

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

1. File Number: 14512	2. Status Change Date:	3. Change Num: C1	4. Field Office: 4	5. GMD: 1
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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: 2/16/2021
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8a. Applicant(s) New to system <input type="checkbox"/> Person ID 50587 Add Seq# _____ C & W LIMITED PARTNERSHIP PO BOX 327 LEOTI, KS 67861	8c. Landowner(s) New to system <input type="checkbox"/> Person ID _____ Add Seq# _____
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8b. Landowner(s) New to system <input type="checkbox"/> Person ID _____ Add Seq# _____ 8a	8d. WUC New to system <input type="checkbox"/> Person ID 65501 Add Seq# _____ BRAD WHITHAM PO BOX 327 LEOTI, KS 67861
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9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: **12/31/2021** N & P Date to Comply: _____

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: **3/10/2021** By: **AM**
 Date Entered: _____ By: _____

File No. **14512** 11. County: **WH** Basin: **WHITEWOMAN CREEK** Stream: Formation Code: **211** Special Use:

12. Points of Diversion
 Rate and Quantity
 Authorized Additional
 Rate Quantity Rate Quantity
 gpm/cfs af/mgy gpm/cfs af/mgy Overlap PD Files

CHK	MOD	DEL	ENT	PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Rate gpm/cfs	Quantity af/mgy	Rate gpm/cfs	Quantity af/mgy	Overlap PD Files
CHK					15622												
CHK					28707												
CHK					34756												
CHK					45793												

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) **NO CHANGE**
 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				
MOD	6823	7	18S	37W	2	16	36	40	37	35	L-1 9	L-1 30	40	40	19	1	9	26	L-2 40	L-2 11	1	390	8a	N	MULTIPLE
ENT	7044	2	18S	38W	2													40	40	40	40	160	8a	N	MULTIPLE
CHK	7926	8	18S	38W	3					31.25	31.25	31.25	31.25									125	8a	N	MULTIPLE
CHK	27610	6	18S	38W	1													31.25	31.25	31.25	31.25	125	8a	N	MULTIPLE
ENT	30946	11	18S	38W	4	40	40	40	40													160	8a	N	MULTIPLE
ENT	40136	1	18S	38W	1	33	33	33	33					40	40	40	40	33	33	33	33	424	8a	N	MULTIPLE

Base Acres: Year: Minimum Reasonable Quantity:
 Comments: **OVERLAPPING WATER RIGHTS: 9920; 10336; 10448; 14512; 15224; 21645; 23853; 25035**

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 10, 2021

C & W LIMITED PARTNERSHIP
PO BOX 327
LEOTI, KS 67861

RE: Water Right, File Nos. 9920; 10336; 10448; 14512; 15224; 21645; 23853; 25035

Dear Sir or Madam:

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 numbers.

Your attention is directed to the enclosures and to the terms, conditions, and limitations specified in this approval for change. A condition of this 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/or 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.

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 "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc: GROUNDWATER MANAGEMENT DISTRICT NO. 1

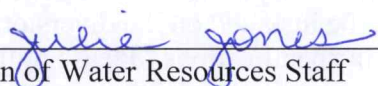
CERTIFICATE OF SERVICE

On this 10th day of March, 2021, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Water Right, File Nos. 9,920, 10,336, 10,448, 14,512, 15,224, 21,645, 23,853 & 25,035 dated 10th day of March, 2021 was mailed postage prepaid, first class, US mail to the following:

C & W LIMITED PARTNERSHIP
PO BOX 327
LEOTI, KS 67861

Pc:

GROUNDWATER MANAGEMENT DISTRICT NO. 1



Division of Water Resources Staff

APPLICATION FOR APPROVAL TO CHANGE
THE PLACE OF USE AND/OR POINT OF DIVERSION
SUPPLEMENTAL SHEET
FILE NO. 14512
MAKE ADDITIONAL COPIES AS NECESSARY

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

Owner of Land --- NAME: Same
ADDRESS: _____

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			

Owner of Land --- NAME: _____
ADDRESS: _____

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				

Owner of Land --- NAME: _____
ADDRESS: _____

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. *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: Same
ADDRESS: _____

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					
1	18	38	33	33	33	33					40	40	40	40	33	33	33	33					424
2	18	38													40	40	40	40					160
11	18	38	40	40	40	40																	160

Owner of Land --- NAME: _____
ADDRESS: _____

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							

Owner of Land --- NAME: _____
ADDRESS: _____

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							

Presently authorized point of diversion:

One in the _____ Quarter of the _____ Quarter of the _____ Quarter of the _____
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 the _____
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 _____

6. **Presently authorized point of diversion:**

One in the _____ Quarter of the _____ Quarter of the _____ Quarter of the _____
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 the _____
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) More efficient use of irrigation
resources

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

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

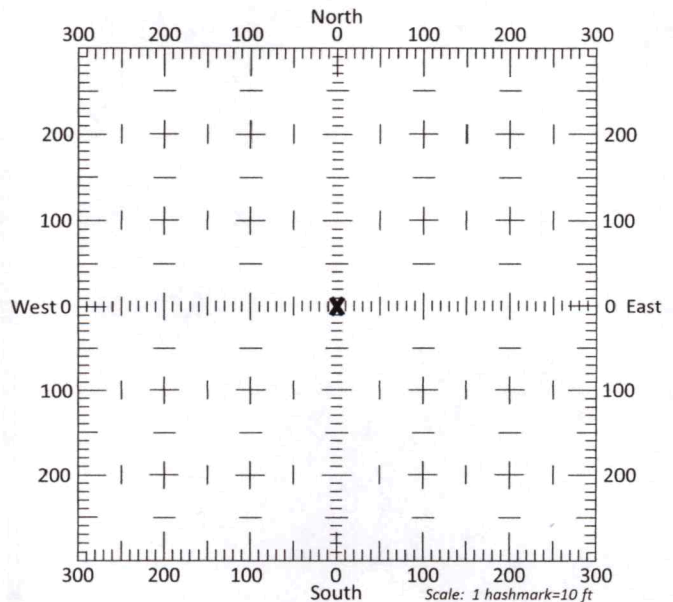
10. If the point of diversion is a well:
(a) What are you going to do with the old well?

(b) When will this be done? _____

11. Groundwater Management District recommendation
attached? Yes No

12. Assisted by mf/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 8th day of February, 2021.

<u>Bradley C. Withan</u> (Owner)	(Spouse)
<u>Bradley C. Withan</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 8th day of February, 2021.

My Commission Expires _____



Julie Jones
 Notary Public

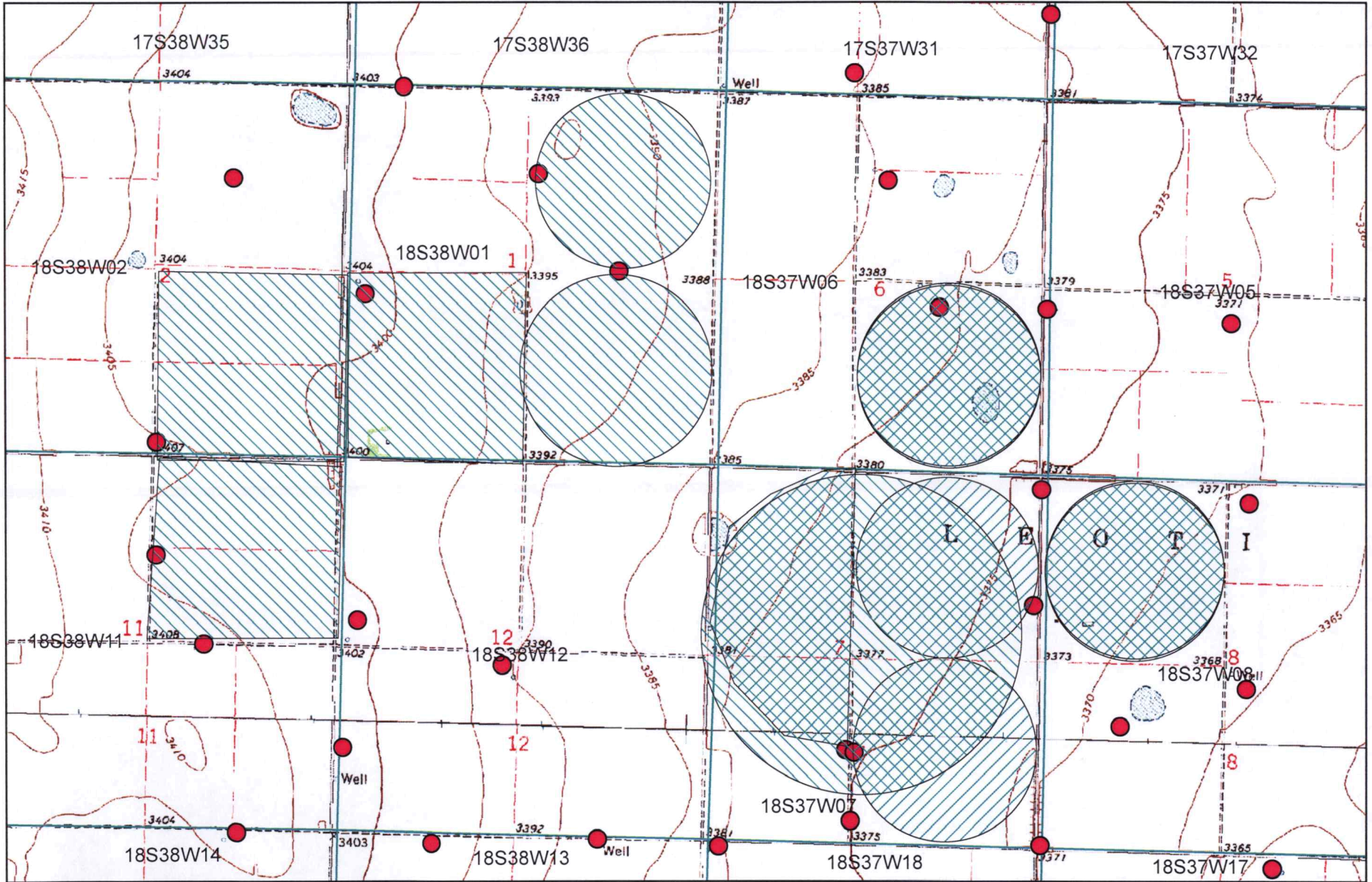
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, all of the applicable portions of the application form must be completed with accurate information; maps, if necessary, must be included; signatures of all the appropriate owners' must be affixed to the application and notarized; and the appropriate fee must be paid.



FEE SCHEDULE

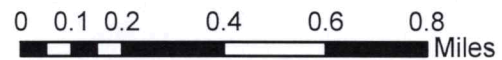
Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

- (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

Change in place of use application for water right 14512



-  Authorized place of use
-  Proposed place of use



All wells within 1/2 mile are on this map.

X _____

