

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

11:00 AM
 SEP 30 2022

File No. 10798

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: ~~RUTH WRIGHT~~ RUTH E. WRIGHT TRUST

~~2108 US HIGHWAY 83 SUBLETTE KS 67877-8040~~ P.O. Box 864, SUBLETTE, KS. 67877

Phone Number: (620) 260-6919 Email address: _____

Name and address of Water Use Correspondent: SAME AS ABOVE GENE WRIGHT, TRUSTEE

Phone Number: () _____ 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: _____

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 9-30-22 Check # 1793

5. **Presently authorized point of diversion:**
 One in the SW Quarter of the SW Quarter of the SW Quarter of Section 33, Township 30 South, Range 32 (W), in HASKELL County, Kansas, 193 feet North 4735 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
(DWR use only: Computer ID No. 04 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 NW Quarter of the NW Quarter of the NW Quarter of Section 5, Township 31 South, Range 32 (W), in SEWARD County, Kansas, 4980 feet North 4765 feet West of Southeast corner of section.
 Proposed Rate _____ Proposed Quantity _____ Proposed well depth (feet) 600'.
 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 _____ (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 _____ (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) LOSS OF PRODUCTION

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

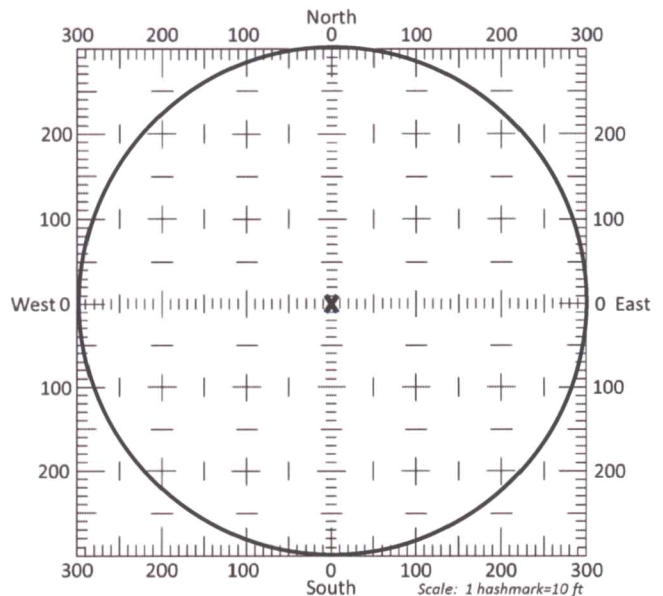
9. The change(s) (was)(will be) completed by?
UPON APPROVAL

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

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by AM / 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 30th day of September, 2022.

Ruth E Wright TR _____
Oliver Eugene Wright TR _____
 (Owner) (Spouse)

 (Please Print) (Please Print)

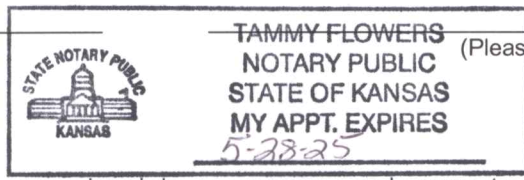
 (Owner) (Spouse)

 (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 30 day of Sept, 2022.

Tammy Flowers
 Notary Public

My Commission Expires 5-28-25.

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.

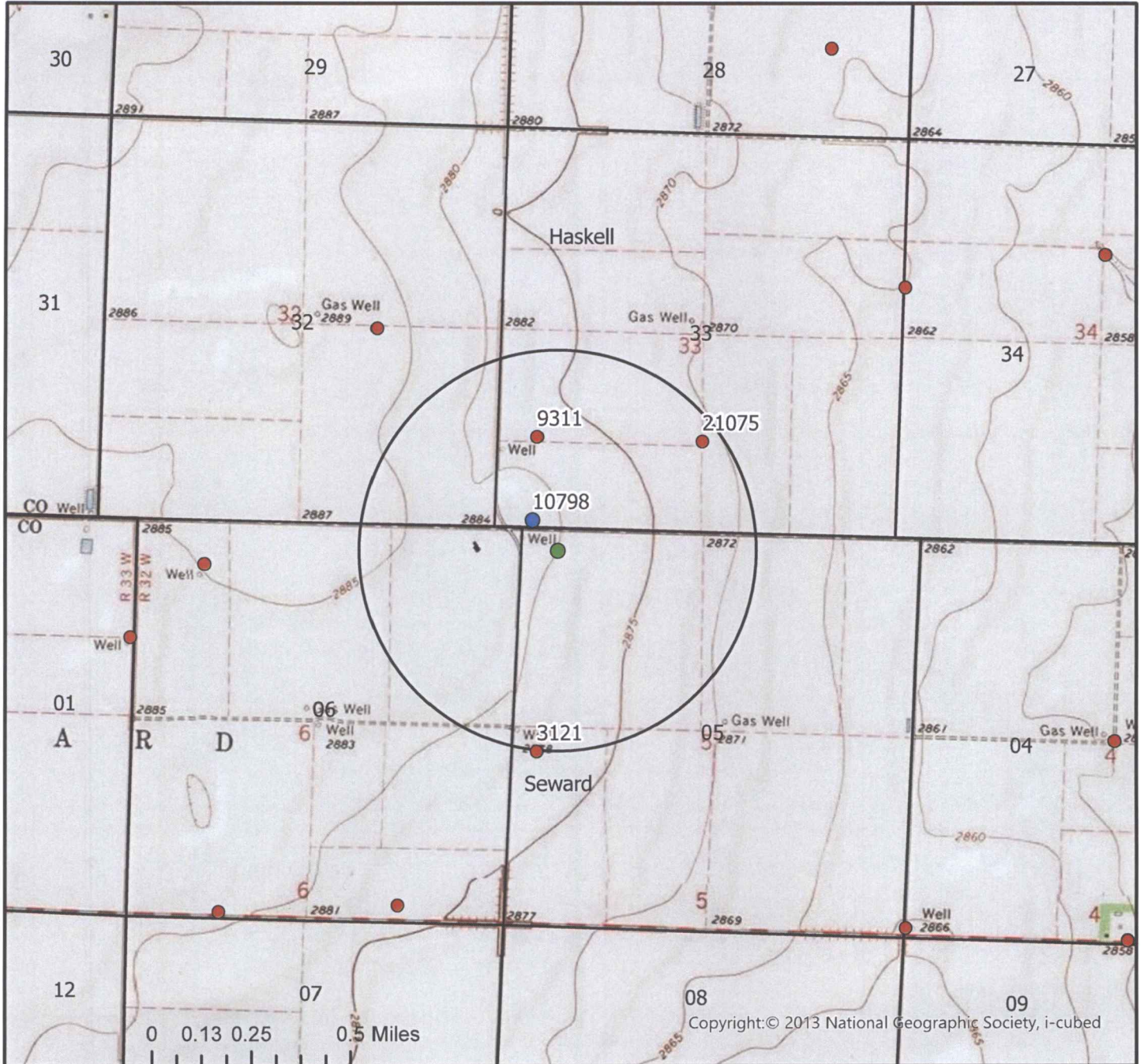
FEE SCHEDULE

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 WATER RIGHT, FILE NO. 10798

NW 1/4 of Section 5 Township 31 South Range 32 West Seward County



- Authorized Point of Diversion
- Proposed Point of Diversion
- Permitted Water Right
- ★ Domestic Well within 1/2 mile
- 1/2 mile buffer

List of owner name and addresses within 1/2 mile:

- WR 9311: OWNED BY APPLICANT
- WR 21075: DON L & JEWEL NIGHTINGALE
1105 E 7TH ST DOUGLASS KS 67039
- WR 3121: JASON B VAUGHAN
PO BOX 913 SUBLETTE KS 67877 - 0913



By signing below I agree that all wells, including domestic, and owners names and addresses within 1/2 mile of the proposed point of diversion have been shown on the map

(Signature)

Date

Date AM/GCFO
1:24,000 Scale

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



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

GENEWRIGHT HM 620-675-2747 CELL 620-260-6919

Customer Name: Ruth E. Wright, Trust WO#: 24102 Date: 7-28-22
 Street Address: PO BOX 864 Test #: 1 E LOG: Yes
 City, State: SUBIETTE, KS 67877 Driller: Dale Guilan
 County: Seward Quarter: NW Section: 5 Township: 31 Range: 32
 Location: GPS: N37.38676 W100.83170
 Rig #: 10002 Elevation: 2887' Static WL: _____ Estimated? 328ft.
 Proposed Well Depth 607

REPLACEMENT WELL LOCATION 10' Sump

%	Footage			Description of Strata
	From	Pay	To	
	0		2	Top Soil
	2		20	Brown Sandy Clay
	20		64	Brown Sandy Clay w/ Fine Sand Layers
	64		84	Sand Fine Med Course Small Few Med Gravel
	84		87	Brown, White & Gray Clay
	87		115	Brown Clay
	115		119	Sand Fine Med
	119		133	Reddish Brown Sandy Clay & Fine Sand Mixed
	133		139	Sand Fine Med Course Some Small Gravel
	139		145	Brown Sandy Clay
	145		186	Sand Fine Med Course Small Gravel
	186		196	Brown Sandy Clay
	196		299	Sand Fine Med Course Small
	299		320	Sand Fine Med w/ Few Clay Stringers
25	320	10	330	Sand Fine Med Course Few Small Gravel
20	330	11	341	Sand Fine Med Course "Little Stiff"
25	341	55	396	Sand Fine Med Course Few Small Gravel
5	396	28	424	Fine Sand & Clay Mixed
	424		440	White Sandy Clay
15	440	44	484	Sand Fine w/ couple clay Layers
	484		493	Soapstone
15	493	7	500	Sandstone & Brown Rock
5	500	24	524	Sandstone & Soapstone
15	524	38	562	Sandstone
5	562	35	597	Sandstone & Soapstone
	597		600	Red Bed
				Super Gel X - 5
				Soda Ash - 1
				Hole Plug - 8
				Perma Plug - 1
				4 3/4 Drag Blade - 1

Ruth E. Wright, Trust

Test Hole # 1 of 7-28-22,
REPLACEMENT WELL LOCATION
NW 5-31-32 SW

FILE # 10798

Legend

 37.38696 N 100.83170 W

 37.38696 N 100.83170 W

0

0



Google Earth

3000 ft

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

October 3, 2022

JASON B VAUGHAN
PO BOX 913
SUBLETTE, KS 67877-0913

RE: Application for Change
Water Right, File No. 10798

Dear Sir or Madam:

This is to advise you that Gene Wright 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 applications. An irrigation well is proposed to be relocated to the NW¹/₄ NW¹/₄ NW¹/₄ of Section 5, Township 31 South, Range 32 West, Seward County.

You can find the complete applications posted by water right file number as referenced above at: www.Agriculture.ks.gov/DWRNotices

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 that reads "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:

pc:

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

October 3, 2022

DON L & JEWEL NIGHTINGALE
1105 E 7TH ST
DOUGLASS, KS 67039

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Austin J. McColloch
Assistant Water Commissioner

AM:

pc: