity 1177 AF Depth of well _____ (feet)
(DWR use only: Computer ID No. 02 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 NE Quarter of the LOT 3 SW Quarter
 of Section 31, Township 30 South, Range 32 (W),
 in HASKELL County, Kansas, 2066 feet North 4618 feet West of Southeast corner of section.
 Proposed Rate 2060 GPM Proposed Quantity 1177 AF Proposed well depth (feet) 620
 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

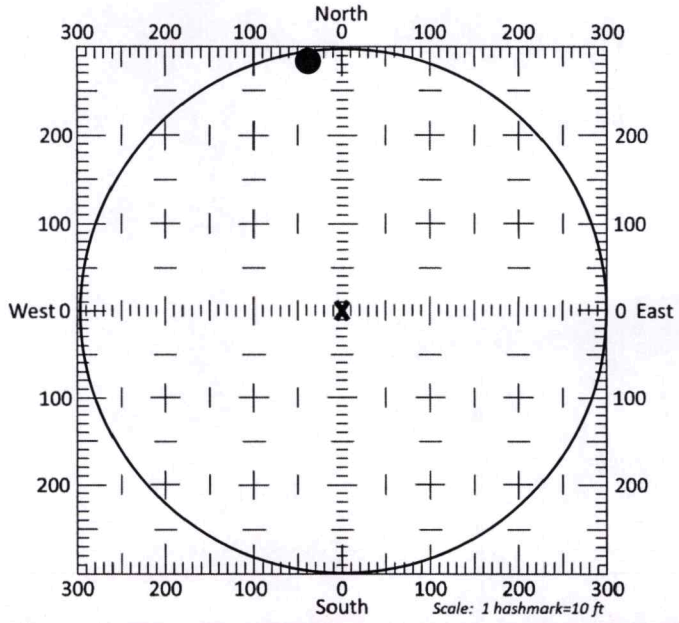
9. The change(s) (was)(will be) completed by?
UPON APPROVAL

10. If the point of diversion is a well:
 (a) What are you going to do with the old well?
PLUG / CAP
 (b) When will this be done? UPON COMPLETION

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 14th day of JANUARY, 2021.

WE Land & Cattle Inc
Eugene Wright PRES
 WE LAND & CATTLE INC
EUGENE WRIGHT PRES
 (Please Print)

 (Owner)

 (Please Print)

 (Owner)

 (Please Print)

 (Spouse)

 (Please Print)

 (Spouse)

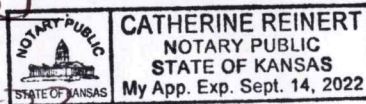
 (Please Print)

 (Spouse)

 (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 14TH day of JAN, 2021.



Catherine Reinert
 Notary Public

My Commission Expires 9-14-22

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

3795 W. Jones Ave.
 Garden City, KS 67846
 PH: 620-277-2389



PO Box 639
 Garden City, KS 67846
 Fax: 620-277-0224

CELL 620-260-6919

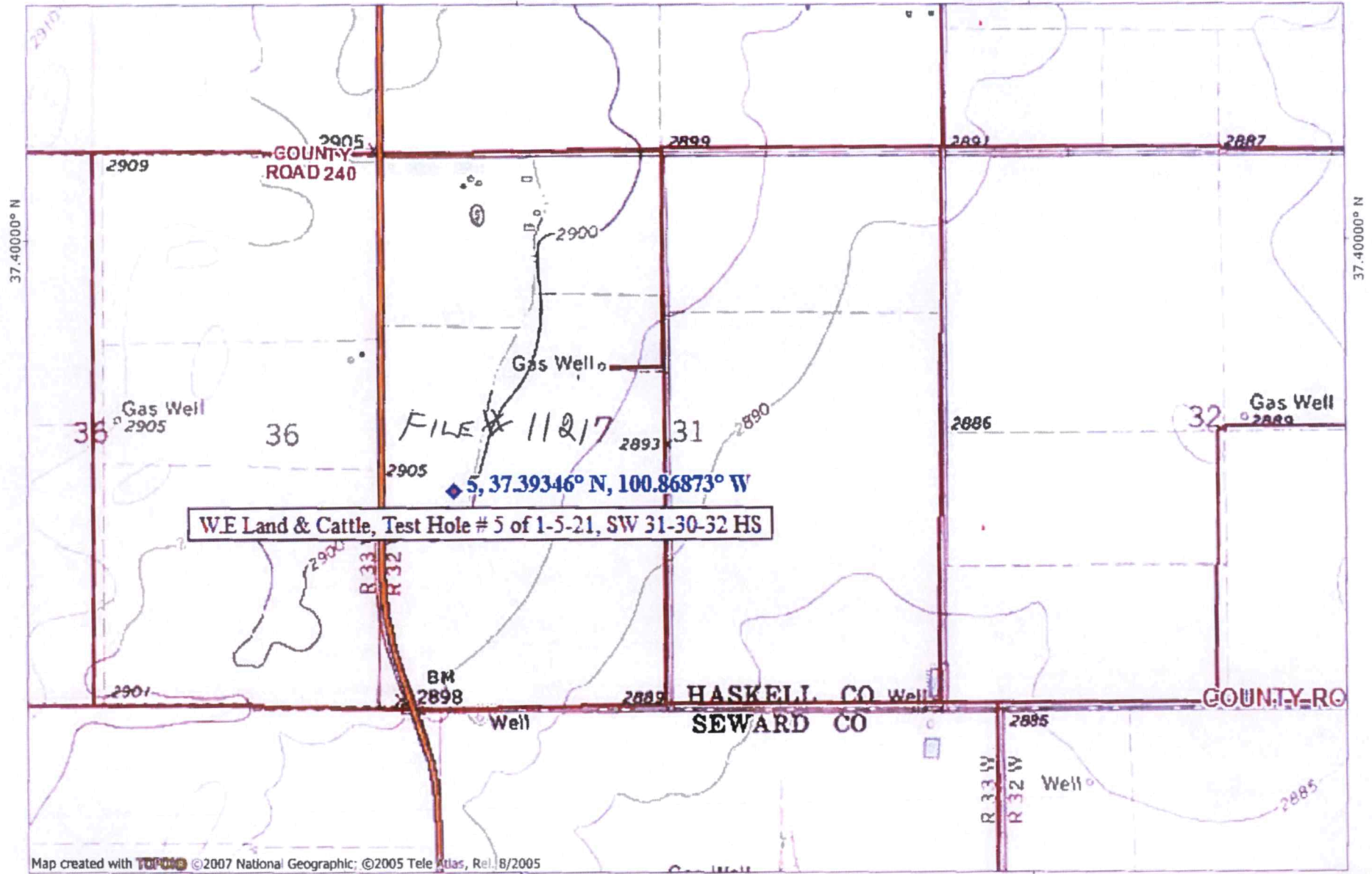
Customer Name: W.E. Land + Cattle / Gene Wright WO#: 21043 Date: 1-5-21
 Street Address: P.O. Box 864 Test #: 5 E LOG: No
 City, State: SUBLETTE, KS 67877 Driller: Dale Guinn
 County: Haskell Quarter: SW Section: 31 Township: 30 Range: 32
 Location: 293' North + 40' West of Existing Well GPS: N37.39346 W100.86873
 Rig #: 10002 Elevation: 2906' Static WL: 332' Estimated?
 Proposed Well Depth 620

WELL LOCATION 20' Sump

%	Footage			Description of Strata
	From	Pay	To	
	0		2	Top Soil
	2		11	Brown Sandy Clay w/ some Cal'ch
	11		46	Brown Sandy Clay & Cal'ch
	46		65	Brown Clay
	65		72	Fine Med Sand
	72		103	Fine Med Course Sand Small Med Gravel
	103		117	Brown Sandy Clay
	117		214	Fine Med Course Sand Small Med Gravel
	214		221	Brown + Light Blue Clay
	221		284	Fine Med Course Sand Small Gravel
	284		317	Fine Med Sand Few Course w/ Few Clay Layers
	317		349	Blue & Little Brown Clay
20	349	9	358	Fine Med Course Sand "Little Tight"
25	358	51	409	Fine Med Course Sand Small Gravel
	409		439	Brown Sandy Clay & Cal'ch w/ Few lime Rock Strips
5	439	12	451	Brown Sandy Clay & Cal'ch w/ some Sand Layers
	451		467	Brown Sandy Clay "Little Sticky"
10	467	22	489	Fine Sand
10	489	12	501	Fine Sand w/ Brown Rock & Few Clay Stringers
	501		539	Soapstone w/ Few Thin Sandstone Strips
10	539	21	560	Sandstone "Used Little Water"
10	560	40	600	Sandstone "Used some Water & Little Loose In Places"
	600		605	Soapstone & Limestone "Hard"
				Super Gel X -5
				Grout -5
				Hole Plug -6
				Perma Plug -1
				4 3/4 Dia Blade -1

TOPO! map printed on 01/06/21 from "Untitled.tpo"
100.86667° W

WGS84 100.85000° W



WE Land & Cattle, Test Hole # 5 of 1-5-21, SW 31-30-32 HS

5, 37.39346° N, 100.86873° W

FILE # 11217

36

31

32

Gas Well
2905

Gas Well

Gas Well
2889

BM
2898

HASKELL CO Well
SEWARD CO

Well

Map created with **TOPO!** ©2007 National Geographic; ©2005 Tele Atlas, Rel. 8/2005

100.86667° W

WGS84 100.85000° W



TN°MN
5°

01/06/21