

File No. **23123** 11. County: GT Basin: CIMARRON RIVER Stream: Formation Code: 211/331 Special Use:

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

DEL 86926
ENT 84622 SWSESW 14 30S 38W 07 87 3838 800 640 800 640 NONE

13. Storage: Rate _____ NF Quantity _____ ac/ft Additional Rate _____ NF Additional Quantity _____ ac/ft

14. Limitation: _____ af/ 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 12643																									

Base Acres: Year: Minimum Reasonable Quantity:
 Comments:

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

August 9, 2022

C L FARMS
Attn: LOREN LUCAS
12001 E ROAD 24
JOHNSON, KS 67855-9022

RE: Field Office Application for Change
Water Right, File No. 23123

Dear Sir:

Enclosed is an order executed by the designee of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, approving the applications 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,

A blue ink signature of Michael A. Meyer.

Michael A. Meyer
Water Commissioner

MAM:
enclosures

pc: GROUNDWATER MANAGEMENT DISTRICT NO. 3

CERTIFICATE OF SERVICE

On this 9th day of August 2022, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 23,123 dated 9th day of August 2022 was mailed postage prepaid, first class, US mail to the following:

C L FARMS
Attn: LOREN LUCAS
12001 E ROAD 24
JOHNSON, KS 67855-9022

Pc:

LUCAS LAND LLC
Attn: LOREN LUCAS
12001 E ROAD 24
JOHNSON, KS 67855-9022

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
 4:30 PM
 JUL 21 2022

File No. 23123-00

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: LOREN LUCAS

12001 E ROAD 24, JOHNSON, KS 67855 - 9022

Phone Number: (620) 495-3186

Email address: LLUCAS@PLD.COM

Name and address of Water Use Correspondent: SAME AS ABOVE

SAME AS ABOVE

Phone Number: ()

Email address: _____

3. The presently authorized place of use is:

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			

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: NO CHANGE

ADDRESS: NO CHANGE

(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 \$ <u>200.00</u>	TR # _____	Receipt Date <u>7-21-22</u>	Check # <u>16349</u>
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5. **Presently authorized point of diversion:**
 One in the SW Quarter of the SW Quarter of the SW Quarter of Section 14, Township 30 South, Range 38 W, in GRANT County, Kansas, 73 feet North 5017 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
(DWR use only: Computer ID No. 1 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 SW Quarter of the SE Quarter of the SW Quarter of Section 14, Township 30 South, Range 38 W, in GRANT County, Kansas, 87 feet North 3838 feet West of Southeast corner of section.
 Proposed Rate _____ Proposed Quantity _____ Proposed well depth (feet) 401
 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) Move back to old well
Drailed 2015

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

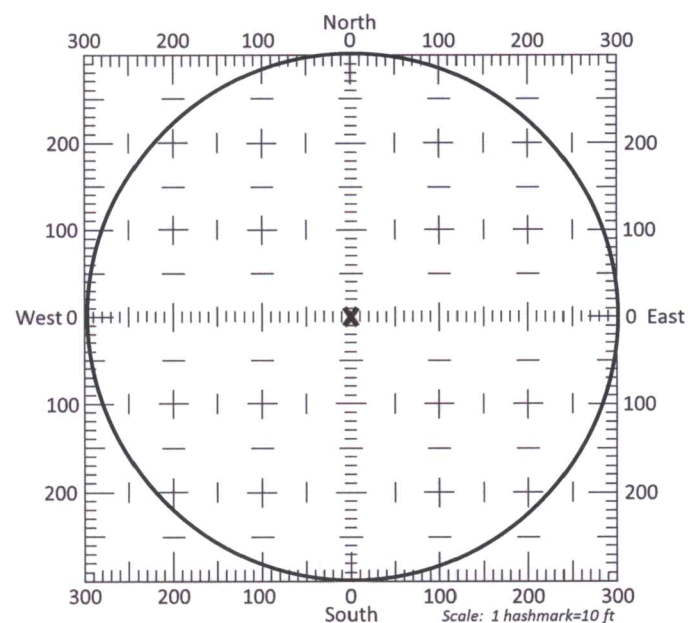
9. The change(s) (was)(will be) completed by?
Date

10. If the point of diversion is a well:
 (a) What are you going to do with the old well?
cap.
 (b) When will this be done? 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 21st day of July, 20 22.

<p><u>Jan Lucas</u> _____ (Owner)</p> <p><u>Lucas Land by Loren Lucas Manger</u> _____ (Please Print)</p> <p>_____ (Owner)</p> <p>_____ (Please Print)</p> <p>_____ (Owner)</p> <p>_____ (Please Print)</p>	<p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p>
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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 21st day of July, 20 22.



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**

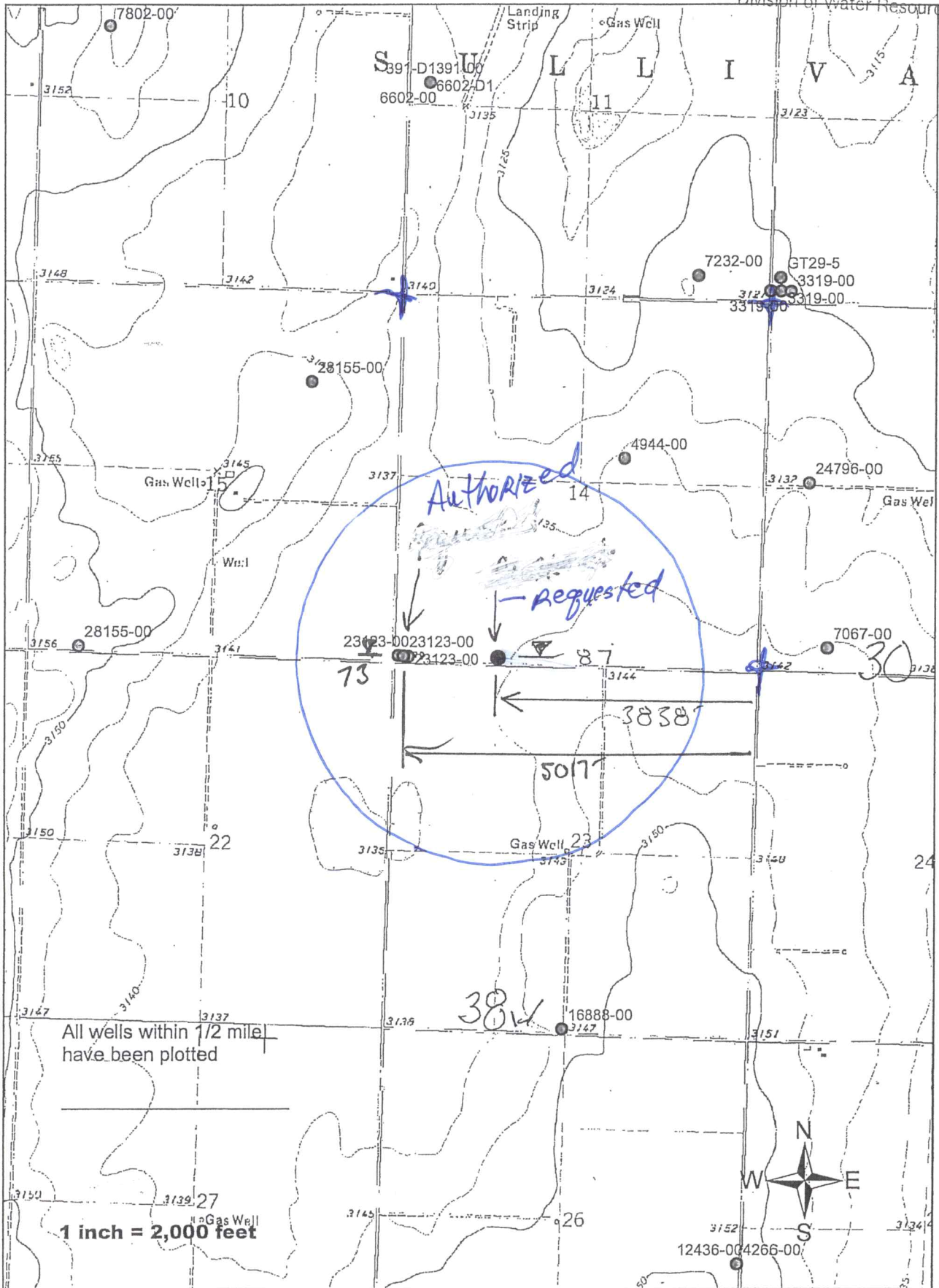
(1) Application to change a point of diversion 300 feet or less	\$100
(2) Application to change a point of diversion more than 300 feet	\$200
(3) Application to change the place of use	\$200

RECEIVED

MAY 22 2018

23123

Garden City Field Office
Division of Water Resources



SCANNED

SCANNED

WATER WELL RECORD Form WWC-5 1264404

Division of Water Resources App. No.

23123

Well ID

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL: County: Grant Fraction SW 1/4 SW 1/4 SE 1/4 SW 1/4 Section Number 14 Township Number T 30 S Range Number R 38 E W

2 WELL OWNER: Last Name: Business: Lucas Land LLC Address: 12001 E Road 24 City: Johnson State: KS ZIP: 67855 Street or Rural Address where well is located: APPROX 15 MILES SOUTH WEST ULYSSES

3 LOCATE WELL WITH 'X' IN SECTION BOX: N W E S

4 DEPTH OF COMPLETED WELL: 401 ft. Depth(s) Groundwater Encountered: 1) 264 ft. 2) ft. 3) ft. or 4) Dry Well WELL'S STATIC WATER LEVEL: 264 ft. below land surface, measured on (mo-day-yr) 8/31/2015

5 Latitude: 37.43185 Longitude: 101.44762 Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude: GPS (unit make/model): (WAAS enabled? Yes No) Land Survey Topographic Map Online Mapper: 6 Elevation: 3140 ft. Ground Level TOC Source: Land Survey GPS Topographic Map Other

7 WELL WATER TO BE USED AS: 1. Domestic: Household Lawn & Garden Livestock 2. Irrigation 3. Feedlot 4. Industrial 5. Public Water Supply: well ID 6. Dewatering: how many wells? 7. Aquifer Recharge: well ID 8. Monitoring: well ID 9. Environmental Remediation: well ID Air Sparge Soil Vapor Extraction Recovery Injection 10. Oil Field Water Supply: lease 11. Test Hole: well ID Cased Uncased Geotechnical 12. Geothermal: how many bores? a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):

Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: Water well disinfected? Yes No

8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter 16 in. to 401 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 12 in. Weight 36.95 lbs./ft. Wall thickness or gauge No. 2.19

TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel Fiberglass PVC Brass Galvanized Steel Concrete tile None used (open hole) Other (Specify) SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole) SCREEN-PERFORATED INTERVALS: From 301 ft. to 381 ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 20 ft. to 401 ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From 0 ft. to 20 ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well Other (Specify) Direction from well? Distance from well? ft.

Table with 6 columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Rows include surface, sandy brown clay, brown sticky clay, white sandy clay, fine sand thin clay, sand fine to med, brown sticky clay, fine sand, 50% clay mix, fine sand.

11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 8/27/2015 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 145 This Water Well Record was completed on (mo-day-year) 9/16/2015 under the business name of Hydro Resources Mid Continent, Inc.

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 22, 2022

SOUTHWEST KANSAS GROUNDWATER
MANAGEMENT DISTRICT NO. 3
2009 E SPRUCE ST
GARDEN CITY KS 67846

Re: Request for Recommendation
Water Right, File No. 23123

Dear Mr. Norquest:

This is to advise you that Loren Lucas has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the point of diversion. The applications meet all rules and regulations.

We are delaying action on the change applications to allow you time to review and provide a recommendation. Please submit a recommendation within 15 days from the date of this letter.

Thank you and as always feel free to contact this office at any time.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM
Enclosures