

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

| | | | | |
|---------------------------------|--|-----------------------------|------------------------------|---------------------|
| 1. File Number: 27848 | 2. Status Change Date: <i>8-22-2022</i> | 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: 8/17/2022 |
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| | |
|--|---|
| 8a. Landowner, applicant, WUC New to system <input type="checkbox"/> Person ID <u>50795</u> Add Seq# _____ BRIAN L & LORI E ZIMMERMAN 10395 E ROAD 22 ULYSSES, KS 67880-8280 | 8c. Landowner(s) New to system <input type="checkbox"/> Person _____ Add Seq# _____ |
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| | |
|---|---|
| 8b. Landowner(s), New to system <input type="checkbox"/> Person ID _____ Add Seq# _____ | 8d. WUC New to system <input type="checkbox"/> Person ID _____ Add Seq# _____ |
|---|---|

9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: 12/31/2022 N & P Date to Comply: 3/1/2023

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: **8/17/2022** By: **MAM**
 Date Entered: _____ By: _____

File No. **27848** 11. County: GT Basin: CIMARRON RIVER Stream: Formation Code: 211 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 Additional Rate gpm Quantity af Overlap PD Files

DEL 12287
ENT NWSESW 20 30S 35W 888 3814 1600 780 1600 780 NONE

CHK 1475

COMBINED RATE AND QUANTITY

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 16556 | | | | | | | | | | | | | | | | | | | | | | | | | |
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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 22, 2022

BRIAN L & LORI E ZIMMERMAN
10395 E ROAD 22
ULYSSES, KS 67880-8280

RE: Field Office Application for Change
Water Right, File Nos. 27848

Dear Sir and Madam:

Enclosed is an 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 number.

Your attention is directed to the enclosures and to the terms, conditions, and limitations specified in these approvals for change. Conditions of these approvals are that an acceptable water flow meter must be installed on the diversion works authorized under the referenced file numbers 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 orders modify the original documents referred to above, they 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 handwritten signature in blue ink that reads "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM:
enclosures

CERTIFICATE OF SERVICE

On this 22nd day of August 2022, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 27,848 dated 22nd day of August 2022 was mailed postage prepaid, first class, US mail to the following:

BRIAN L & LORI E ZIMMERMAN
10395 E ROAD 22
ULYSSES, KS 67880-8280



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. 27848

RECEIVED
 12:15 pm
 AUG 17 2022
 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: BRAIN ZIMMERMAN

10395 E ROAD 22 ULYSSES, KS. 67880

Phone Number: (620)544-6804

Email address: _____

Name and address of Water Use Correspondent: BRAIN L & LORI E ZIMMERMAN

10395 E ROAD 22 ULYSSES, KS. 67880

Phone Number: (620)544-6804

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: 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 | |
| | | | | | | | | | | | | | | | | | | | |

| |
|--|
| For Office Use Only: Code _____ Fee \$ <u>100.00</u> TR # _____ Receipt Date <u>8-17-22</u> Check # <u>9254</u> |
|--|

5. **Presently authorized point of diversion:**
 One in the SE Quarter of the SW Quarter of the SE Quarter of Section 20, Township 30 South, Range 35 (W), in GRANT County, Kansas, 63 feet North 1527 feet West of Southeast corner of section.
 Authorized Rate 1600 GPM Authorized Quantity 780 AF Depth of well _____ (feet)
(DWR use only: Computer ID No. 2 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 NW Quarter of the SE Quarter of the SW Quarter of Section 20, Township 30 South, Range 35 (W), in GRANT County, Kansas, 988 feet North 3835 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
(DWR use only: Computer ID No. 3 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 SE Quarter of the SW Quarter of Section 20, Township 30 South, Range 35 (W), in GRANT County, Kansas, 888 feet North 3814 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) Lack of production on curent PD

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

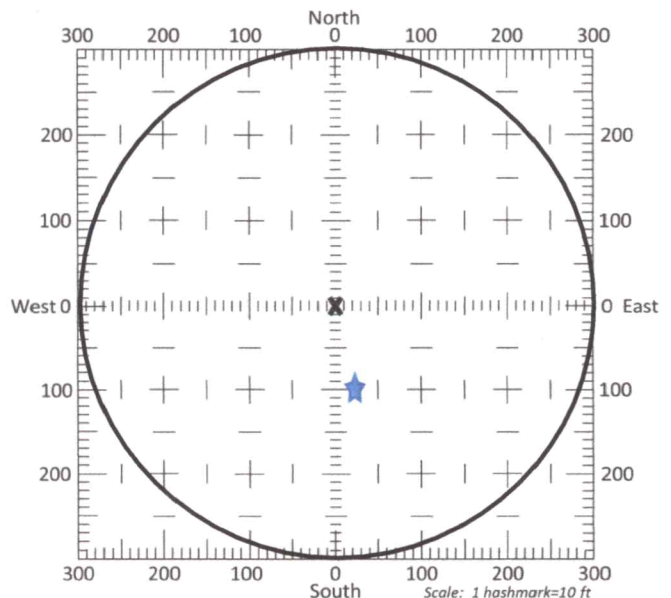
9. The change(s) (was)(will be) completed by?

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

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by CAC

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).

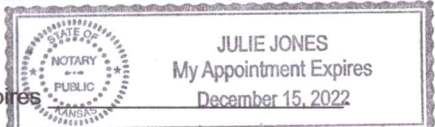
I hereby verify, being first duly sworn upon my oath or affirmation and under penalty of perjury, that I am of lawful age and the owner, the spouse of the owner, or a duly authorized agent of the owner(s) to make this application on their behalf, in regards to the water right(s) to which this application pertains. I further verify that the statements contained in this application are true, correct and complete.

Dated at Garden City, Kansas, this 17th day of August, 20 22.

| | |
|--|---|
| <p><u>[Signature]</u> _____ (Owner)</p> <p><u>Brian Zimmerman</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> |
|--|---|

State of Kansas }
 County of Stimney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 17th day of August, 20 22.



[Signature]

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

10.5 BK R 35W

Co. GRANT

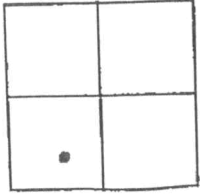
11938 W. - 101.17532



Hydro resources

No. 29642

P.O. Box 784
Sunray, Texas 79086
(806) 948-4421



WL 307"

BRIAN ZAMMERMANN

Test Waterwell

NO. 3-22

DATE 8/03/22

| FROM | TO | DESCRIPTION | SAND |
|------|-----|---|------------------------|
| 0 | 80 | top soil, Caliche + Brown clay w/ sand strips | |
| 80 | 175 | med and coarse sand w/ gravel + clay strips | |
| 175 | 280 | fine sand w/ clay strips + Rock strips | |
| 280 | 300 | fine, med + coarse fairly loose sand | |
| 300 | 320 | fine, med + coarse fairly loose sand w/ gravel | 20 |
| 320 | 340 | fine, med + coarse fairly loose sand to med fine sand + clay strips | 13 |
| 340 | 360 | fine to med fairly loose sand w/ clay strips | 17 |
| 360 | 380 | fine to med fairly loose sand w/ clay strips | 18 |
| 380 | 400 | fine to med fairly loose sand | 20 |
| 400 | 420 | med fine fairly loose sand w/ little tight sand stone strips | Sand - 16 Stone - 4 |
| 420 | 440 | fine fairly tight w/ hard sand stone strips + clay strips | Sand - 10 Stone - 6 |
| 440 | 460 | fine fairly loose little tight sand w/ shale strips | 17 |
| 460 | 480 | fine fairly loose little tight sand | 20 |
| 480 | 500 | fine to med fine fairly tight sand | 20 |
| 500 | 520 | med fine fairly tight sand / sand stone | Sand 5 Stone 15 |
| 520 | 540 | med fine to fairly loose to little tight sand w/ clay strips | 16 |
| 540 | 560 | fine fairly loose to tight sand w/ clay strips | 16 |
| 560 | 580 | Brown to Red w/ shale strips | |
| | | 1 drag bit | |
| | | 1/2 SK Hulls - | |
| | | 1/8 SK 66HV | |

Used some Water - 80' to 170'

Used some Water