

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

1. File Number: 3557	2. Status Change Date:	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: 12/7/2022
8a. Applicant(s) New to system <input type="checkbox"/> CURTIS J & CAROL J KOEHN 303 TICE ST COPELAND, KS 67837		Person ID 9663 Add Seq# _____		
8b. Landowner(s) New to system <input type="checkbox"/> 8a		Person ID _____ Add Seq# _____		
8c. Landowner(s) New to system <input type="checkbox"/>		Person ID _____ Add Seq# _____		
8d. WUC New to system <input type="checkbox"/> 8a		Person ID _____ Add Seq# _____		
9. Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: 12/31/2023 <input checked="" type="checkbox"/> N & P Date to Comply: 3/1/2024				
<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 checked="" type="checkbox"/> Driller Copy <input checked="" 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: 12/9/2022 By: AM Date Entered: _____ By: _____				

File No. **3557** 11. County: **GY** Basin: **CROOKED CREEK** 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 48311
ENT SW SW SE 7 29S 30W 43 2628 1529 544 1529 544 NONE

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
						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 5268																									

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

December 9, 2022

CURTIS J & CAROL J KOEHN
303 TICE ST
COPELAND, KS 67837

RE: Filed Office Application for Change
Water Right, File No. 3557

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

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc:

CERTIFICATE OF SERVICE

On this 9th day of December, 2022, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 3,557 dated 9th day of December, 2022 was mailed postage prepaid, first class, US mail to the following:

CURTIS J & CAROL J KOEHN
303 TICE ST
COPELAND, KS 67837

Pc:



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
 10:06 am
 DEC 07 2022

File No. 3557

1. Application is hereby made for approval of the Chief Engineer to change the (check one or both):

Place of Use Point of Diversion

Garden City Field Office
 Division of Water Resources

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: CURTIS J & CAROL J KOEHN

102 North St
303 TICE ST, COPELAND, KS 67837

Phone Number: (620) 271-4659 Email address: curtisjkoehn@gmail.com

Name and address of Water Use Correspondent: Same X

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: Curtis J + Carol J Koehn

ADDRESS: 102 North St

(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 \$ 100.00 TR # _____ Receipt Date 12-7-22 Check # 2879

5. **Presently authorized point of diversion:**
 One in the SW Quarter of the SW Quarter of the SE Quarter of Section 7, Township 29 South, Range 30 W, in GY County, Kansas, 240 feet North 2590 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. 5 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 SW Quarter of the SE Quarter of Section 7, Township 29 South, Range 30 W, in GY County, Kansas, 43 feet North 2628 feet West of Southeast corner of section.
 Proposed Rate No change Proposed Quantity No change Proposed well depth (feet) 533.
 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) _____

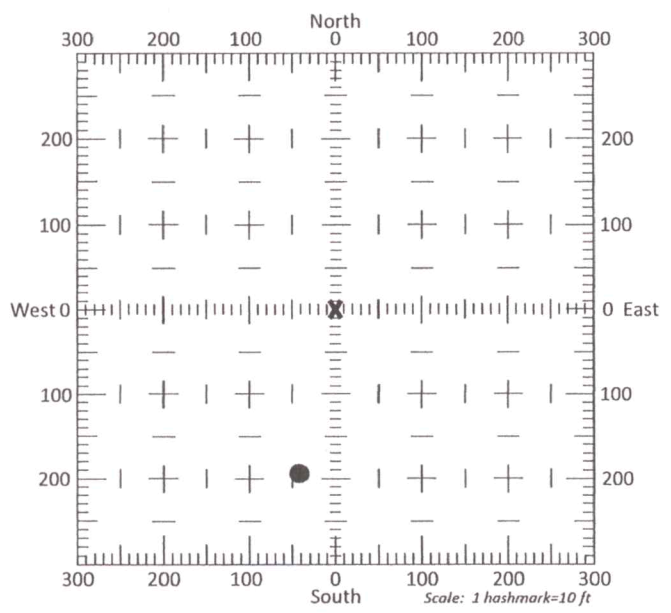
8. If a well, is the test hole log attached? Yes No

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?
Plug / cap
 (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 12-7-22 Copeland, Kansas, this 7 day of Dec, 20 22.

Curtis J. Koehn
 (Owner)

Carol J. Koehn
 (Spouse)

CURTIS J. KOEHN
 (Please Print)

CAROL J. KOEHN
 (Please Print)

 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

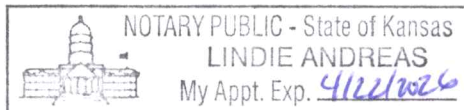
 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

State of Kansas }
 County of Gray } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 7th day of December, 20 22.

Lindie Ande
 Notary Public

My Commission Expires 4/22/2026

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

WELL LOG

DATE: 2/15/2022



CUSTOMER NAME: CURTIS KOEHN TH#1

LEGAL: S 1/2 7-29S-30W

COUNTY: GRAY CO, KS

GPS: 37.533147

-100.643331

LOGGER:

DRILLER: DIEGO VALLE

WO: 21-1152

TW	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
	0	4	TOPSOIL	SOFT	DARK BROWN	FAST		SMOOTH
	4	21	BROWN SILTY CLAY	SOFT	BROWN	FAST		SMOOTH
	21	50	BROWN CLAY W/ FINE SAND	SOFT	BROWN	FAST		SMOOTH & VIBRATION
	50	90	FINE-MED-COARSE SAND W/ SANDY CLAY LAYERS	FIRM	TAN	FAST		CHOPPY & SMOOTH
	90	152	FINE-MED-COARSE SAND W/ FINE GRAVEL	STIFF		FAST		FAST CHATTER
	152	159	FINE GRAVEL W/ FINE-MED-COARSE SAND & SANDY CLAY LEDGES	STIFF	TAN	FAST		FAST CHATTER & SMOOTH
	159	165	FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
	165	171	YELLOW CLAY	SOFT	YELLOW	FAST		SMOOTH
	171	205	FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
	205	284	FINE-MED-COARSE SAND W/ FINE GRAVEL	STIFF		FAST		FAST CHATTER
	284	303	FINE-MED GRAVEL W/ FINE-MED-COARSE SAND & CEMENTED SAND	HARD	WHITE	SEMI-SLOW		CHATTER
	303	324	FINE-MED-COARSE SAND <i>EST. SAND</i>	FIRM		FAST		FAST CHATTER
	324	370	FINE-MED GRAVEL W/ FINE-MED-COARSE SAND & LIMEROCK TRACES	STIFF	WHITE TAN & WHITE	FAST SEMI-SLOW		FAST CHATTER
	370	410	SANDY CLAY W/ FINE-MED SAND, LIMEROCK & CEMENTED SAND LAYERS	STIFF	WHITE	FAST SEMI-SLOW		SMOOTH & CHOPPY
	410	425	BROWN STICKY CLAY	STICKY	BROWN	FAST		SMOOTH
	425	434	FINE-MED SAND	SOFT		FAST		VIBRATION
	434	454	SANDY CLAY W/ LIMEROCK & FINE-MED SAND	FIRM	WHITE	FAST		SMOOTH & CHOPPY
	454	470	BROWN ROCK W/ SANDSTONE	STIFF	BROWN YELLOW & GRAY	FAST		FAST CHATTER
	470	476	YELLOW & GRAY CLAY W/ A LITTLE SOAPSTONE	SOFT	GRAY & YELLOW	FAST		SMOOTH & VIBRATION
	476	495	GRAY CLAY & A LITTLE YELLOW SOAPSTONE	SOFT	GRAY & YELLOW	FAST		SMOOTH & VIBRATION
	495	505	SHALE	SOFT	BLUE	SLOW		SMOOTH
	505	506	HARD SPOT	HARD		SLOW		CHATTER
	506	520	SHALE	SOFT	BLUE	SLOW		SMOOTH
			QUIKGEL - 12					
			WATER LOADS - 2					
			SODA ASH - 3/4					
			HOLE PLUG - 2					
			CASING SEAL - 1					
			EZ MUD - 1/4					



LEXINGTON, NE

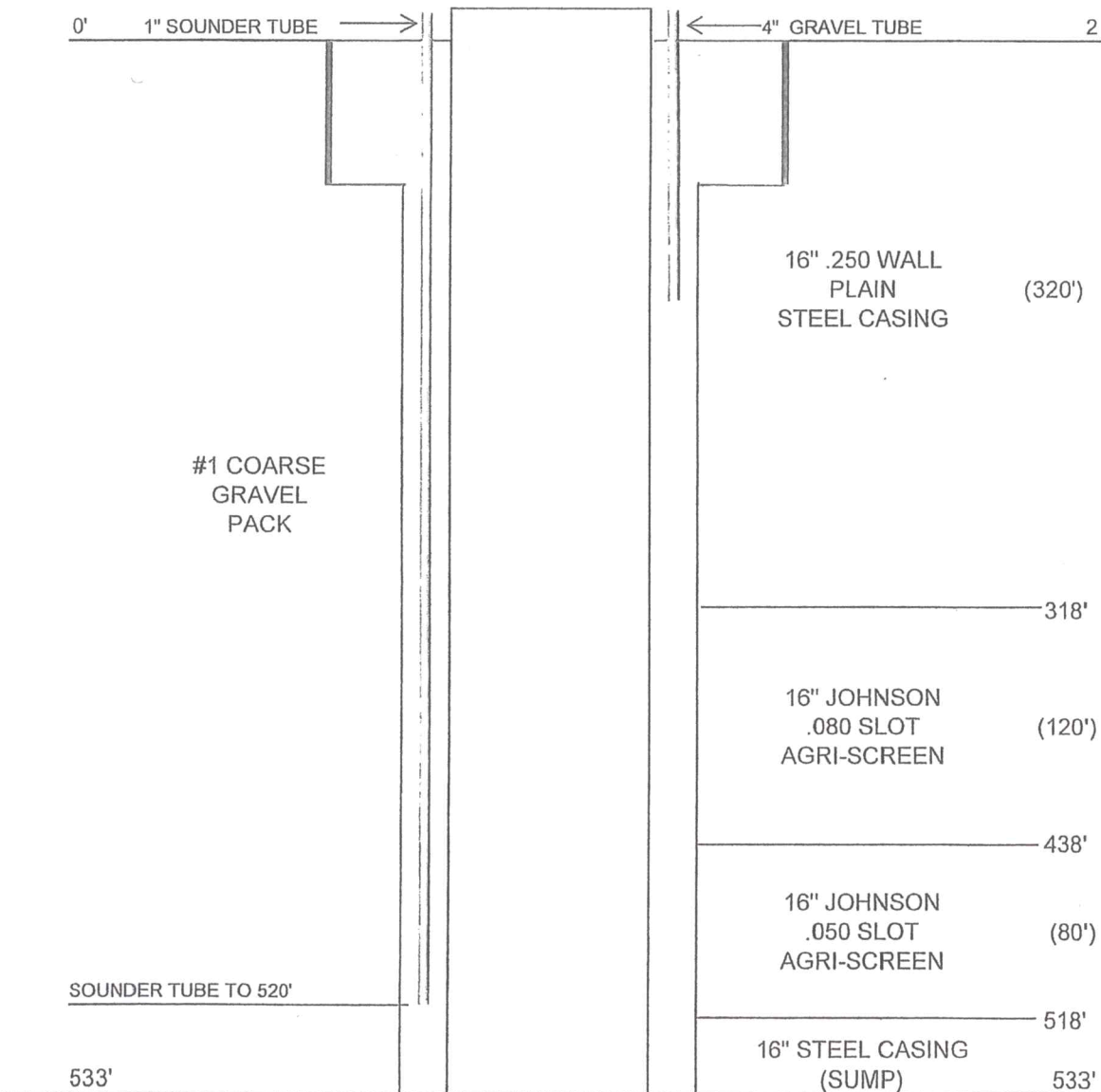
Well Design & Construction "PROPOSED"

Customer Name: CURTIS KOEHN AT TEST HOLE #1 WR #3557
Legal: SE/SW 7-29S-30W County: GRAY
G.P.S.: 37.533147 N Date:
100.673331 W WO #:

DRILLER: WATER SUPPLY: IRRIGATION WELL
HELPER(S): DRILLING RIG: M-100
BOREHOLE DIAMETER: 30" DRILLING METHOD: REVERSE CIRCULATION
CASING DIAMETER: 16" QUIKGEL: TBD HOLE PLUG: 20' +
TOTAL WELL DEPTH: 533' GRAVEL: 100 TONS OF #1 COARSE
DRILLING FLUID: TBD GRAVEL SUPPLIER: HUBER
ADDITIONAL INFO: TEMPORARY SURFACE CASING

GROUT AND GRAVEL

SCREEN AND CASING





Century GEOPHYSICAL CORP.

CURTIS KOEHN

COMPANY : DOWNEY DRILLING INC
WELL : CURTIS KOEH
LOCATION/FIELD : TH#1
COUNTY : GRAY
LOCATION : S 1/2
SECTION : 7

OTHER SERVICES:

TOWNSHIP : 29S RANGE : 30W

DATE : 02/15/22
DEPTH DRILLER : 520
LOG BOTTOM : 519.80
LOG TOP : 1.00

PERMANENT DATUM : GL

KB :
DF :
GL :

LOG MEASURED FROM: GL
DRL MEASURED FROM: GL

CASING DIAMETER : 10.
CASING TYPE :
CASING THICKNESS:

LOGGING UNIT : 1903
FIELD OFFICE : DDI
RECORDED BY : DIEGO

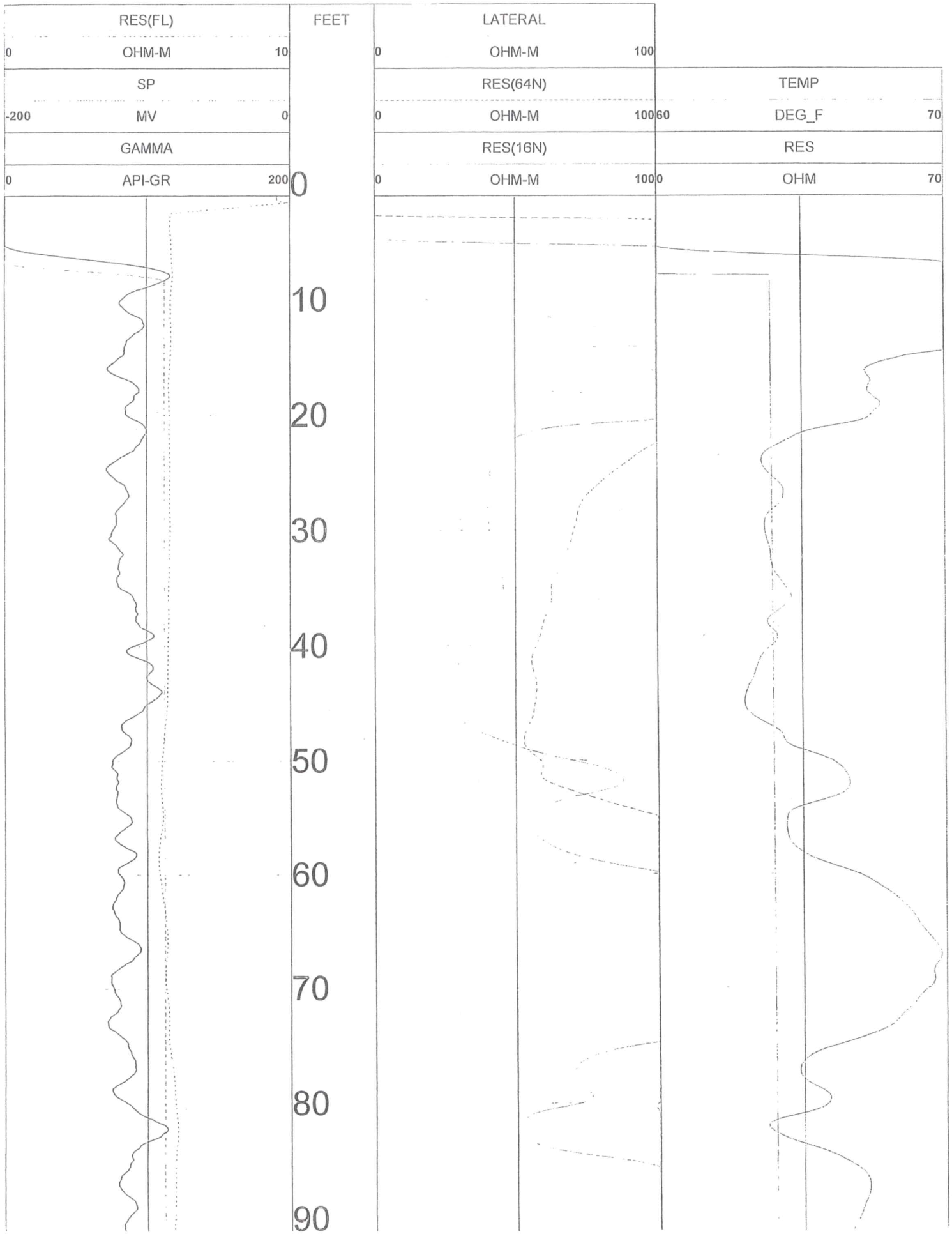
BIT SIZE : 6.25
MAGNETIC DECL. : 0
MATRIX DENSITY : 2.71
NEUTRON MATRIX : LIMESTON

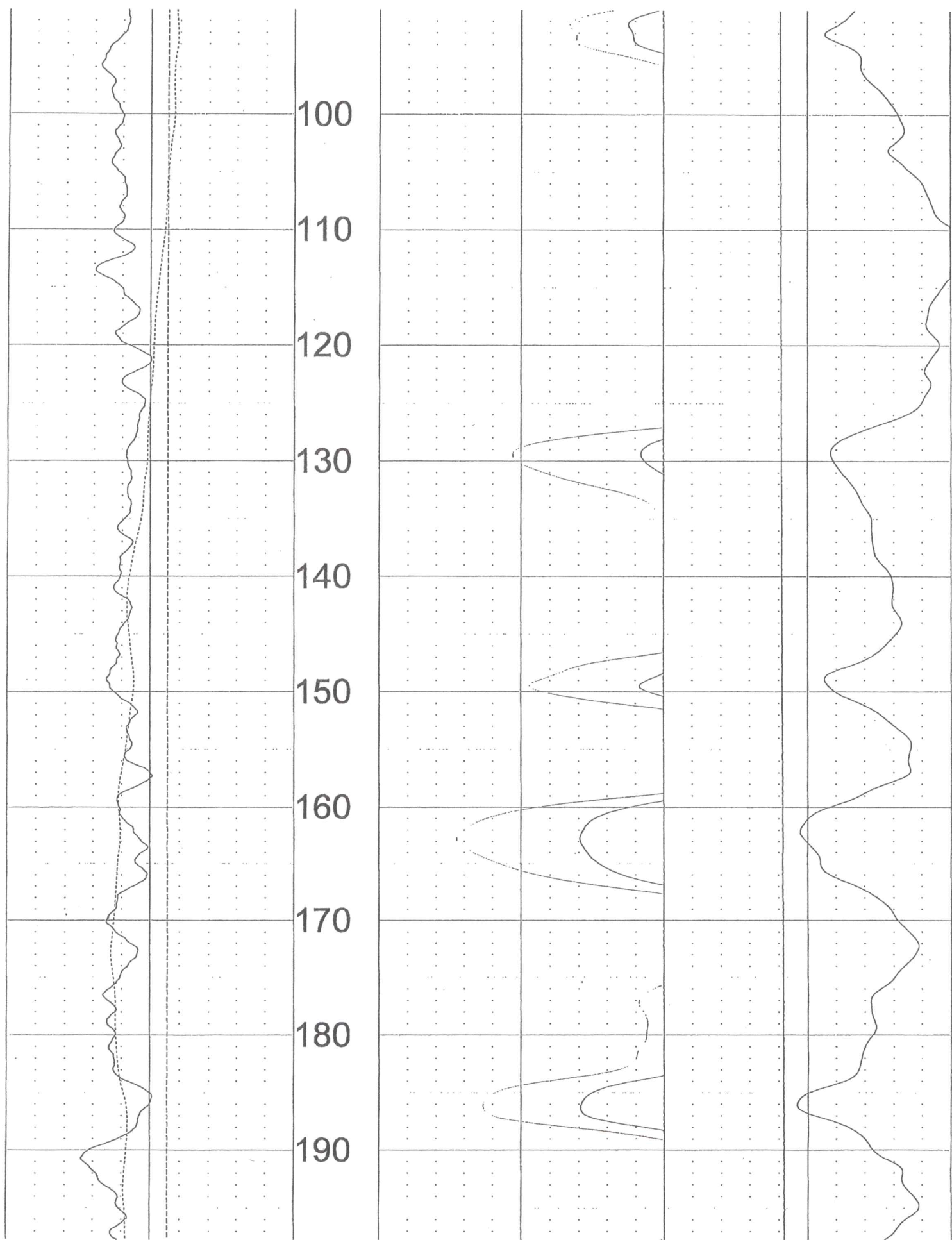
BOREHOLE FLUID : MUD
RM :
RM TEMPERATURE :
MATRIX DELTA T : 49

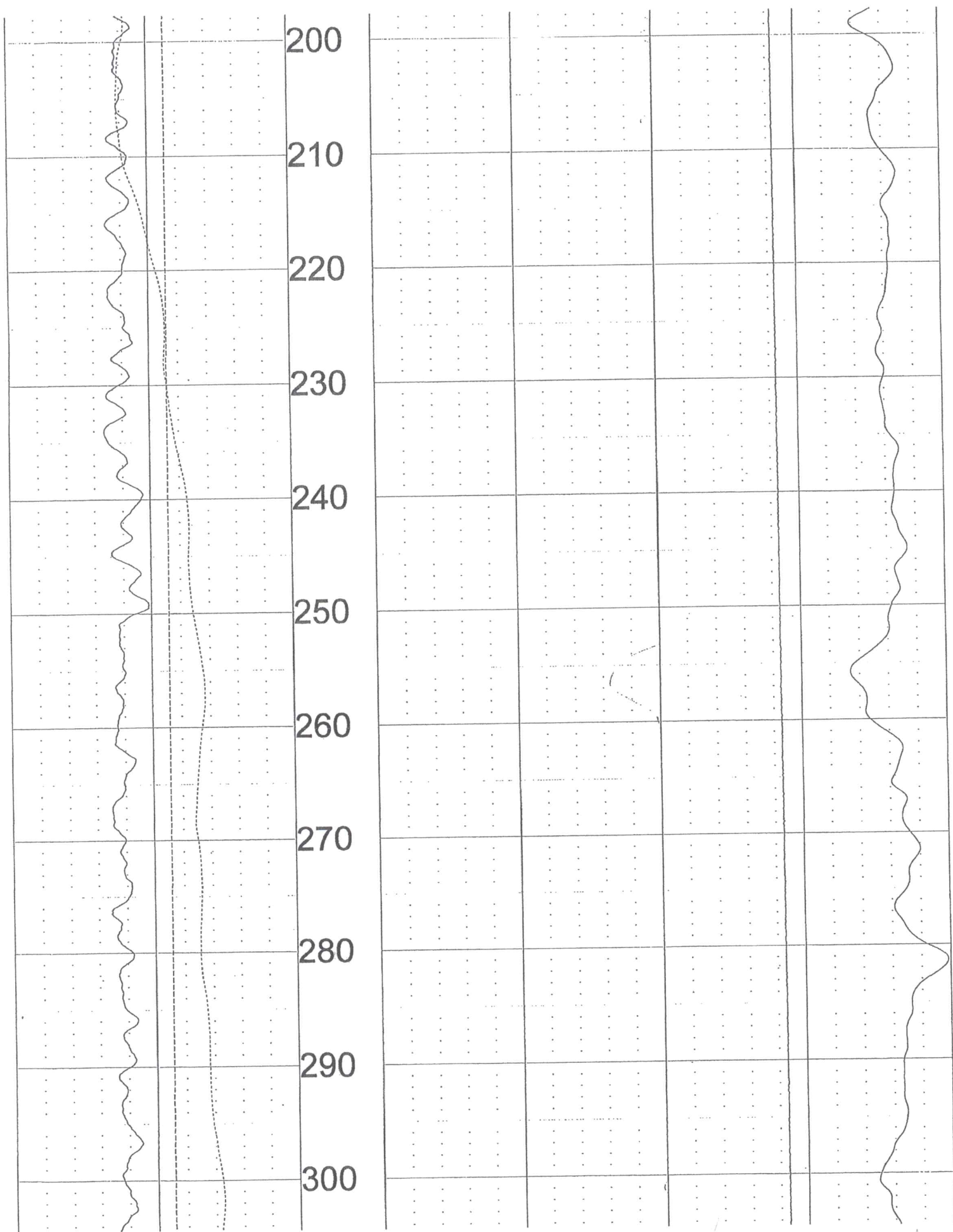
FILE : ORIGINAL
TYPE : 8144A
LGDATE: 02/15/22
LGTIME : 17:23:
THRESH: 99999

N 37.53314
W -100.64333

ALL SERVICES PROVIDED SUBJECT TO STANDARD TERMS AND CONDITIONS







520

0	API-GR	200
	GAMMA	
-200	MV	0
	SP	
0	OHM-M	10
	RES(FL)	

FEET

0	OHM-M	1000	OHM	70
	RES(16N)		RES	
0	OHM-M	10060	DEG_F	70
	RES(64N)		TEMP	
0	OHM-M	100		
	LATERAL			

TOOL CALIBRATION CURTIS KOEHN 02/15/22 17:23
TOOL 8144A TM VERSION 1
SERIAL NUMBER 365

	DATE	TIME	SENSOR		STANDARD		RESPONSE
1	Feb08,18	07:51:35	GAMMA	1.000	[API-GR]	4.000	[CPS]
	Feb08,18	07:51:35	GAMMA	340.000	[API-GR]	290.000	[CPS]
2	Jul12,17	13:24:17	RES(FL)	1.330	[OHM-M]	7595.000	[CPS]
	Jul12,17	13:24:17	RES(FL)	42.700	[OHM-M]	64820.000	[CPS]
3	Jan14,22	08:32:51	SP	0.000	[MV]	327768.000	[CPS]
	Jan14,22	08:32:51	SP	381.500	[MV]	164650.000	[CPS]
4	Jan14,22	08:33:01	RES(16N)	0.000	[OHM-M]	3453.000	[CPS]
	Jan14,22	08:33:01	RES(16N)	1951.500	[OHM-M]	448089.000	[CPS]
5	Jan14,22	08:33:10	RES(64N)	0.000	[OHM-M]	3163.000	[CPS]
	Jan14,22	08:33:10	RES(64N)	1994.000	[OHM-M]	449170.000	[CPS]
6	Jul12,17	13:17:49	TEMP	33.400	[DEG_F]	66910.000	[CPS]
	Jul12,17	13:17:49	TEMP	102.200	[DEG_F]	270930.000	[CPS]
7	Jan14,22	08:33:36	RES	0.000	[OHM]	21285.000	[CPS]
	Jan14,22	08:33:36	RES	944.000	[OHM]	190148.000	[CPS]

CURTIS KOEHN

S1/2 7-29S-30W HASKELL CO.

Legend

Copeland Santa Fe Senior Center

TH #2 ELEV=2835'

WR #3557 ELEV=2834'

TH #1 ELEV=2833'

RECEIVED
DEC 06 2012
Garden City Field Office
Division of Water Resources

REPLACEMENT
LOCATION @ TH #1

Google Earth

2000 ft

