

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

| | | | | |
|---------------------------------|---|-----------------------------|-------------------------------|----------------------|
| 1. File Number: 11394 | 2. Status Change Date: 3-9-2021 | 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: 3/8/2020 |
|--|--|

| | |
|---|---|
| 8a. Landowner, <input checked="" type="checkbox"/> New to system <input type="checkbox"/> Person ID 794 Add Seq# _____ ROBERT G BARNHARDT JR PO BOX 188 BUCKLIN, KS 67834-0188 | 8c. Landowner, <input type="checkbox"/> New to system <input type="checkbox"/> Person ID _____ Add Seq# _____ |
|---|---|

| | |
|--|--|
| 8b. Landowner(s), <input type="checkbox"/> New to system <input type="checkbox"/> Person ID _____ Add Seq# _____ | 8d. correspondent, applicant, <input type="checkbox"/> New to system <input type="checkbox"/> Person ID 62739 Add Seq# _____ BRANDON BARNHARDT 296 ROAD 120 SATANTA, KS 67870 |
|--|--|

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: **3/9/2021** By: **MAM**
 Date Entered: _____ By: _____

File No. **11394** 11. County: **HS** Basin: **CIMARRON 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 | | NESWSE | 15 | 29 | 34W | | 1102 | 1445 | | 1400 | 320 | 1400 | 320 | NONE |

DEL 43824

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 | 4850 | | | | | | | | | | | | | | | | | | | | | | | | |
| CHK | 11800 | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |

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

March 9, 2021

BRANDON BARNHARDT
296 ROAD 120
SATANTA, KS 67870

RE: Water Right, File No. 11394

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.

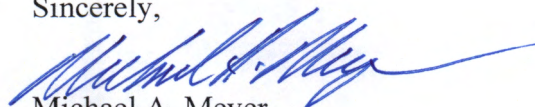
Your attention is directed to the enclosures and to the terms, conditions, and limitations specified in the approval for change. A condition of the approval is that an acceptable water flow meter must be installed on the diversion works authorized under the referenced file number and meet current specifications. 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 document 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,



Michael A. Meyer
Water Commissioner

MAM
enclosures
pc: Robert G Barnhardt Jr
GMD3

CERTIFICATE OF SERVICE

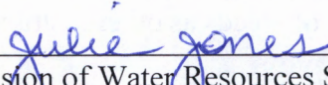
On this 9th day of March 2021, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 11,394 dated 9th day of March 2021 was mailed postage prepaid, first class, US mail to the following:

BRANDON BARNHARDT
296 ROAD 120
SATANTA, KS 67870

Pc:

ROBERT G BARNHARDT JR
PO BOX 188
BUCKLIN, KS 67834-0188

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. 11394

RECEIVED

MAR 08 2021
 3:15 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: BRADEN BARNHARDT

296 ROAD 120 SATANTA KS 67870

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: SAME AS ABOVE - NO CHANGE

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: SAME AS ABOVE - NO CHANGE

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 3-8-21 Check # 2030

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ NC Quarter of the _____ SE Quarter
 of Section _____ 15 _____, Township _____ 29 _____ South, Range _____ 34 _____ (W),
 in HASKELL _____ County, Kansas, _____ 1320 _____ feet North _____ 1320 _____ feet West of Southeast corner of section.
 Authorized Rate _____ -- _____ Authorized Quantity _____ -- _____ Depth of well _____ (feet)
(DWR use only: Computer ID No. 03 GPS 1336 feet North 1472 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 _____ NE Quarter of the _____ SW Quarter of the _____ SE Quarter
 of Section _____ 15 _____, Township _____ 29 _____ South, Range _____ 34 _____ (W),
 in HASKELL _____ County, Kansas, _____ 1102 _____ feet North _____ 1445 _____ feet West of Southeast corner of section.
 Proposed Rate _____ -- _____ Proposed Quantity _____ -- _____ Proposed well depth (feet) _____ 640' _____
 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?

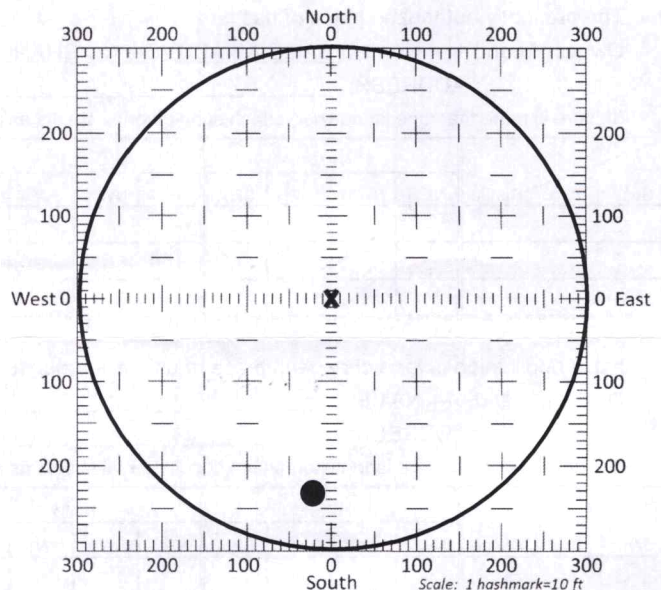
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by 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 a 300 foot radius of the existing point of diversion, indicate its location on the diagram shown above in relation to the existing point of diversion. The proposed point of diversion must be located within the circle shown above. (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 Lakin, Kansas, this 2 day of March, 2021.

Braden Barnhardt
 (Owner)

[Signature]
 (Spouse)

Braden Barnhardt
 (Please Print)

Brittany I Barnhardt
 (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 2nd day of March, 2021.

[Signature]
 Notary Public

My Commission Expires 9.11.22

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.

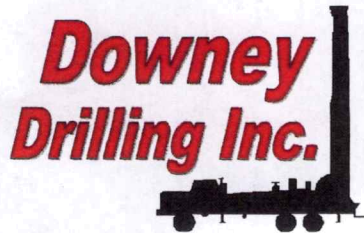
FEE SCHEDULE

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

WELL LOG

DATE: 9/22/2020



CUSTOMER NAME: BRADEN BARNHARDT TH#3

LEGAL: SE 15-29S-34W

COUNTY: HASKELL

GPS: 37.521453

-101.021984

LOGGER:

DRILLER: ROGELIO

WO: 20-664

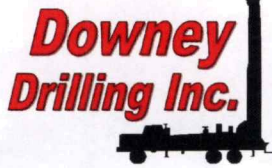
| TW | FROM | TO | TYPE | HARDNESS | COLOR | SPEED | PULL DOWN | OTHER / DRILLING ACTION | |
|-----|------|----|--|--------------|----------------------|---------------|-----------|-------------------------|--|
| 0 | 2 | | TOPSOIL | SOFT | DARK BROWN | FAST | | SMOOTH | |
| 2 | 10 | | BROWN CLAY | SOFT | BROWN | FAST | | SMOOTH | |
| 10 | 30 | | CALICHE | FIRM | WHITE | FAST | | VIBRATION | |
| 30 | 39 | | SANDY CLAY | SOFT | TAN | FAST | | VIBRATION | |
| 39 | 70 | | FINE-MED-COARSE SAND W/ FINE, TR. MED GRAVEL | SOFT | | FAST | | CHATTER | |
| 70 | 85 | | SANDY CLAY | SOFT | TAN | FAST | | SMOOTH | |
| 85 | 95 | | FINE-MED-COARSE SAND | SOFT | | FAST | | FAST CHATTER | |
| 95 | 124 | | FINE-MED-COARSE SAND W/ FINE GRAVEL | SOFT | | FAST | | CHATTER | |
| 124 | 129 | | SAND, SANDY CLAY | SOFT | TAN | FAST | | VIBRATION | |
| 129 | 152 | | FINE-MED-COARSE SAND W/ FINE-MED GRAVEL | SOFT | | FAST | | CHATTER | |
| 152 | 165 | | SANDY CLAY | SOFT | YELLOW | FAST | | SMOOTH | |
| 165 | 184 | | FINE-MED-COARSE SAND W/ FINE-MED GRAVEL | SOFT | | FAST | | CHATTER | |
| 184 | 197 | | SANDY CLAY | SOFT | BROWN | FAST | | SMOOTH | |
| 197 | 203 | | MED SAND | SOFT | TAN | FAST | | LT. CHATTER | |
| 203 | 209 | | MED-COARSE SAND, TR. FINE GRAVEL | SOFT | TAN | FAST | | FAST CHATTER | |
| 209 | 226 | | CLAY, SANDY CLAY | STICKY | BROWN | FAST | | SMOOTH | |
| 226 | 247 | | MED SAND, TR. COARSE, W/SANDY CLAY LENSES | SOFT | BROWN / TAN | FAST | | LT. CHATTER @ TIMES | |
| 247 | 266 | | CLAY, SANDY CLAY | STIFF | GREEN | SLOW | | SMOOTH | |
| 266 | 270 | | SANDY CLAY & FINE-MED SAND LAYERS | SOFTER | BROWN / TAN | FAST | | SMOOTH & VIBRATION | |
| 270 | 288 | | GREEN CLAY | SOFT | GREEN | FAST | | SMOOTH | |
| 288 | 306 | | GREEN CLAY W/ SILTY CLAY | SOFT | GREEN | SLOWER | | SMOOTH | |
| 306 | 318 | | MED-COARSE SAND, TR. FINE GRAVEL | SOFT | TAN | FASTER | | CHATTER | |
| 318 | 320 | | GREEN SILTY CLAY | STIFF | GREEN | FAST | | FAST CHATTER | |
| 320 | 341 | | BLUE SILTY CLAY | STIFF | BLUE | FAST | | FAST CHATTER | |
| 341 | 401 | | FINE-MED-COARSE SAND W/ FINE GRAVEL | SOFTER | TAN | FAST | | FAST CHATTER | |
| 401 | 408 | | SAND, SANDY CLAY, CLAY | FIRMER | TAN | SLOWER | | SMOOTHER | |
| 408 | 424 | | MED-COARSE SAND, TR. FINE GRAVEL | SOFT | TAN | FASTER | | SOME CHATTER | |
| 424 | 445 | | MED SAND, TR. COARSE W/SANDY CLAY LENSES | 21 SOFT | TAN | LITTLE SLOWER | | SOME CHATTER | |
| 445 | 449 | | CLAY | FIRMER | TAN & BROWN | SLOWER | | SMOOTH | |
| 449 | 466 | | MED-COARSE SAND, TR. FINE GRAVEL | 17 SOFTER | TAN | FASTER | | CHATTER | |
| 466 | 472 | | SANDY CLAY, CLAY | FIRMER | TAN & BROWN | SLOWER | | SMOOTH | |
| 472 | 555 | | FINE-MED-COARSE SAND W/ BROWN ROCK & FINE GRAVEL | 83 SOFTER | BROWN | FAST | | FAST CHATTER | |
| 555 | 586 | | SANDSTONE & BROWN ROCK, W/TR. SOAPSTONE | 31 SOFT | YELLOW, BROWN, WHITE | FAST | | FAST CHATTER | |
| | | | LOST 80% OF CIRCULATION AT 580' | | | | | | |
| 586 | 597 | | SOAPSTONE W/ SANDSTONE & BROWN ROCK | 11 FIRM | YELLOW, BROWN, WHITE | FAST | | FAST CHATTER | |

| TW | FROM | TO | TYPE | HARDNESS | COLOR | SPEED | PULL DOWN | OTHER / DRILLING ACTION |
|----|------|-----|--|----------|----------------------|-------|-----------|-------------------------|
| X | 597 | 624 | SANDSTONE & BROWN ROCK | STIFF | YELLOW, BROWN, WHITE | FAST | | FAST CHATTER |
| | 624 | 660 | RED BED | SOFT | RED | SLOW | | SMOOTH |
| | | | QUIKGEL - 15 BRAN - 5 | | | | | |
| | | | WATER LOADS - 3 MICRO FILL - 2 CUPS | | | | | |
| | | | SODA ASH - 1 HOLE PLUG - 2 | | | | | |
| | | | EZ MUD - 1/2 CASING SEAL - 1 | | | | | |
| | | | | | | | | |
| | | | | | | | | |

27

~~159~~

190



Well Design & Construction

"PROPOSED"

Customer Name: BRADEN BARNHARDT

Legal: SE 15-29S-34W

County: HASKELL

G.P.S.: 37.521453

Date: _____

-101.02198

WO #: _____

DRILLER: _____

WATER SUPPLY: TO BE DETERMINED

HELPER(S): _____

DRILLING RIG: M-100

BOREHOLE DIAMETER: 30"

DRILLING METHOD: REVERSE CIRCULATION

CASING DIAMETER: 16" .250 WALL

QUIKGEL: TBE **HOLE PLUG:** 20' +

TOTAL WELL DEPTH: 640'

GRAVEL: 150 TONS 4 X #1 C 1 X 70 C / 30 F 1 X 50 C / 50 F

DRILLING FLUID: TBE

GRAVEL SUPPLIER: HUBER

ADDITIONAL INFO: 36" SURFACE CASING @ #3 TEST HOLE - SOUTH OF PIVOT POINT

**GROUT
AND
GRAVEL**

**SCREEN AND
CASING**

