

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

1. File Number: 19150	2. Status Change Date: <i>11-18-2021</i>	3. Change Num: C2	4. Field Office: 4	5. GMD: 3
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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: 5/4/2021
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8a. Landowner, WUC, Applicant(s) Person ID **36594**
 New to system Add Seq# _____

JERRY H & SANDRA L COX
499 ROAD 18
HUGOTON, KS 67951-5108

8c. Landowner(s) Person ID **53971**
 New to system Add Seq# _____

JEFFERY J & JO A COX
1231 ROAD 14
HUGOTON, KS 67951-5109

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

8a

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

8a

9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: **12/31/2022** N & P Date to Comply: **3/1/2023**

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: **11/18/2021** By: **MAM**
 Date Entered: _____ By: _____

File No. **19150** 11. County: **SV** Basin: **CIMARRON RIVER** Stream: Formation Code: **211** Special Use:

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

DEL	PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Rate gpm	Quantity af	Rate gpm	Quantity af	Overlap PD Files
DEL	88808													
ENT		SE NW NE	32	34S	36W		4046	1432		1415	520	1415	520	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	11950	32	34S	36W	2	13	36	40	36	36	13	36	40					36	40	36	13	375	8a	N	15067; 40649
CHK	14173	32	34S	36W	1									40	36	13	36					125	8c	N	15067; 40649
CHK	19693	29	34S	36W	1													40	32.5	37.5	40	150	8a	N	15067; 40649

Base Acres: Year: Minimum Reasonable Quantity:

Comments: **please remove completion date for C1 12/31/2021 (well not completed)**

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

November 18, 2021

JERRY H & SANDRA L COX
499 ROAD 18
HUGOTON, KS 67951-5108

RE: Field Office Application for Change
Water Right, File No. 19150

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 number.

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 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: Jeffery Cox
GROUNDWATER MANAGEMENT DISTRICT NO. 3

CERTIFICATE OF SERVICE

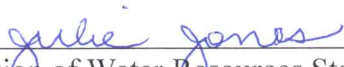
On this 18th day of November 2021, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 19,150 dated 18th day of November 2021 was mailed postage prepaid, first class, US mail to the following:

JERRY H & SANDRA L COX
499 ROAD 18
HUGOTON, KS 67951-5108

Pc:

JEFFERY J & JO A COX
1231 ROAD 14
HUGOTON, KS 67951-5109

GROUNDWATER MANAGEMENT DISTRICT NO. 3



Division of Water Resources Staff

5. **Presently authorized point of diversion:**
 One in the SE Quarter of the NW Quarter of the NE Quarter
 of Section 32, Township 34S South, Range 36W (E/W),
 in STEVENS County, Kansas, 3976 feet North 1367 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well 683 original (feet)
(DWR use only: Computer ID No. 05 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 NW Quarter of the NE Quarter
 of Section 32, Township 34S South, Range 36W (E/W),
 in STEVENS County, Kansas, 4046 feet North 1432 feet West of Southeast corner of section.
 Proposed Rate _____ Proposed Quantity _____ Proposed well depth (feet) 690
 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) previous well did not
complete failure on drilling

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

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

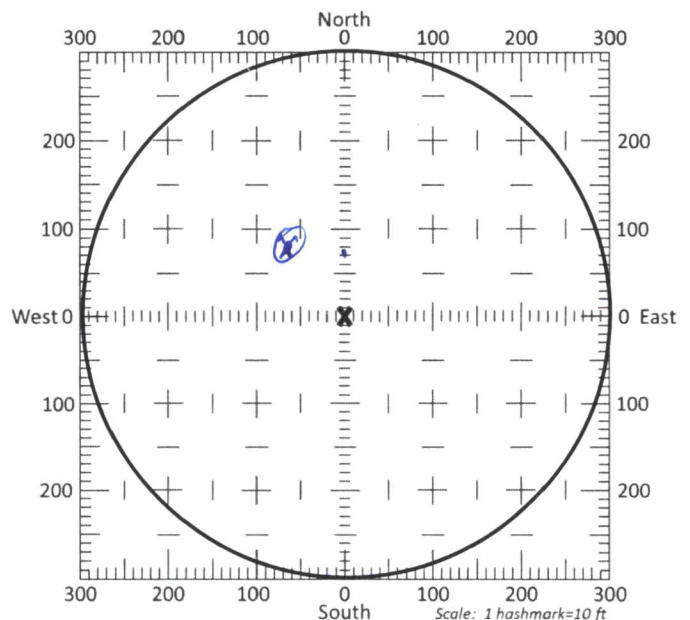
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by JG/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 GARDEN CITY, Kansas, this 17th day of NOVEMBER, 2021.

(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)

(Please Print)	(Please Print)	(Please Print)
State of Kansas	} SS	
County of <u>Finney</u>		
I hereby certify that the foregoing application was signed in my presence and sworn to before me this <u>17</u> day of <u>Nov</u> , 20 <u>21</u> .		
My Commission Expires <u>5-28-2025</u>	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



H 620-5448206

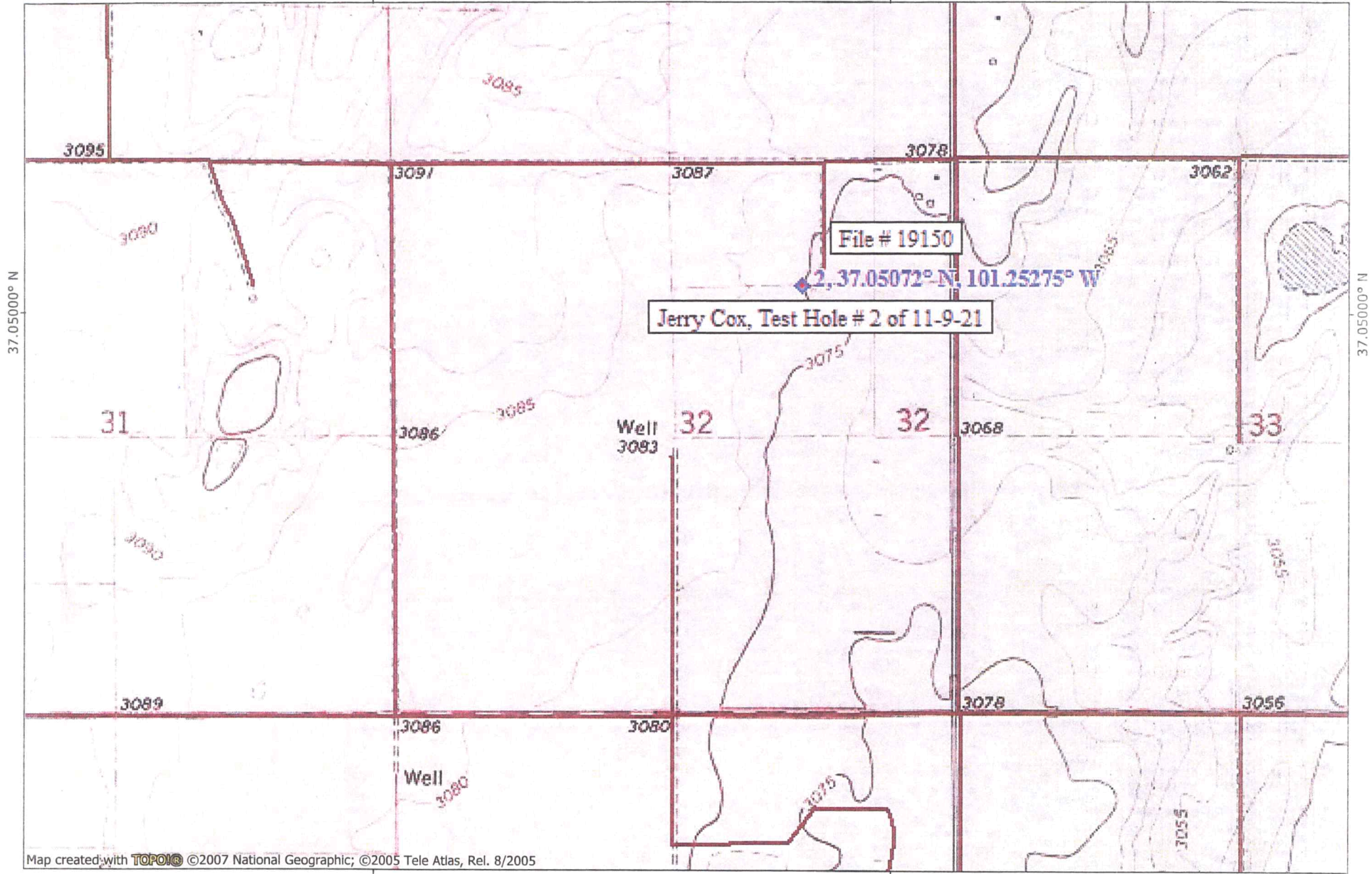
CELL 620-544-6874 NOV 16 2021

Customer Name: Jerry Cox
 Street Address: 499 ROAD 18
 City, State: HUGOTON, KS 67951
 County: Stevens Quarter: NE Section: 32
 Location: 788' North & 45ft West of Existing Well
 Rig #: 10002

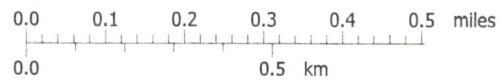
WO#: 22716 Date: 11-8-21
 Test #: 2 E LOG: Yes 535ft
 Driller: Dale Guinn
 Township: 34 Range: 36
 GPS: N37.05072 W101.25275
 Elevation: 3076' Static WL: 229' Estimated?
 Proposed Well Depth 690

WELL LOCATION 20' SUMP

Rating	Footage			Description of Strata
	From	Pay	To	
	0		2	Top Soil 19150
	2		27	Brown Sandy Clay
	27		35	Fine Sand
	35		40	Brown Sandy Clay
	40		50	Fine Sand
	50		54	Brown Clay
	54		61	Fine Med Course Sand Small Gravel
	61		70	Fine Sand
	70		87	Brown Sandy Clay w/Some Caliche
	87		151	Brown Clay w/Few Sand Strips
	151		170	Tan & White Clay w/Little Caliche
	170		195	Fine Sand w/Few clay layers
	195		201	Brown Sandy Clay
	201		210	Fine Med Fine Course Sand
10	210	19	248	Fine Sand w/couple clay layers
15	248	12	260	Fine Med Sand
	260		268	Brown Sandy Clay
15	268	15	283	Fine Med Sand w/couple clay stringers
	283		340	Brown Clay w/Thin light Blue Strips
	340		381	Tan & Blue Clay
	381		402	Blue & Some Brown Clay
	402		419	Brown Clay
	419		542	Blue & Little Brown Clay
5	542	38	580	Brown Sandy Clay w/Many Fine Med Sand Strips
30	580	21	601	Fine Med Course Sand few small Gravel
	601		606	Brown Sandy Clay
25	606	16	622	Fine Med Course Sand
10	622	12	634	Brown Sandy clay w/Many sand Strips
30	634	29	663	Fine Med Course Sand Brown Rock & Few Small Gravel
20	663	7	670	Fine Med Course Sand Brown Rock & Few clay stringers Little T's
	670		680	Red Bed
				Max Gel - 2
				Dris Pac - 1/4 Bag
				Hole Plug - 5
				Perma Plug - 1
				RECEIVED
				NOV 16 2021
				Garden City Field Office
				Division of Water Resources



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

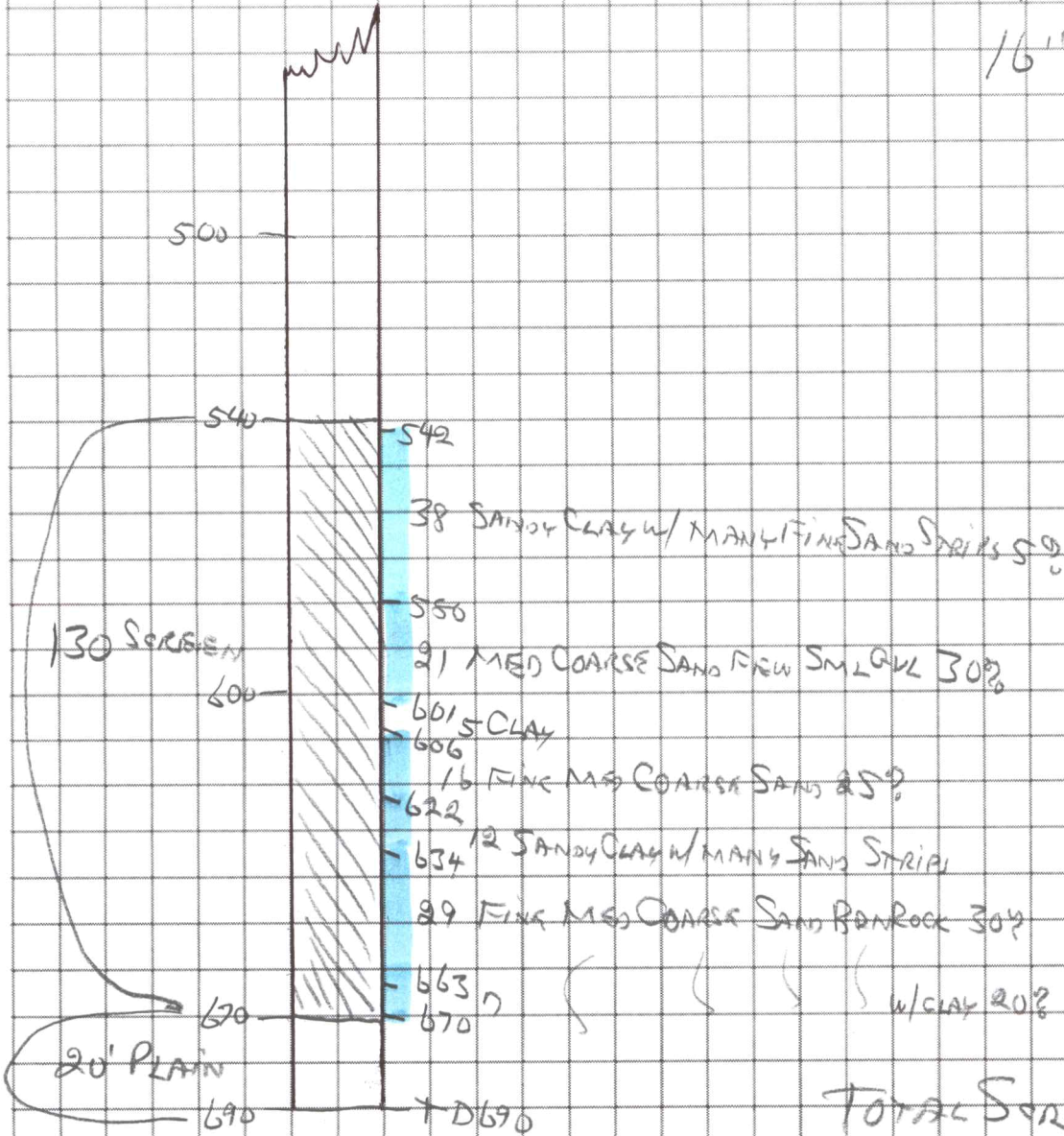


JERRY COX
 NE 32-34-36 SW
 TEST HOLE #2 of 11-8-2,
 PROPOSED WELL DESIGN

TOTAL DEPTH 690'
 INCLUDING 20' SUMP

24" BORE HOLE

1/6" STEEL CASING & SCREEN



TOTAL SCREEN 130'

11/15/2021



Hydro resources

Jerry Cox
499 Road 18
Hugoton, KS 67951

Jerry Cox, Cell: 620-544-6874

NE 32-34-36 SV

Test Hole: # 2 of 11-8-21
GPS: 37.05072 N 101.25275 W
Standard Irrigation Well

Total depth: Approx. 690' including 20' sump

24" Bore Hole
16" Steel Casing and Screen

24" Bore Hole

Estimate for Drilling Irrigation Well

<u>Estimated Quantity</u>	<u>Units</u>	<u>Description</u>	<u>Unit Price</u>	<u>Extended Total</u>
690	ft	Drill reverse circulation well, install casing, screen-perforation, tremie pipe gravel in well, install water level tube, install surface and/or aquifer seal.	\$53.00	\$36,570.00
	ls	Surface casing to help prevent cave in (if needed)	\$0.00	\$0.00
1	ls	Develop by airlift or bailing & test pump with Hydro Equipment	\$6,200.00	\$6,200.00
1	ls	Dig pit (Customer Will Back Fill)	\$1,000.00	\$1,000.00
	ls	Mobilization - Crews - Equipment (Estimated)	\$0.00	\$0.00
690	ft	16" Steel Casing and Grade A gravel pack	\$56.00	\$38,640.00
0	ft		\$0.00	\$0.00
0	ft		\$0.00	\$0.00
0		<u>ADDITIONAL CHARGE</u>	\$0.00	\$0.00
130	ft	Continuous Wire Wrap Screen (Standard) Galvanized	\$61.00	\$7,930.00
0	ft	PVC Perforation Additional Charge	\$0.00	\$0.00
		(Footage of Screen/Perforation is Approximated)		
0			\$0.00	\$0.00
672	ft	1" Water level measuring tube	\$4.00	\$2,688.00
	ft	Aquifer Seal (if needed)	\$0.00	\$0.00
20	ft	Bentonite or Concrete Surface Seal (Concrete in Okla.)	\$90.00	\$1,800.00
220	gal	Sodium Hypochlorite (Estimated)	\$5.25	\$1,155.00
1	ea	6' x 16' x 8" Concrete pump and motor base.	\$3,400.00	\$3,400.00
	ls	Special drilling fluid used when needed to control sloughing and circulation. (Estimated)		\$3,800.00
			\$0.00	0
	ls	Customer will supply water for drilling rig in lieu of ADDITIONAL CHARGES . (\$800.00 - \$2,400.00)		\$0.00
	ls	Hydro will haul water to drilling site or lay out pipe.		\$2,000.00
	ls	Tractor service in demobilized areas (When needed).		\$0.00
		Sales tax on material (where applicable) Percent sales tax - 0		\$0.00
		Estimate valid for 7 days	Estimated Total -	\$105,183.00

Estimate on yield is not guaranteed and reflects data and history of geographic area only.

Estimate **does not** include pump system or pump work.

Prepared by : Ken Rauhut

Date 11/15/2021

Please Sign
Accepted By:

Date _____

Hydro Resources cannot be responsible for well production. Production estimates are best guess, but may be higher or lower.

OSHA REQUIRES ALL VISITORS TO WEAR PERSONAL PROTECTIVE EQUIPMENT ON LOCATION