

# 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.

**RECEIVED**  
 11:01 Am  
 JAN 22 2021

File No. 13815

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: BUCK REXFORD

PO BOX 880 MEADE, KS. 67864

Phone Number: (620)629-1604

Email address: \_\_\_\_\_

Name and address of Water Use Correspondent: ALVA E REXFORD - Deceased

PO BOX 880 MEADE, KS. 67864

Phone Number: (620)629 1828

Email address: \_\_\_\_\_

3. The presently authorized place of use is:

Owner of Land ---- NAME: 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: 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		

For Office Use Only: Code \_\_\_\_\_ Fee \$ 200.00 TR # \_\_\_\_\_ Receipt Date 1-22-21 Check # 5632

5. **Presently authorized point of diversion:**  
 One in the SW Quarter of the SW Quarter of the NW Quarter of Section 25, Township 30 South, Range 29 (W), in MEADE County, Kansas, \_\_\_\_\_ feet North \_\_\_\_\_ feet West of Southeast corner of section.  
 Authorized Rate 1,530GPM Authorized Quantity 490AF 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 SW Quarter of the NW Quarter of the NW Quarter of Section 25, Township 30 South, Range 29 (W), in MEADE County, Kansas, 4443 feet North 5205 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 NW Quarter of the NW Quarter of the SE Quarter of Section 25, Township 30 South, Range 29 (W), in MEADE County, Kansas, \_\_\_\_\_ feet North \_\_\_\_\_ feet West of Southeast corner of section.  
 Authorized Rate 1,470 Authorized Quantity 470AF Depth of well \_\_\_\_\_ (feet)  
 (DWR use only: Computer ID No. 2 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 Quarter of the NW Quarter of Section 25, Township 30 South, Range 29 (W), in MEADE County, Kansas, 4213 feet North 2660 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) lack of production on current PD

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

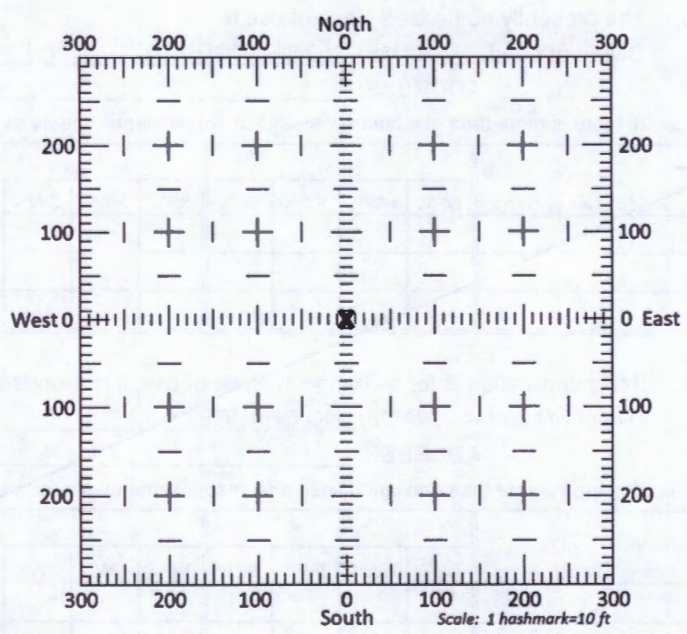
9. The change(s) (was)(will be) completed by?  
 \_\_\_\_\_

10. If the point of diversion is a well:  
 (a) What are you going to do with the old well?  
To be plugged  
 (b) When will this be done? \_\_\_\_\_

11. Groundwater Management District recommendation attached?  
 Yes  No

12. Assisted by CAC

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).

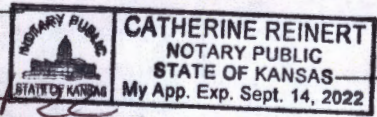
I hereby verify, being first duly sworn upon my oath or affirmation and under penalty of perjury, that I am of lawful age and the owner, the spouse of the owner, or a duly authorized agent of the owner(s) to make this application on their behalf, in regards to the water right(s) to which this application pertains. I further verify that the statements contained in this application are true, correct and complete.

Dated at GARDEN CITY, Kansas, this 21<sup>st</sup> day of JANUARY, 2021.

<u>Merc D Rexford</u> (Owner)	_____ (Spouse)
<u>MERC D. REXFORD</u> (Please Print)	_____ (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 21<sup>st</sup> day of JAN, 2021



My Commission Expires 9-14-22

Catherine Reinert  
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

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 22<sup>nd</sup> day of January, 2021.

_____	_____
(Owner)	<u>Marilyn J Rexford</u> (Spouse)
_____	_____
(Please Print)	<u>MARILYN J Rexford</u> (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 22<sup>nd</sup> day of January, 2021.



My Commission Expires \_\_\_\_\_

Julie Jones  
Notary Public

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- (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



**Hydro** **AN 16 REC'D**  
resources

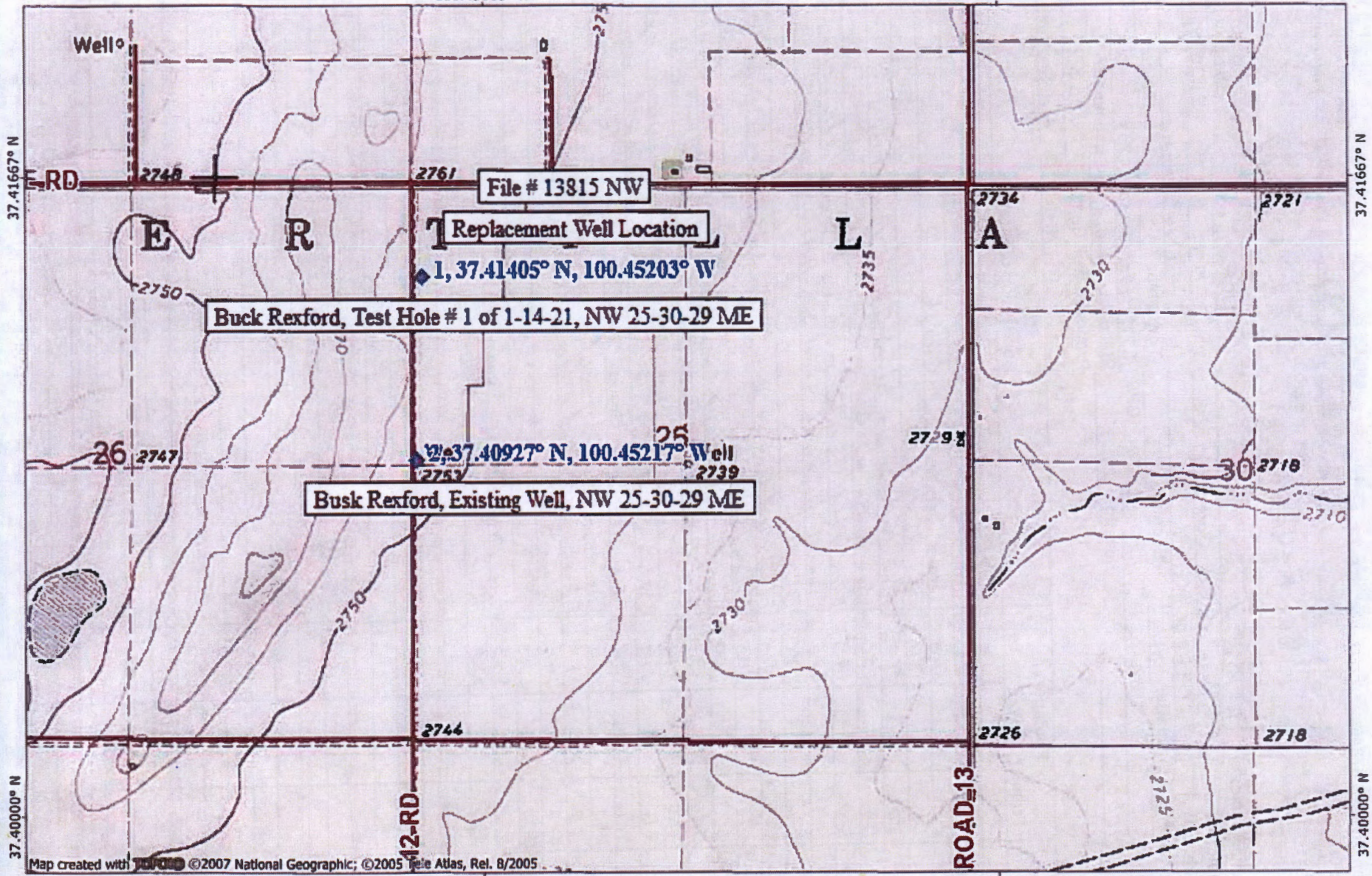
PO Box 639  
Garden City, KS 67846  
Fax: 620-277-0224

Buck Rexford Cell 620-689-1604

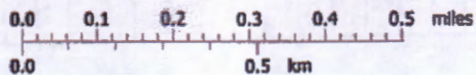
44°13'N 5205'W  
SW NWNW

Customer Name: Buck Rexford WO#: 21249 Date: 1-14-21  
Street Address: P.O. BOX 880 50 E. VINE Test #: 1 E LOG: Yes  
City, State: MEADE KS. 67864 Driller: Dale Guinn  
County: Meade Quarter: NW Section: 25 Township: 30 Range: 29  
Location: GPS: N37.41405 W100.45203  
Rig #: 10002 Elevation: 2769' Static WL: Approx. 275' Estimated?  
Proposed Well Depth 565'  
**WELL LOCATION** 20' SURF

%	Footage			Description of Strata
	From	Pay	To	
	0		2	Top Soil
	2		24	Brown Sandy Clay
	24		71	Brown Sandy Clay & Caliche
	71		80	Fine Med Sand
	80		94	Fine Med Course Sand Small Med Gravel
	94		120	Brown Sandy Clay
	120		149	Fine Med Course Sand Small Gravel w/Few clay layers
	149		275	Fine Med Course Sand Small Few Med Gravel
	275		280	Blue Clay
25	280	19	294	Fine Med Course Sand "Blue In Color" w/Couple Clay Layers
	294		303	Blue Clay
20	303	17	320	Fine Med Course Sand Small Gravel w/Some Blue Clay Layers
20	320	40	360	Fine Med Course Sand Small Gravel w/Some Blue & Brown Clay L.
25	360	51	411	Fine Med Course Sand Small Gravel w/Few Brown Clay Layers
5	411	8	419	Brown Sandy Clay w/Some Sand Strips
25	419	23	442	Fine Med Some Course Sand w/couple Clay Layers
	442		463	Brown Sandy Clay w/Lime Rock & Some Fine Sand
5	463	21	484	Fine Sand & Clay Mixed w/Few Lime Rock Strips
	484		497	Brown Sandy Clay
10	497	26	523	Fine Sand
25	523	22	545	Fine Med Course Sand
	545		580	Shale
				Super Gel X -4
				Hole Plug -7
				Perma Plug -1
				4 3/4 Drag Blanks -1



Map created with TopoTools ©2007 National Geographic; ©2005 File Atlas, Rel. 8/2005



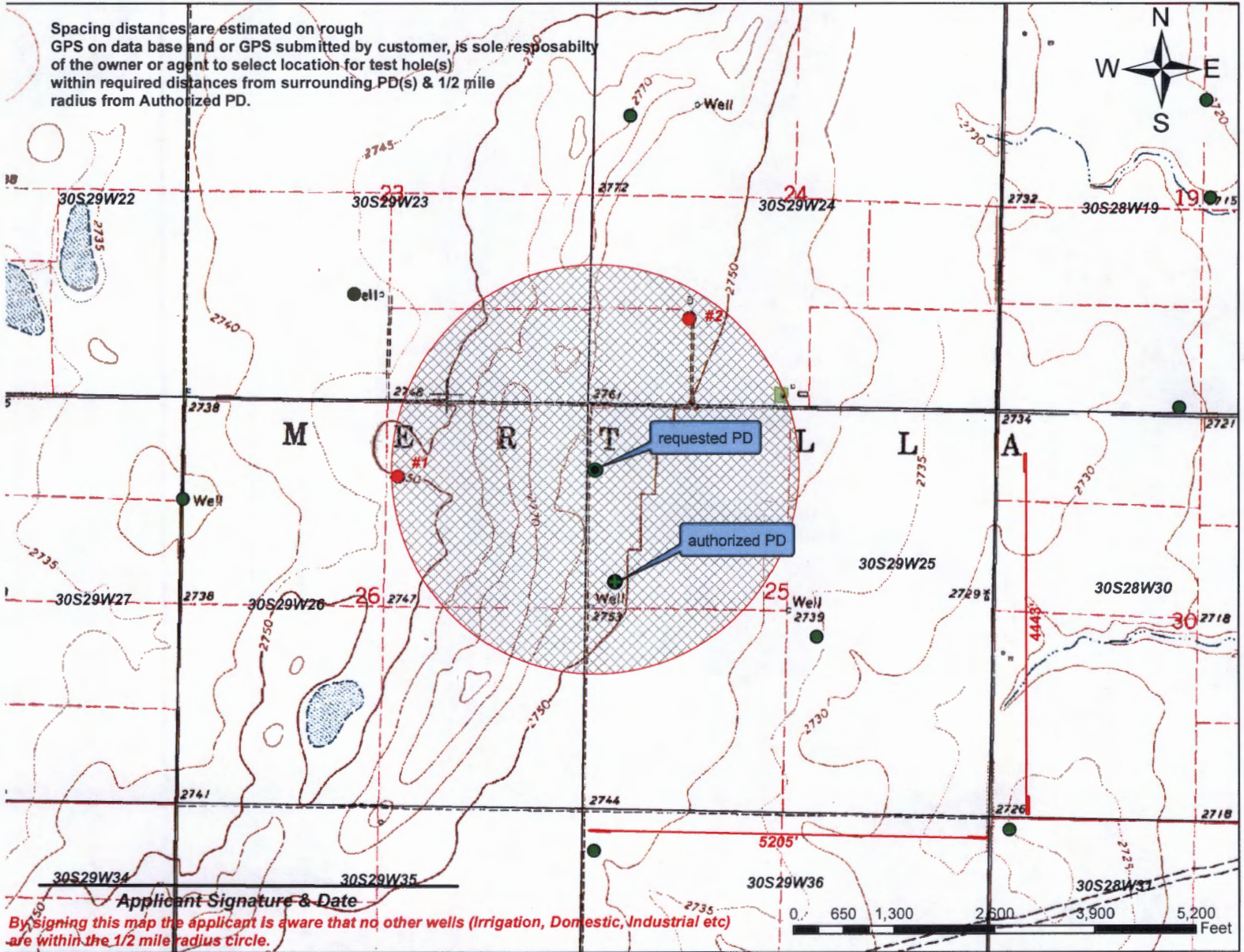
TN MN  
5°

01/15/21



**Point of Diversion Change WR 13815 #1  
T30S R29W Section 25  
Meade Co.**

Spacing distances are estimated on rough GPS on data base and or GPS submitted by customer, is sole responsibility of the owner or agent to select location for test hole(s) within required distances from surrounding PD(s) & 1/2 mile radius from Authorized PD.



Applicant Signature & Date

By signing this map the applicant is aware that no other wells (Irrigation, Domestic, Industrial etc) are within the 1/2 mile radius circle.

- Authorized PD
- Requested PD
- Point of Diversion
- ⊗ Half Mile Radius
- Active Water Right w/in 1/2 mile
- + domestic well w/in 1/2 mile
- ▨ Authorized PU
- ▨ Requested PD

**Water Right w/in 1/2 mile & Owner (if apply)**

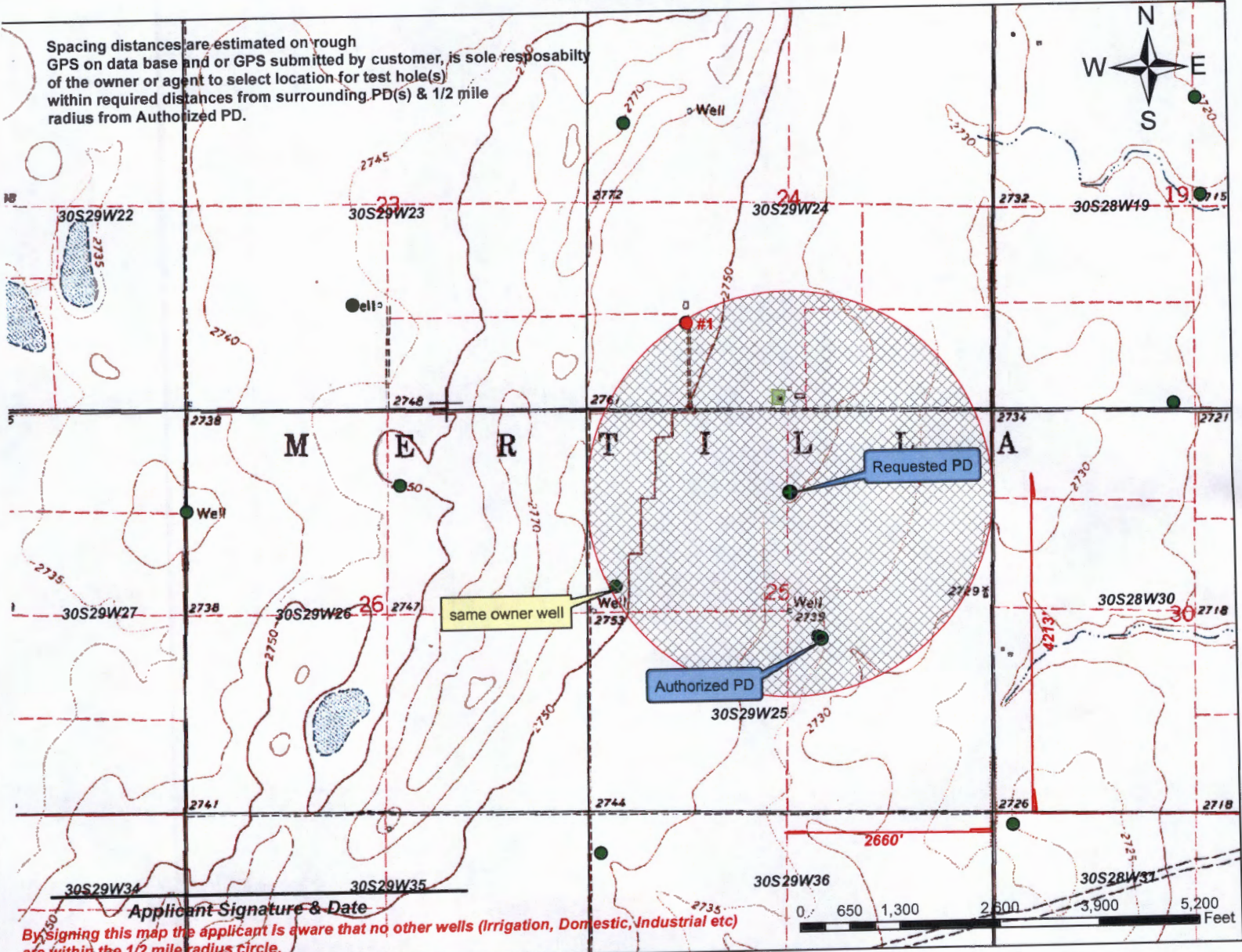
- #1 Water Right No. 32,177 Koesser Inc.
- #2 Water Right No 3997 Koesser Inc.

**Domestic well w/in 1/2 mile & Owner (if apply)**

- + A. - Domestic well

**Point of Diversion Change WR 13815 #2  
T30S R29W Section 25  
Meade Co.**

Spacing distances are estimated on rough GPS on data base and or GPS submitted by customer, is sole responsibility of the owner or agent to select location for test hole(s) within required distances from surrounding PD(s) & 1/2 mile radius from Authorized PD.



**Applicant Signature & Date**

*By signing this map the applicant is aware that no other wells (Irrigation, Domestic, Industrial etc) are within the 1/2 mile radius circle.*

- Authorized PD
- Requested PD
- Point of Diversion
- ⊗ Half Mile Radius
- Active Water Right w/in 1/2 mile
- + domestic well w/in 1/2 mile
- ▨ Authorized PU
- ▨ Requested PD

**Water Right w /in 1/2 mile & Owner (if apply)**  
 ● #1 Water Right No.3997 Koesser Inc.

**Domestic well w /in 1/2 mile & Owner (if apply)**  
 + A.- Domestic well

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



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

4215N 2460'W  
SE NEN W

BUCK REXFORD CELL 620-629-1604

Customer Name: Buck Rexford WO#: 21250 Date: 1-12-21  
 Street Address: P.O. Box 880, 507 E. VINE Test #: 1 ELOG: Yes  
 City, State: MEADE, KS 67864 Driller: Dale Guilan  
 County: Meade Quarter: NE Section: 25 Township: 30 Range: 29  
 Location: \_\_\_\_\_ GPS: N37.41342 W100.44327  
 Rig #: 10002 Elevation: 2736' Static WL: Approx 275' Estimated? \_\_\_\_\_  
 Proposed Well Depth 553

WELL LOCATION 20'SAMP

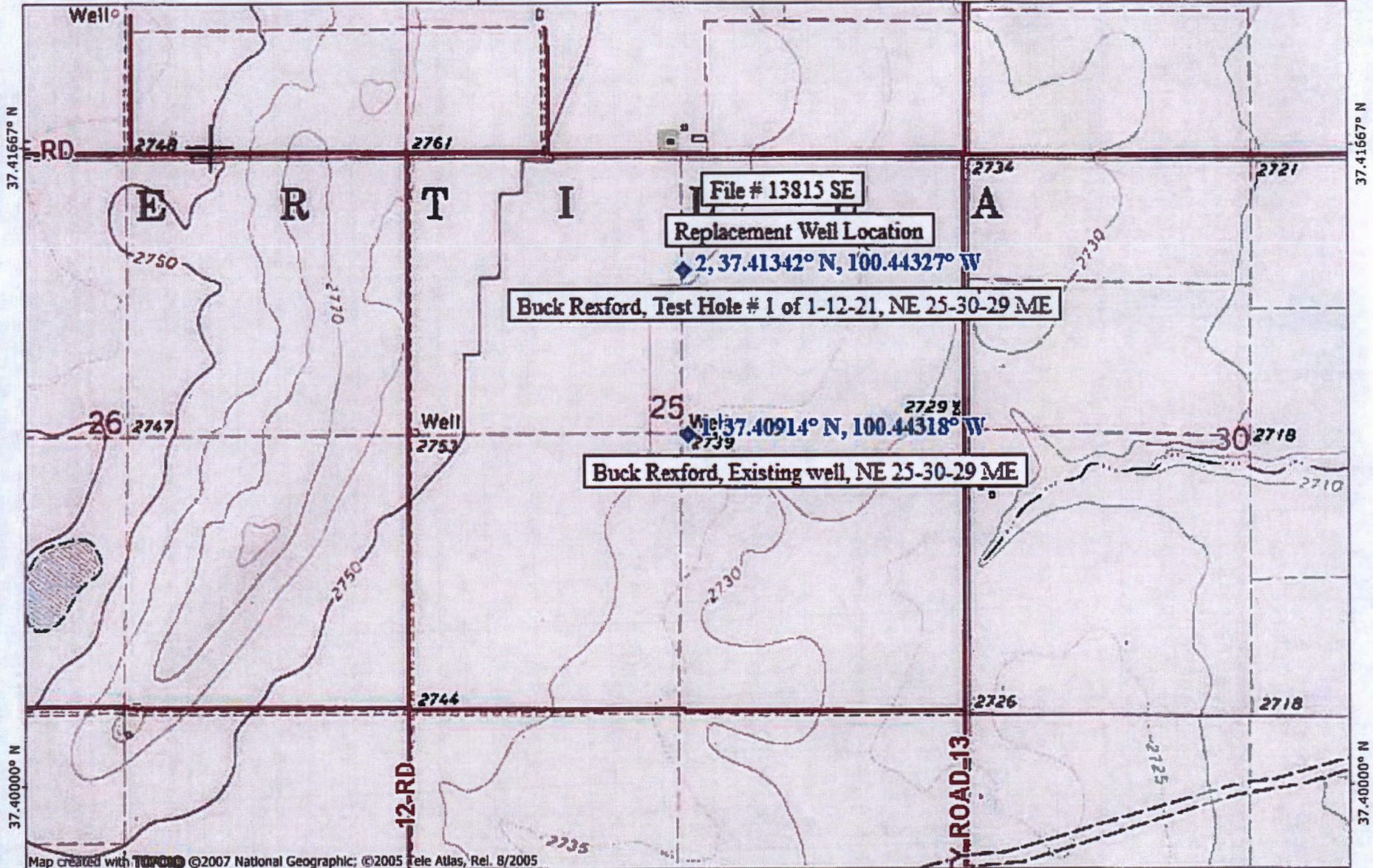
%	Footage			Description of Strata
	From	Pay	To	
	0		2	Top Soil
	2		42	Brown Sandy Clay
	42		48	Brown Sandy Clay w/ Fine Sand & Some Collich
	48		68	Fine Sand
	68		82	Fine Med Course Sand Small Gravel
	82		125	Brown Sandy Clay
30	125	58	333	Fine Med Course Sand Small Some Med Gravel
30	333	27	360	Fine Med Course Sand Small Few Med Gravel w/ Couple Clay Layers
25	360	27	387	Fine Med Course Sand Few Small Gravel w/ Couple Clay Layers
	387		413	Blue Clay
20	413	30	443	Fine Med Course Sand w/ Few Clay Layers
5	443	27	470	Brown Sandy Clay w/ Some Sand Layers
	470		510	Brown Sandy Clay
20	510	23	533	Fine Med Course Sand
	533		576	Shale
	576		620	Red Bed
				Super Gel X -11
				Grout -5
				Hole Plug -7
				Perma Plug -1
				4 3/4 Dry Blade -1

SE

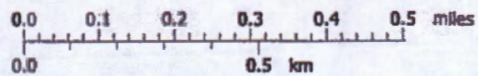
TOPO! map printed on 01/13/21 from "Untitled.tpo"

100.45000° W

WGS84 100.43333° W



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



TN MN  
5°  
01/13/21

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](http://www.agriculture.ks.gov)

Mike Beam, Secretary

Laura Kelly, Governor

January 25, 2021

KOESSER INC  
PO BOX 308  
MEADE, KS 67864

RE: Water Right, File No. 13815

Dear Sir or Madam:

This is to advise you that Merl Rexford has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the point of diversion under the above referenced application.

You can find the complete applications posted by water right file number as referenced above at: <https://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 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 contact this office. If you would prefer, you could arrange an appointment for additional assistance. Please refer to the file number when you contact us if you wish to discuss a specific file.

Sincerely,

A handwritten signature in blue ink, appearing to read "Austin J. McColloch".

Austin J. McColloch  
Assistant Water Commissioner

AM:  
enclosures

pc:  
GROUNDWATER MANAGEMENT DISTRICT NO. 3