

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

1. File Number: 4516	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: 2/16/2022
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8a. Applicant(s) / Landowner(s) / WUC Person ID **67077**
 New to system Add Seq# _____

MCKINNEY FAMILY LEGACY LLC
4256 W ROAD 12
JOHNSON, KS 67855

8c. Landowner(s) Person ID _____
 New to system Add Seq# _____

WANDA LEE DORSEY
9354 S 444 RD
WELCH OK 74369

8b. Landowner(s) Person ID **67383**
 New to system Add Seq# _____

NEWBY FAMILY LEGACY LLC
Attn: ORETA MCKINNEY
3879 W RD 12
JOHNSON, KS 67880

8d. Landowner(s) Person ID _____
 New to system Add Seq# _____

ILA JUNE ELLIS
PO BOX 217
WAMSUTTER, WY 82336-0217

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: **6/21/2022** By: **AM**
 Date Entered: _____ By: _____

File No. **4516** 11. County: **ST** Basin: **BEAR CREEK** Stream: Formation Code: **211/330/500** 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

CHK	63032																				

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 3724	1	29S42W	1			12.5	35	40	35	35	12.5	35	40								245	8a	N	MULTIPLE	
ENT	1	29S42W												40	35	12.5	35				122.5	8c		MULTIPLE	
ENT	1	29S42E																35	40	35	12.5	122.5	8d		MULTIPLE
CHK 8440	31	28S41W	1			40	40	40		40			40								200	8a	N	MULTIPLE	
ENT 15351	30	28S41W	2			40	38	36	32									40	40	40	40	306	8a	N	MULTIPLE
ENT 39980	29	28S41W	1											40	40	40	40				160	8b	N	MULTIPLE	

Base Acres: Year: Minimum Reasonable Quantity:
 Comments: **FILES OVERLAP PLACE OF USE 4516; 16328; 24548 & 30696**

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

June 22, 2022

MCKINNEY FAMILY LEGACY LLC
4256 W ROAD 12
JOHNSON, KS 67855

RE: Filed Office Application for Change
Water Right, File Nos. 4516; 16328; 24548 & 30696

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 that reads "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc: Newby Family Legacy LLC
Wanda Dorsey
Ila Ellis
GROUNDWATER MANAGEMENT DISTRICT NO. 3

CERTIFICATE OF SERVICE

On this 22nd day of June, 2022, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Water Right, File Nos. 4,516, 16,328, 24,548 and 30,696 dated 22nd day of June, 2022 was mailed postage prepaid, first class, US mail to the following:

MCKINNEY FAMILY LEGACY LLC
4256 W ROAD 12
JOHNSON, KS 67855

Pc:

NEWBY FAMILY LEGACY LLC
Attn: ORETA MCKINNEY
3879 W RD 12
JOHNSON, KS 67880

WANDA LEE DORSEY
9354 S 444 RD
WELCH OK 74369

ILA JUNE ELLIS
PO BOX 217
WAMSUTTER, WY 82336-0217

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.

File No. 4516

RECEIVED
 4:47 pm
 FEB 16 2021

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: MCKINNEY FAMILY LEGACY LLC
4256 W RD 12 JOHNSON KS 67855

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: SAME AS ABOVE

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: **SEE SUPPLEMENTAL PAGES**

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: **SEE SUPPLEMENTAL PAGES**

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 2-16-21 Check # 116

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) CREATE A COMPLETE OVERLAP
IN PLACE OF USE BETWEEN FILE NOS. 4516; 16328
24548 & 30696

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

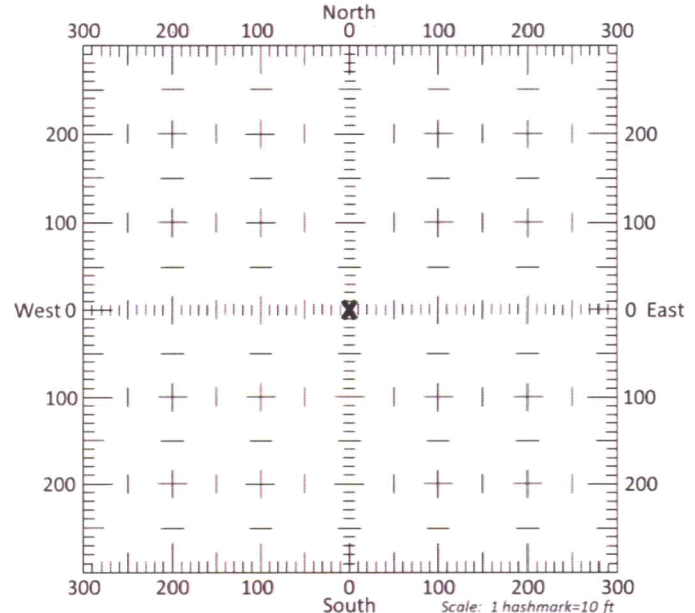
9. The change(s) (was)(will be) completed by?
UPON APPROVAL

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

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 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.)

Owner of Land ---- NAME: WANDA DORSEY
 ADDRESS: 9354 S 444 RD WELCH OK 74369

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			
1	29S	42W																		122.5	

Owner of Land ---- NAME: ILA ELLIS
 ADDRESS: PO BOX 217 WAMSUTTER WY 82336-0217

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					
1	29S	42W																35	40	35	12.5	122.5	

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).

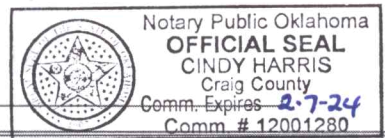
I hereby verify, being first duly sworn upon my oath or affirmation and under penalty of perjury, that I am of lawful age and the owner, the spouse of the owner, or a duly authorized agent of the owner(s) to make this application on their behalf, in regards to the water right(s) to which this application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

Dated at Welch, OK, ~~Kansas~~, this 9th day of July, 2020.

<u>Wanda L Dorsey</u> (Owner)	
	(Spouse)
<u>Wanda L Dorsey</u> (Please Print)	
	(Please Print)
	(Owner)
	(Spouse)
	(Please Print)
	(Please Print)
	(Owner)
	(Spouse)
	(Please Print)
	(Please Print)

State of ~~Kansas~~ Oklahoma }
 County of Craig } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 9th day of July, 2020.



Cindy Harris
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

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Dated at Johnson, Kansas, this 16th day of June, 2020.

<u>McKinney Family Legacy LLC</u> (Owner)	<u>By Brad McKinney</u> (Spouse)
<u>McKinney Family Legacy LLC</u> (Please Print)	<u>By Brad McKinney</u> (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)

State of Kansas }
County of Stanton } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 16th day of June, 2020.

Pamela K. Cook
Notary Public

My Commission Expires 5/26/2024.

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.

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Dated at Wamsutter, Wyoming, ~~Kansas~~, this 15 day of June, 2020.

Ila June Easter
(Owner)

Sam Ellis
(Spouse)

Ila June Ellis
(Please Print)

Sam Ellis
(Please Print)

(Owner)

(Spouse)

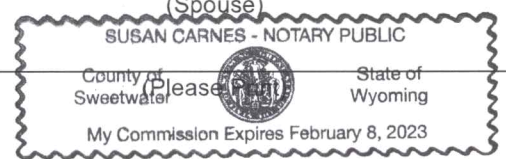
(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)



State of ~~Kansas~~ Wyoming } SS
County of Sweetwater

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 15 day of June, 2020.

Susan Carnes
Notary Public

My Commission Expires 2/8/2023.

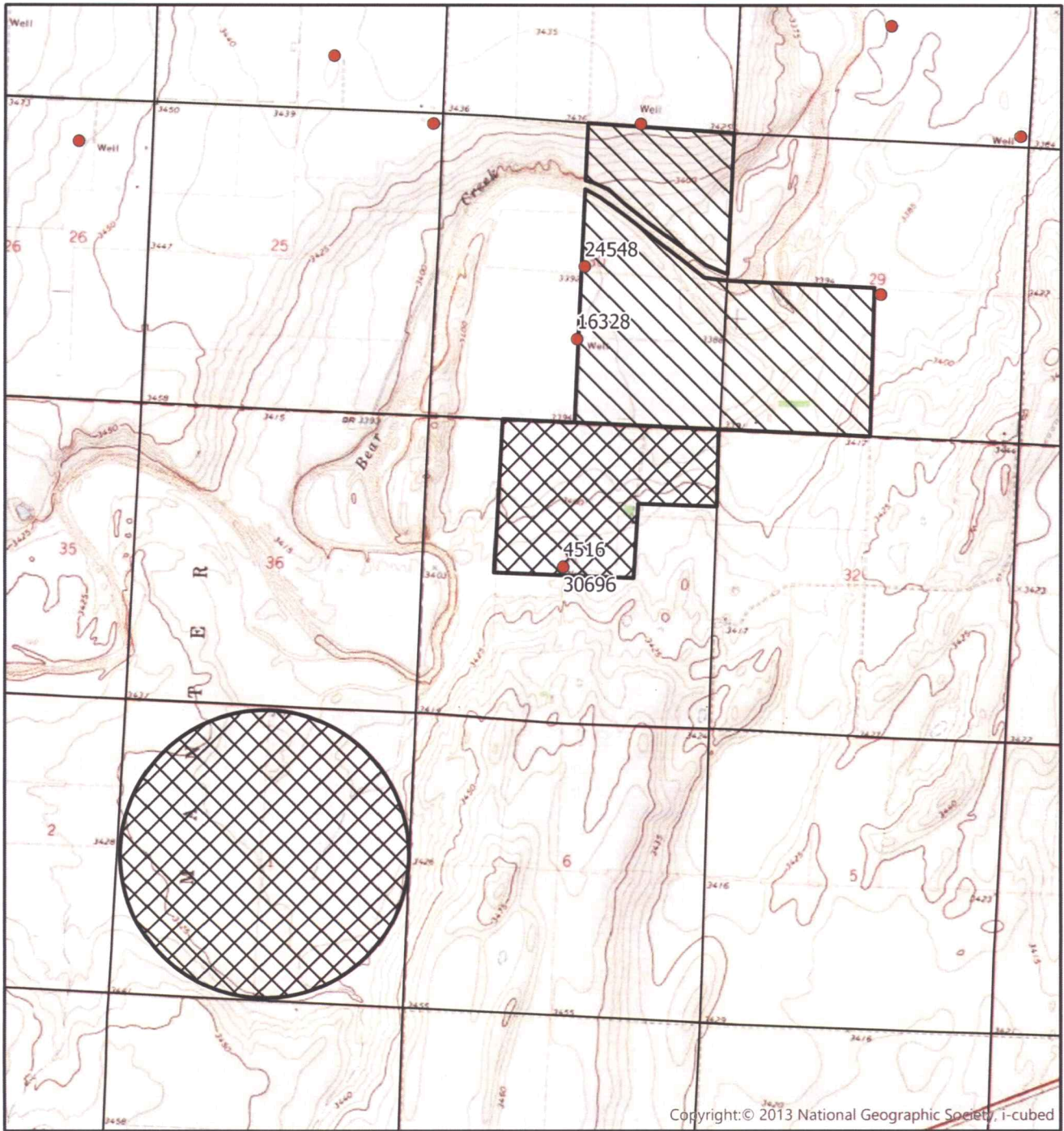
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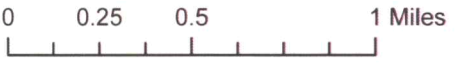
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- (2) Application to change a point of diversion more than 300 feet \$200
- (3) Application to change the place of use \$200

CHANGE IN PLACE OF USE FILE NOS. 4516 & 30696



Copyright: © 2013 National Geographic Society, i-cubed

Township 28 & 29 South Range 41 & 42 West
Stanton County



AUTHORIZED PLACE OF USE



PROPOSED PLACE OF USE



POINT OF DIVERSION



Created By: AM/GCFO