

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.

File No. 3941

RECEIVED

10:20 AM
 MAR 09 2021

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: GLENN & SANDRA SCHIFF TRUST

P O BOX 468, SEWARD, AK 99664

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: RYAN STAPLETON

PO BOX 655, MEADE, KS 67864-0655

Phone Number: (620)629-1828 Email address: _____

3. The presently authorized place of use is:

Owner of Land --- NAME: Same

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 \$ 200.00 TR # _____ Receipt Date 3-9-21 Check # 7827

5. **Presently authorized point of diversion:**
 One in the NW Quarter of the NW Quarter of the NW Quarter of Section 28, Township 30 South, Range 29 (W), in ME County, Kansas, 5183 feet North 5224 feet West of Southeast corner of section.
 Authorized Rate No change Authorized Quantity No change Depth of well _____ (feet)
 (DWR use only: Computer ID No. 1 GPS 37.415560 feet North -100.50590 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 NW Quarter of the NE Quarter of the NW Quarter of Section 28, Township 30 South, Range 29 (W), in ME County, Kansas, 5229 feet North 4486 feet West of Southeast corner of section.
 Proposed Rate No change Proposed Quantity No change Proposed well depth (feet) 532
 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?

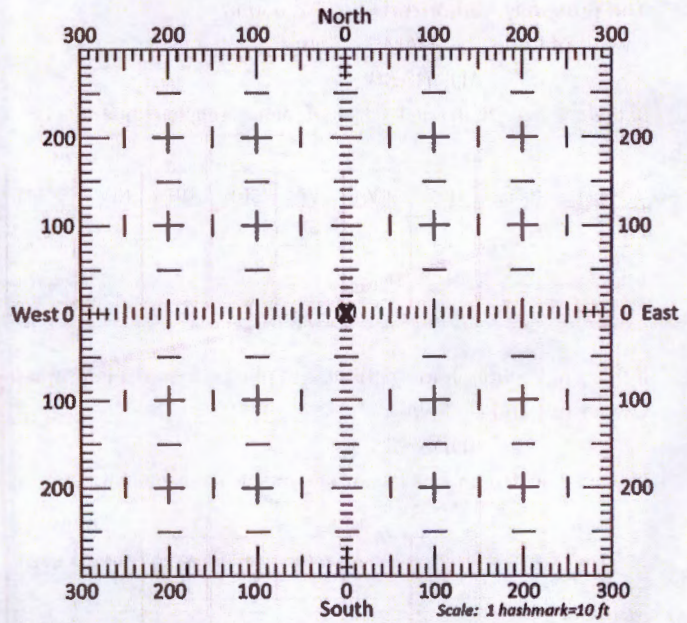
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by 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 MARCH, 2021.

[Signature]

(Owner)

ALFREDO COLLINGWOOD

(Please Print)

(Owner)

(Please Print)

(Owner)

(Please Print)

(Spouse)

(Please Print)

(Spouse)

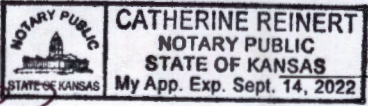
(Please Print)

(Spouse)

(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 MARCH, 2021.



[Signature]

Notary Public

My Commission Expires 9-14-22

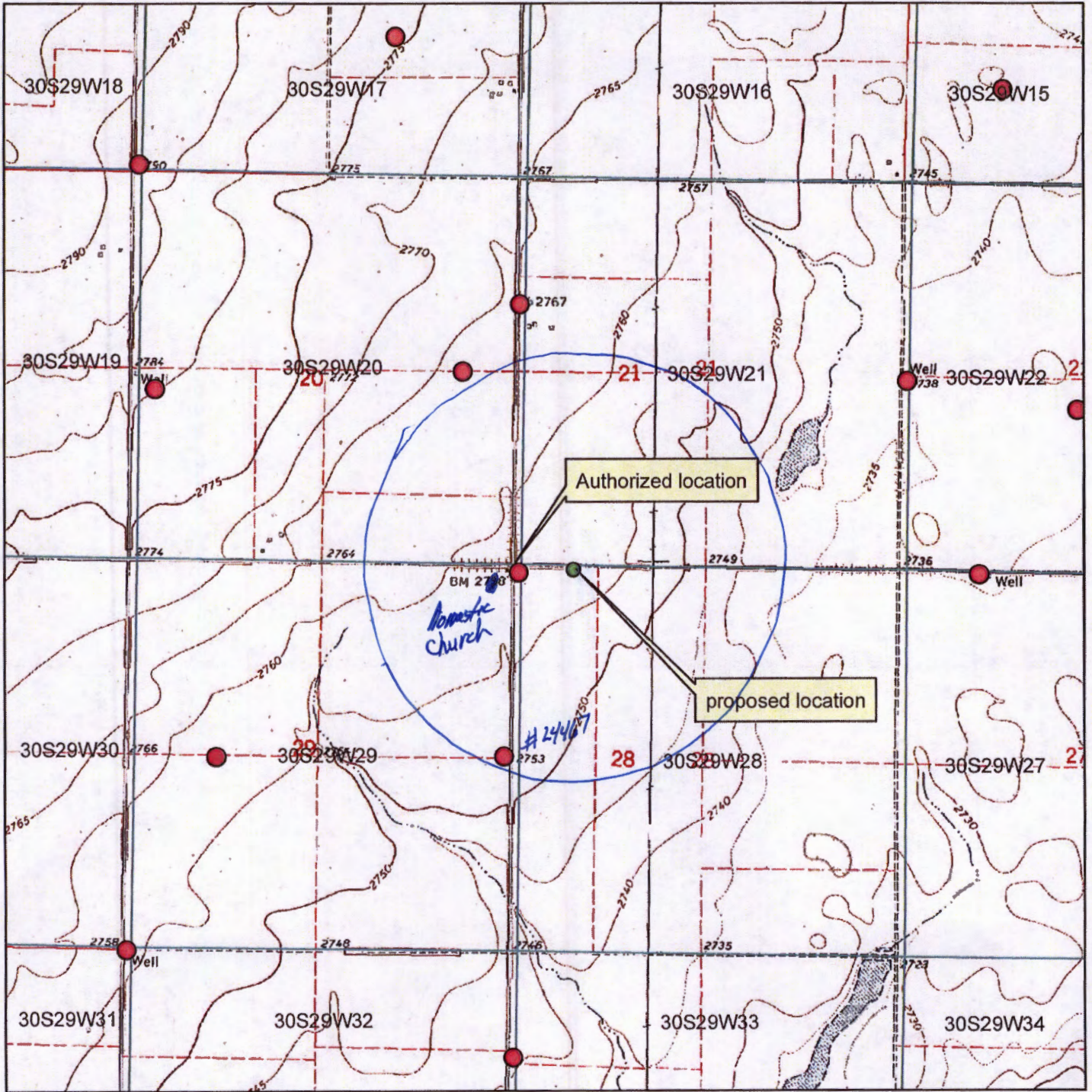
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, all of the applicable portions of the application form must be completed with accurate information; maps, if necessary, must be included; signatures of all the appropriate owners' must be affixed to the application and notarized; and the appropriate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

FEE SCHEDULE

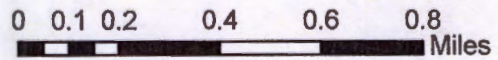
Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: Kansas Department of Agriculture

- (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

Change in point of diversion application for water right 3941



- Authorized point of diversion
- Proposed point of diversion



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

X _____

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



Hydro
resources

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

RYAN STAPLETON

620-629-1825

FEB 09 2021

Customer Name: Sandi Schiff WO#: 21R46 Date: 2-5-21
 Street Address: P.O. Box 468 Test #: 1 E LOG: Yes
 City, State: SEWARD, ALASKA 99664 Driller: Dale Guinn
 County: Madea Quarter: NW Section: 28 Township: 30 Range: 29
 Location: 712' EAST & 40' NORTH OF EXIST WELL GPS: N37.41630 W100.50414
 Rig #: 10002 Elevation: 2747 Static WL: 257' Estimated? 532
 Proposed Well Depth 532

Underground Water Line 5ft. South of Test Hole WELL LOCATION

%	Footage		Description of Strata	
	From	To		
	0	2	Top Soil	
	2	23	Brown Sandy Clay	
	23	27	Brown Clay	
	27	35	Brown Sandy Clay + Fine Sand Mixed	
	35	60	Fine Sand	
	60	65	Fine Med Course Sand Small Gravel	
	65	80	Brown Sandy Clay	
	80	92	Fine Med Some Course Sand	
	92	98	Gray Clay	
	98	106	Brown + Gray Clay	
	106	154	Fine Med Course Sand Small Gravel	
	154	164	Gray + Brown Clay	
	164	186	Tan Clay	
	186	244	Fine Med Course Sand Small Gravel	
	244	257	Fine Med Course Sand "Tight"	
20	257	78	277	Fine Med Course Sand Some Small Gravel "Tight In Places"
25	277	43	320	Fine Med Course Sand Small Gravel
15	320	17	337	Fine Med Course Sand w/Clay Layers
25	337	53	390	Fine Med Course Sand Some Small Gravel
	390		407	Brown Sandy Clay
25	407	8	415	Fine Med Course Sand
	415		420	Brown Sandy Clay
10	420	19	439	Fine Sand w/some clay stringers
	439		456	Brown Clay "Little Sticky"
15	456	38	494	Fine Sand
	494		497	Soapstone
15	497	13	512	Fine Sand + Brown Rock
	512		518	Shale + Soapstone
	518		545	Shale
	545		550	Red Bed
				Super Gel X -3
				Grout -5
				Hole Plug -4
				Perma Plug -1

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 FEB 22 2021

Garden City Field Office
 Division of Water Resources

100.51667° W

100.50000° W

WGS84 100.48333° W

37.41667° N

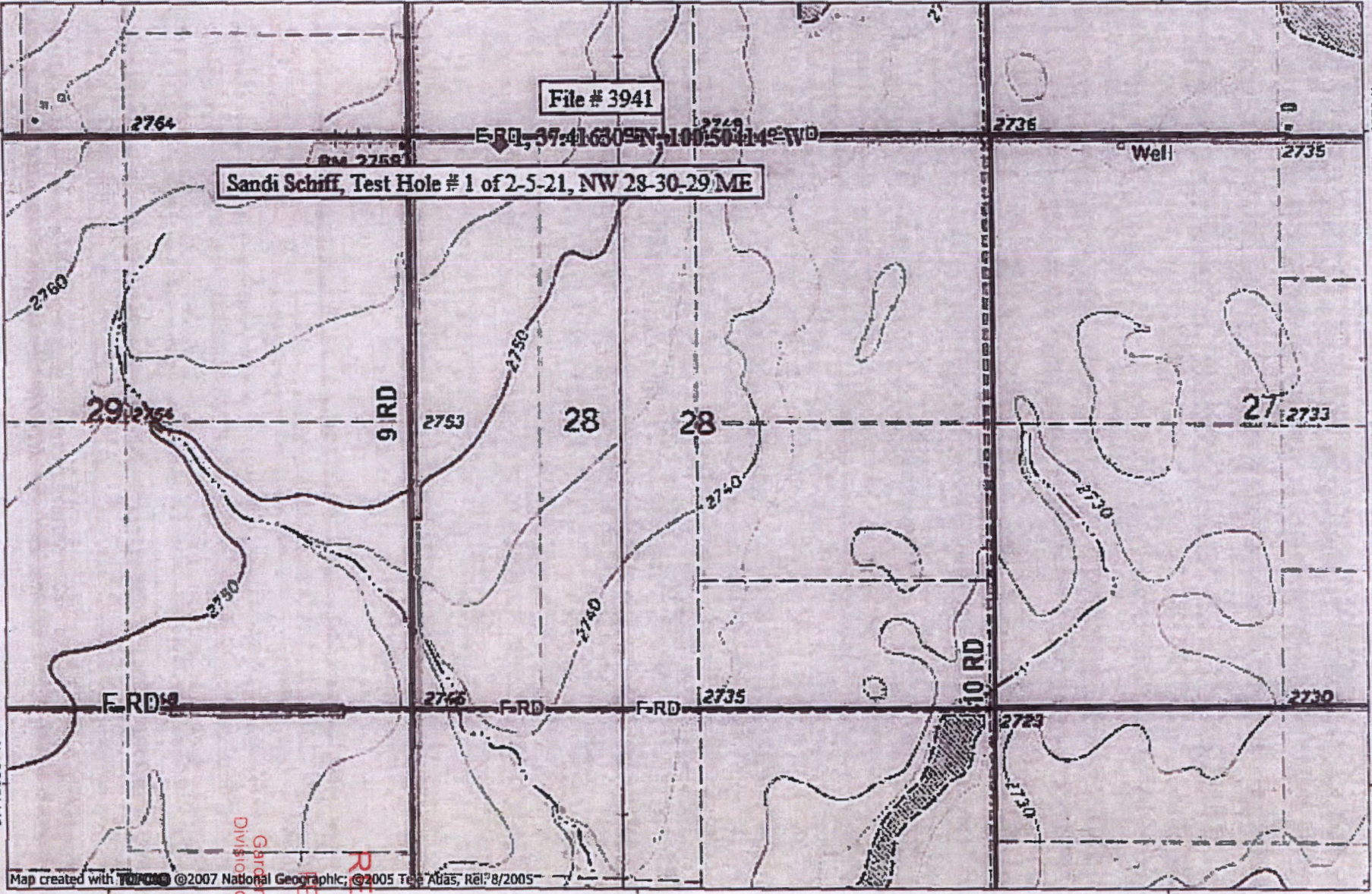
37.41667° N

File # 3941

Sandi Schiff, Test Hole # 1 of 2-5-21, NW 28-30-29 ME

E RD, 37.41630° N, 100.50414° W

Well



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

100.51667° W

100.50000° W

WGS84 100.48333° W

37.40000° N

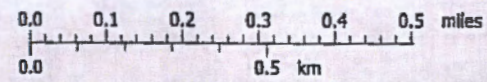
37.40000° N



Garden City Field Office
Division of Water Resources

FEB 22 2021

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TN MN
5°
02/06/21

Garden City Field Office
2508 Johns Street
Garden City, KS 67846-2804



Phone: 620-276-2901
Fax: 620-276-9315
www.agriculture.ks.gov

Mike Beam, Interim Secretary

Laura Kelly, Governor

March 12, 2021

GENE KOEHN
6168 C RD
COPELAND, KS 67837

RE: Water Right, File No. 3941

Dear Sir:

This is to advise you that Glenn Schiff Trust has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to point of diversion under the above referenced application. An irrigation well is proposed to be relocated.

You can find the complete application posted by water right file number as referenced above at www.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 may 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 to call this office. If you would prefer, an appointment could be arranged for additional assistance. Please refer to the file number when you contact us if you wish to discuss a specific file.

Sincerely,

Michael A. Meyer
Water Commissioner

MAM
Pc:

Groundwater Management District No. 3

Garden City Field Office
2508 Johns Street
Garden City, KS 67846-2804



Phone: 620-276-2901
Fax: 620-276-9315
www.agriculture.ks.gov

Mike Beam, Interim Secretary

Laura Kelly, Governor

March 12, 2021

CHURCH OF GOD IN CHRIST MENNONITE
% GENE KOEHN
RT 2 BOX 69
COPELAND, KS 67837

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Sincerely,

A handwritten signature in blue ink that reads "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM
Pc:

Groundwater Management District No. 3