

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

1. File Number: 22075	2. Status Change Date:	3. Change Num: C1	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: 7/6/2022
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8a. Applicant(s) New to system <input type="checkbox"/> Person ID 51959 Add Seq# _____ CIRCLE D FARMS LLC Attn: ELDON DIRKS P O BOX 195 CIMARRON, KS 67835-0195	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 _____ Add Seq# _____ 8a
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9. Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: 12/31/2022 <input checked="" type="checkbox"/> N & P Date to Comply: AM	
<input type="checkbox"/> Anti-Reverse Meter <input type="checkbox"/> Meter Seal <input checked="" type="checkbox"/> Check Valve <input checked="" type="checkbox"/> N & P Form <input checked="" type="checkbox"/> Water Tube <input type="checkbox"/> Driller Copy <input type="checkbox"/> H & E Letter	
<input type="checkbox"/> Conservation Plan Date Required: _____ Date Approved: _____ Date to Comply: _____	

10. Use Made of Water From: _____ To: _____

	Date Prepared: 7/12/2022 By: AM
	Date Entered: _____ By: _____

File No. **22075** 11. County: **GY** Basin: **ARKANSAS RIVER** Stream: _____ Formation Code: **211** Special Use: _____

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

CHK	65414																		

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 5786	31	26	S	27	W 3	40	40	40	40	40	36	36	40	40	36	35	40	34	34	34	34	599	8a	N	12995; 18684
											L-1	L-2			L-3	L-4									

Base Acres: _____ Year: _____ Minimum Reasonable Quantity: _____
 Comments: **COMBINING PUSE ID #S 5786 (KEEP); 10128 (DELETE) & 38196 (DELETE) ALL UNDER SAME OWNERSHIP. ADDING IN LOT #S**

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

July 12, 2022

CIRCLE D FARMS LLC
Attn: ELDON DIRKS
P O BOX 195
CIMARRON, KS 67835-0195

RE: Filed Office Application for Change
Water Right, File Nos. 12995; 18684 & 22075

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. 3

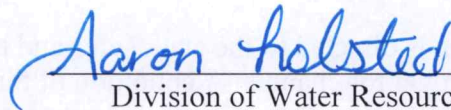
CERTIFICATE OF SERVICE

On this 12th day of July, 2022, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Water Right, File Nos. 12,995, 18,684, and 22,075 dated 12th day of July, 2022 was mailed postage prepaid, first class, US mail to the following:

CIRCLE D FARMS LLC
Attn: ELDON DIRKS
P O BOX 195
CIMARRON, KS 67835-0195

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.

RECEIVED
 8:17 Am
 JUL 06 2022

File No. 22075

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

Garden City Field Office
 Division of Water Resources

2. Name and address of Applicant: CIRCLE D FARMS LLC, Attn: ELDON DIRKS

P O BOX 195, CIMARRON, KS 67835-0195

Phone Number: (620)353-5520 Email address: _____

Name and address of Water Use Correspondent: Same

Phone Number: () _____ 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					
31	26	27W																	34	34	34	34	136

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: 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	
31	26	27W	40	40	40	40	40	36	36	40	40	36	35	40	34	34	34	34	599
								L-1	L-2			L-3	L-4						

For Office Use Only: Code _____ Fee \$ <u>200.00</u> TR # _____ Receipt Date <u>7-6-22</u> Check # <u>3579</u>

5. **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 _____

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) Improve irrigation efficiency.

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

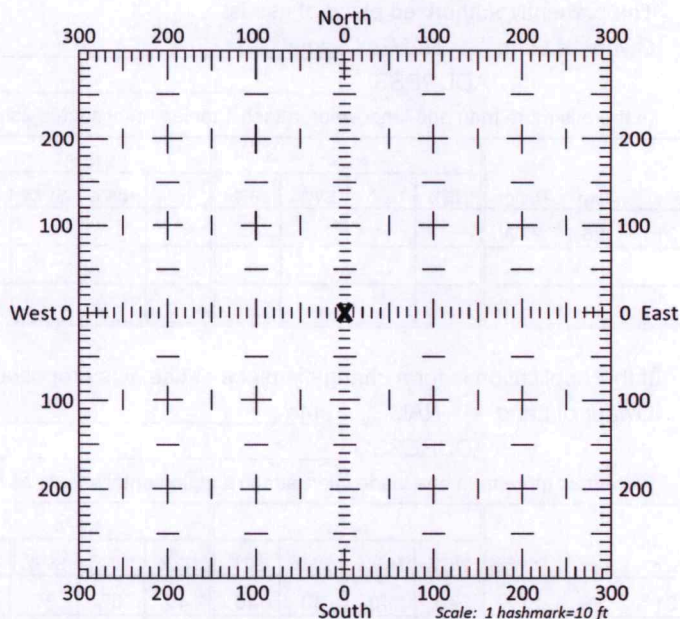
9. The change(s) (was)(will be) completed by?
As soon as it is approved

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 mdf/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 _____, Kansas, this _____ day of _____, 20_____.

Eldon R. Duke

(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 6 day of July, 2022.



Kevin L. Salter

Notary Public

My Commission Expires _____

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

SUMMARY ORDER APPROVING APPLICATION FOR CHANGE AND IMPOSING CONDITIONS

This Summary Order is issued under authority of K.S.A. 82a-708b, as amended, and K.A.R. 5-5-1, *et seq.* and other applicable provisions of the *Kansas Water Appropriation Law, K.S.A. 82a-701 et. seq.*, and rules and regulations promulgated thereunder, With the exception of those conditions expressly contained herein, this Summary Order does not change the terms, conditions and limitations of File No. 22075.

1. A change application was received on July 6, 2022 requesting that the place of use and / or point of diversion authorized under the above-referenced file number be changed as described in the application.
2. On and after the effective date of this summary order, the authorized place(s) of use shall be located substantially as shown on the topographic map accompanying the application to change the place of use. Applicable Not Applicable
3. The change in point of diversion shall not impair existing rights and shall be limited to the same source or sources of water as previously authorized. The point of diversion authorized by this summary order shall be located within a foot radius of the authorized point(s) of diversion. Applicable Not Applicable
4. The point(s) of diversion described herein is administratively corrected to be more accurately described using the Global Positioning System (GPS), as described in the application. Applicable Not Applicable
5. The point(s) of diversion authorized herein shall not actually be located more than feet from the previously authorized point(s) of diversion. Applicable Not Applicable
6. As required by K.A.R. 5-3-5d, if the works for diversion is a well with a diversion rate of 100 gallons per minute or more, a tube or other device suitable for making water level measurements shall be installed, operated and maintained in accordance with K.A.R. 5-6-13. Applicable Not Applicable
7. **The owner of the authorized place(s) of use shall properly install an acceptable water flow meter on or before December 31, 2022** or before the first use of water, whichever occurs first. The water flow meter shall be installed, operated and maintained in accordance with K.A.R. 5-1-4 through 5-1-12. As required by K.S.A. 82a-732, as amended, and K.A.R. 5-3-5e, the owner shall maintain records and report the reading of the water flow meter and the total quantity of water diverted annually to the Chief Engineer by March 1 following the end of each calendar year. Applicable Not Applicable
8. **Installation of the works for diversion of water shall be completed on or before December 31, 2022**, or within any authorized extension of time. By March 1, 2023 the applicant shall notify the Chief Engineer that construction of the works for diversion has been completed, on the form provided by the Chief Engineer, as required by K.A.R. 5-8-4e. Applicable Not Applicable
9. **The completed well log shall be submitted with the required notice.** Applicable Not Applicable
10. All diversion works into which any type of chemical or other foreign substance will be injected into the water shall be equipped with an in-line, automatic, quick-closing check valve capable of preventing pollution of the source of the water supply. The check valve(s) shall be installed, operated and maintained in accordance with K.A.R. 5-3-5c. Applicable Not Applicable
11. Additional Conditions are attached. Yes No
12. In accordance with K.S.A. 82a-708a, as amended, and K.A.R. 5-5-14, all of the owners of the authorized place(s) of use of water appropriated under the above-referenced file number are responsible for compliance with its terms, conditions and limitations, as amended and/or supplemented by this Summary Order, and with applicable provisions of the *Kansas Water Appropriation Law* and the *Rules and Regulations* promulgated thereunder. Failure to comply with these provisions may result in civil penalties pursuant to K.S.A. 82a-737, as amended, and/or the suspension or revocation and dismissal of the water or appropriation right or any other enforcement actions authorized by law.

Administrative Appeal and Effective Date of Order

If you are aggrieved by this order, pursuant to K.S.A. 82a-1901, you may request an evidentiary hearing before the Chief Engineer or request administrative review by the Secretary of Agriculture. A request for hearing by the Chief Engineer must be filed within **15 days** of service of this Order and a request for administrative review by the Secretary must be filed within **30 days** pursuant to K.S.A. 77-531. Any request for administrative review must state a basis for review pursuant to K.S.A. 77-527. File any request with **Kansas Department of Agriculture, Legal Division, 1320 Research Park Drive, Manhattan, KS 66502**. Failure to timely request a hearing or review may preclude review under the Kansas Judicial Review Act.

For Use by Register of Deeds

FOR OFFICE USE ONLY
**APPLICATION APPROVED AND
 SUMMARY ORDER ISSUED**

By: Austin McGillich
 Duly Authorized Designee of the Chief Engineer

(Print Name): Austin McGillich
 Division of Water Resources - Kansas Department of Agriculture

Date of Issuance: July 12, 2022

State of Kansas)

) SS

County of Finney)

Acknowledged before me on July 12, 2022

by Austin McGillich

Signature: Julie Jones

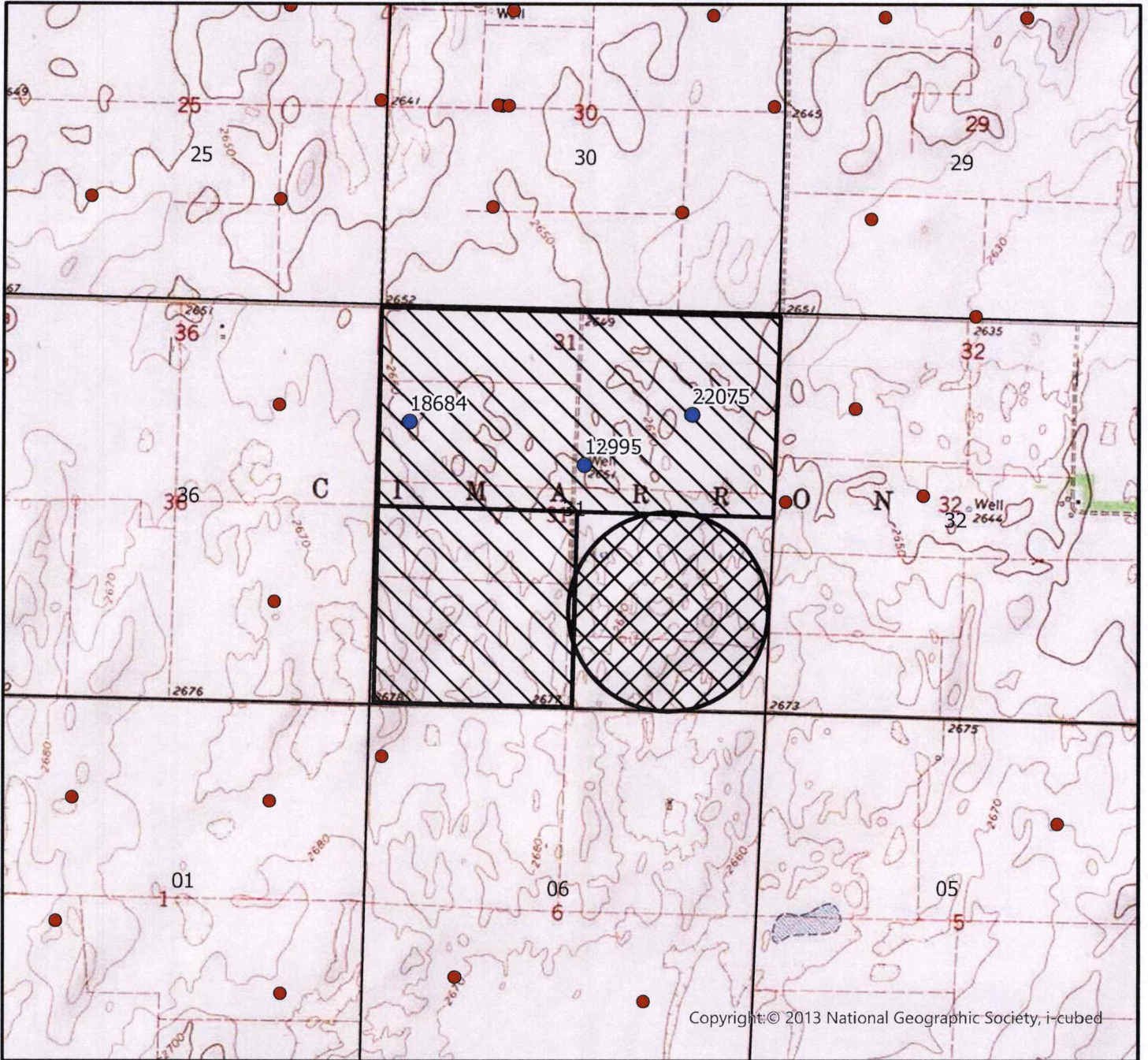
Notary Public

My commission expires: _____








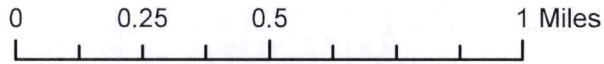
CHANGE IN PLACE OF USE WATER RIGHT, FILE NO. 22075

Section 31 Township 26 South Range 27 West Gray County

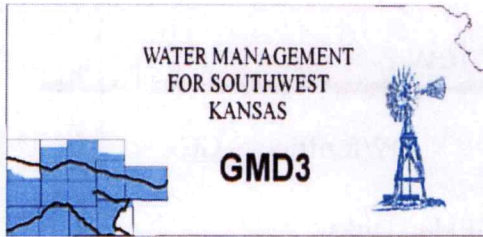


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-  Authorized Point of Diversion
-  Permitted Water Right
-  Domestic Well within 1/2 mile
-  Authorized Place of Use
-  Proposed Place of Use



Date AM/GCFO
1:24,000 Scale



Southwest Kansas
Groundwater Management District No. 3
2009 E. Spruce Street
Garden City, Kansas 67846
(620) 275-7147 phone (620) 275-1431 fax
www.gmd3.org

July 11, 2022

Austin McColloch
Division of Water Resources
4532 W Jones Ave., Suite B
Garden City, Kansas 67846

RE: Applications for Change in Place of Use
Water Right, File Nos. 12995, 18684 & 22075

RECEIVED
JUL 11 2022
Garden City Field Office
Division of Water Resources

Dear Austin:

We have completed a review of the applications for the above referenced water rights. The proposals are not in conflict with the Management Program of the Southwest Kansas Groundwater Management District No. 3 (GMD3). The proposed change in place of use will create a complete overlap in place of use in accordance with K.A.R. 5-5-11(b)(1). It is therefore recommended that the applications be approved at this time.

Thank you for the opportunity to review the applications and to provide a recommendation. If you have any questions, please don't hesitate to contact us.

Sincerely,

A handwritten signature in blue ink, which appears to read "Jason L. Norquest".

Jason L. Norquest
Assistant Manager

GMD3 Change Review

File No(s): 12995, 18684, 22075.

DWR office: GC.

App filed to change: PU.

Is Landowner(s) correct in WRIS: Circle D Farms %Eldon Dirks .

If NO, is documentation included?

Is Water Use Correspondent correct in WRIS? __.

If NO, is documentation included?

Regulation(s) Reviewed: KAR 5-5-11(b)(1)

Point of diversion ID No(s) __ being changed.

	ft. North	ft. West	
Authorized PD			
Proposed PD			
Difference	0	0	
a ² + b ² = c ²	0	0	0

GPS for proposed PD: Lat: __ Long: __.

Is proposed PD stacking on existing WRs? No Change .

Is Proposed PU overlapping existing WRs? Making a complete overlap .

Neighboring certified well(s) notified: __.

Name __.

Address __.

Zip __.

Email: __. Phone: __.

Domestic well(s) notified: __.

Name __.

Address __.

Zip __.

Base Acres: __.

Perfected Acres: __.

Irr. Return-Flow __%

Gray county

12995 Authorized: 585AF @ 865gpm

312acres N2 31-26-27

18684 Authorized: 293AF @ 800gpm

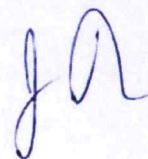
151acres SW 31-26-27

22075 Authorized: 272AF @ 620gpm

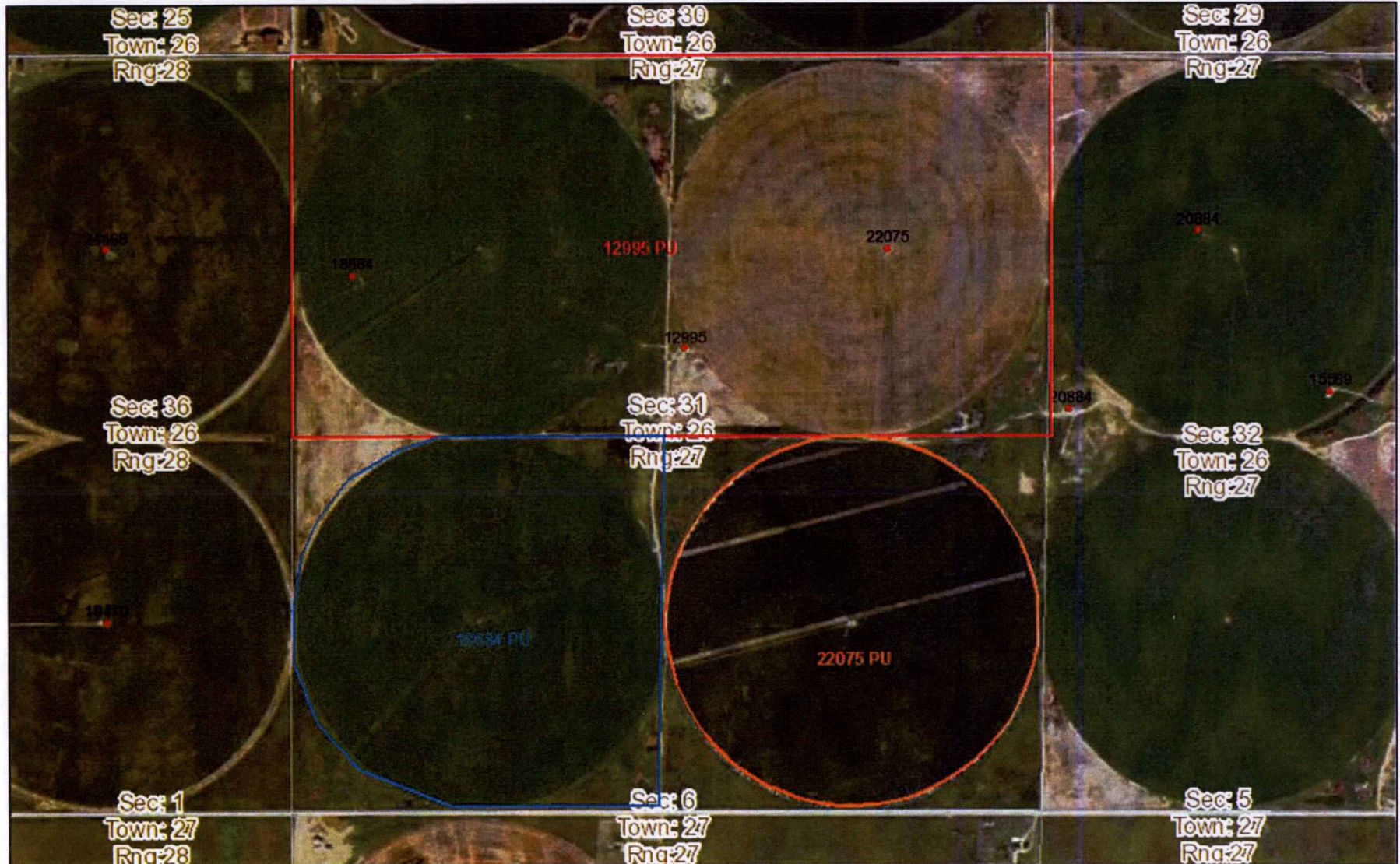
136acres SE 31-26-27

Is a waiver needed: No new acres being proposed, this well make a complete overlap in PU on currently authorized acres.

Recommendation: After review of all information, it appears current area rules are met. Staff therefore recommends approval of the applications.



Circle D Farms PU change

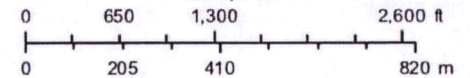


July 11, 2022
14:58 PM

DISCLAIMER: This map is not intended for conveyances, nor is it a legal survey. The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments.

1:14,744

Wells	+	CON	●	FPR	▲	MUN	⚡	THX	
?	Other	⊠	DEW	+	HYD	⊠	REC	?	Empty
●	IRR	⊠	DOM	★	IND	⊠	STK	□	Sections



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

July 7, 2022

GROUNDWATER MANAGEMENT DISTRICT #3
2009 E SPRUCE ST
GARDEN CITY KS 67846

Re: Request for Recommendation,
File No. 12995; 18684 & 22075

Dear Sir or Madam:

We are enclosing a copy of the referenced application, which was submitted by Circle D Farms and appears to be in proper form, for your review.

We are delaying any further action for a period of 15 days from the date of this letter to allow you time to submit your recommendation concerning this application. Please submit your recommendation within the allotted time, or any authorized extension of time thereof.

If you have any questions, please contact me at (620) 276-2901. If you wish to discuss a specific file, please have the file number ready to that I may help you more efficiently.

Sincerely,

A handwritten signature in blue ink that reads "Austin McColloch".

Austin McColloch
Assistant Water Commissioner

Enclosure
pc: