

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

1. File Number: 2456	2. Status Change Date:	3. Change Num: C1	4. Field Office: 4	5. GMD: 3
--------------------------------	------------------------	-----------------------------	------------------------------	---------------------

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: 2/26/2021
--	---

8a. Applicant(s) New to system <input type="checkbox"/> Person ID <u>52028</u> Add Seq# _____ SCOTT BECKER 1970 E GANO RD GARDEN CITY, KS 67846	8c. Landowner(s) New to system <input type="checkbox"/> Person ID _____ Add Seq# _____
--	--

8b. Landowner(s) New to system <input type="checkbox"/> Person ID _____ Add Seq# _____ 8a	8d. WUC New to system <input type="checkbox"/> Person ID _____ Add Seq# _____ 8a
---	--

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: **3/1/2021** By: **AM**
 Date Entered: _____ By: _____

File No. **2456** 11. County: FI Basin: **ARKANSAS RIVER** Stream: Formation Code: **211** Special Use:

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

CHK 49131

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
						NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼				
MOD 982	32	21S32W	3			40	38.6	37.4	30.5	40	40	30.5	37								294	8a	Y	MULTIPLE	
MOD 21980	30	21S32W	1			40					L-1 32.5	L-2 33.5	40	34	L-3 29	19	35	30.5	34	35	37	399	8a	Y	MULTIPLE
MOD 28195	29	21S32W	1										40	30.5	30.5	30.5	40	40	30.5	30.5	272.5	8a	Y	MULTIPLE	
ENT 21305	19	21S32W	2										40	L-3 32	L-4 32	40					144	8a	Y	MULTIPLE	
DEL 26061																									
DEL 33765																									

Base Acres: Year: Minimum Reasonable Quantity: **OVERLAPPING WRs: 2456; 3491; 5689; 11551; 14224; 19277; 30921**
 Comments: **COMBINE P/U 39853 WITH 21980; COMBINE P/U 26061 WITH 982; COMBINE P/U 33765 WITH 28195**

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 2, 2021

SCOTT BECKER
1970 E GANO RD
GARDEN CITY, KS 67846

RE: Water Right, File Nos. 2456; 3491; 5689; 11551; 14224; 19277 & 30921

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 that reads "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc: GROUNDWATER MANAGEMENT DISTRICT NO. 3

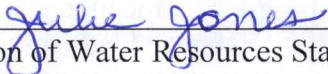
CERTIFICATE OF SERVICE

On this 2nd day of March, 2021, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Water Right, File Nos. 2,456; 3,491; 5,689; 11,551; 14,224; 19,277 & 30,921 dated 2nd day of March, 2021 was mailed postage prepaid, first class, US mail to the following:

SCOTT BECKER
1970 E GANO RD
GARDEN CITY, KS 67846

Pc:

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. 2456 _____

RECEIVED
 4:20 pm
 FEB 26 2021

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.

Garden City Field Office
 Division of Water Resources

The source of supply is: Groundwater Surface water

2. Name and address of Applicant: Scott Becker _____

1970 E GANO RD GARDEN CITY KS 67846 _____

Phone Number: (620) 271-3945 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: GREATHOUSE REVOCABLE TRUST Scott Becker _____

ADDRESS: 1505 E SPRUCE #56 GARDEN CITY KS 67846 _____

(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					
32	21S	32W					40.0	40.0	30.5	37.0													147.5
30	21S	32W									34	19	19	35	30.5	34.0	35.0	37.0					243.5

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: GREATHOUSE REVOCABLE TRUST Scott Becker _____

ADDRESS: 1505 E SPRUCE #56 GARDEN CITY KS 67846 _____

(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					
32	21S	32W					40.0	40.0	30.5	37.0													147.5
30	21S	32W									34	19	19	35	30.5	34.0	35.0	37.0					243.5

For Office Use Only: Code _____ Fee \$ 200.00 TR # _____ Receipt Date 2-26-21 Check # 9400

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter
 of Section _____, Township _____ South, Range _____ (W),
 in Stanton _____ 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 _____

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) Overlap land under 14224 with land
under 2456, 3491, 5689, 11551, 19277, 30921

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

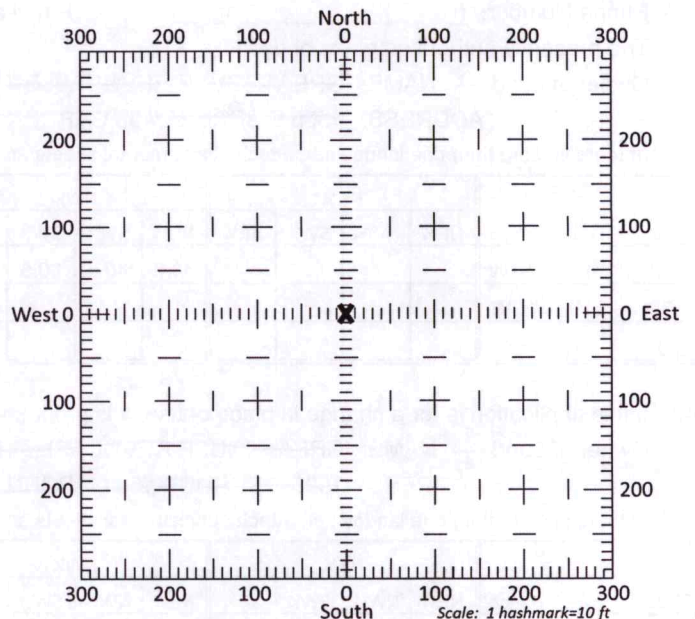
9. The change(s) (was)(will be) completed by?

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

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by Alex Torrance

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.)

APPLICATION FOR APPROVAL TO CHANGE
THE PLACE OF USE AND/OR POINT OF DIVERSION
SUPPLEMENTAL SHEET

FILE NO. 2456

MAKE ADDITIONAL COPIES AS NECESSARY

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

Owner of Land ---- NAME: ~~KENNETH & OPAL BECKER~~ *Scott Becker*
ADDRESS: ~~100 W JOHNSON GARDEN CITY KS 67846~~

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	
32	21S	32W	40.0	38.6	37.4	30.5													146.5
29	21S	32W												40	40	30.5	30.5		141

Owner of Land ---- NAME: ~~SCOTT & KENNETH BECKER~~ *Scott Becker*
ADDRESS: ~~1970 E GANO RD GARDEN CITY KS 67846~~

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	
29	21S	32W												40	30.5	30.5	30.5		131.5

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: ~~KENNETH & OPAL BECKER~~ *Scott Becker*
ADDRESS: ~~100 W JOHNSON GARDEN CITY KS 67846~~

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	
32	21S	32W	40.0	38.6	37.4	30.5													146.5
29	21S	32W												40	40	30.5	30.5		141

Owner of Land ---- NAME: ~~SCOTT & KENNETH BECKER~~ *Scott Becker*
ADDRESS: ~~1970 E GANO RD GARDEN CITY KS 67846~~

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	
29	21S	32W												40.0	30.5	30.5	30.5		131.5

Owner of Land ---- NAME: ~~SCOTT E BECKER~~ *Scott Becker*
ADDRESS: ~~870 27TH AVE CANTON KS 67428~~

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	
19	21S	32W												40	32	32	40		144
30	21S	32W					40.0	32.5	33.5	40.0				10					156

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 26th day of February, 20 21.

Scott L. Becker
(Owner)

Jill A. Becker
(Spouse)

Scott L. Becker
(Please Print)

Jill A. Becker
(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 26th day of February, 20 21.



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 2456




Township 21 South Range 32 West
FI County

0 0.17 0.35 0.7 Miles



 PROPOSED PLACE OF USE

 AUTHORIZED PLACE OF USE

 POINT OF DIVERSION

Created By: AT/GCFO