

Kansas Department of Agriculture  
 Division of Water Resources  
**CHANGE: pu WORKSHEET**

1. File Number: <b>7729</b>	2. Status Change Date: <i>3-22-2022</i>	3. Change Num: <b>C1</b>	4. Field Office: <b>04</b>	5. GMD: <b>03</b>
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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: <b>3/4/2022</b>
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8a. Landowner, applicant New to system <input type="checkbox"/> Person ID <b>62826</b> Add Seq# _____  <b>ROCKING HEIFER LLC        ATTN: EAST FARM        439 EAST RD 4        ULYSSES, KS 67880</b>	8c. applicant, WUC New to system <input type="checkbox"/> Person ID _____ Add Seq# _____
---	--

8b. Landowner(s) New to system <input type="checkbox"/> Person ID <b>65276</b> Add Seq# _____  <b>GALL FAMILY TRUST        1618 CARRIAGE ESTATES RD        SHERMAN, TX 75092</b>	8d. WUC New to system <input type="checkbox"/> Person ID _____ Add Seq# _____  <b>DUANE C GALL        1618 CARRIAGE ESTATES RD        SHERMAN, TX 75092</b>
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9. Documents and Enclosure(s):  DWR Meter(s) Date to Comply: **12/31/22**     N & P Date to Comply: \_\_\_\_\_

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: **3/22/2022**    By: **MAM**  
 Date Entered: \_\_\_\_\_    By: \_\_\_\_\_





Garden City Field Office  
4532 W. Jones, Suite B  
Garden City, KS 67846

Mike Beam, Secretary

Phone: 620-276-2901  
Fax: 620-276-9315  
www.agriculture.ks.gov

Laura Kelly, Governor

March 22, 2022

DUANE C GALL  
1618 CARRIAGE ESTATES RD  
SHERMAN, TX 75092

RE: Field Office Application for Change  
Water Right, File No. 7729

Dear Sir:


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 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. Also please note the additional condition attached to the approval.

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,

  
Michael A. Meyer  
Water Commissioner

MAM  
enclosures

pc: Rocking Heifer LLC  
Gall Family Trust  
Groundwater Management District No. 3

**CERTIFICATE OF SERVICE**

On this 22<sup>nd</sup> day of March 2022, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Water Right, File No. 7,729 dated 22<sup>nd</sup> day of March 2022 was mailed postage prepaid, first class, US mail to the following:

DUANE C GALL  
1618 CARRIAGE ESTATES RD  
SHERMAN, TX 75092

Pc:

ROCKING HEIFER LLC  
Attn: EAST FARM  
439 EAST RD 4  
ULYSSES, KS 67880

GALL FAMILY TRUST  
1618 CARRIAGE ESTATES RD  
SHERMAN, TX 75092

GROUNDWATER MANAGEMENT DISTRICT NO. 3

*Aaron Kingston*

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  
 1:30 pm  
 MAR 4 2022

File No. 7729

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: ROCKING HEIFER LLC. 439 EAST RD. 4 ULYSSES, KS. 67880

Phone Number: ( ) \_\_\_\_\_ Email address: \_\_\_\_\_

Name and address of Water Use Correspondent: DUANE C GALL 1618 CARRIAGE ESTATES RD. SHERMAN, TX. 75092

Phone Number: (903) 436-2474 Email address: \_\_\_\_\_

3. The presently authorized place of use is:

Owner of Land ---- NAME: GALL FAMILY TRUST

ADDRESS: 1618 CARRIAGE ESTATES RD. SHERMAN, TX. 75090

(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	
16	27	37W					15	10	25	40	40	40	40	40					250

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: GALL FAMILY TRUST

ADDRESS: 1618 CARRIAGE ESTATES RD. SHERMAN, TX. 75090

(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	
16	27	37W					24	40	40	40	40	40	40	40					304

For Office Use Only: Code \_\_\_\_\_ Fee \$ 200.00 TR # \_\_\_\_\_ Receipt Date 3-4-22 Check # 2889



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) \_\_\_\_\_  
 \_\_\_\_\_

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

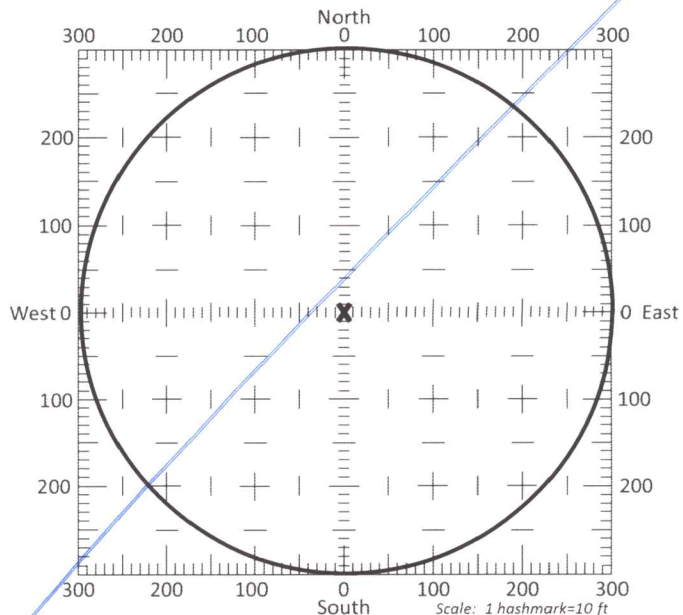
9. The change(s) (was)(will be) completed by?  
 \_\_\_\_\_

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

11. Groundwater Management District recommendation attached?  
 Yes  No

12. Assisted by \_\_\_\_\_

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.)**

APPLICATION FOR APPROVAL TO CHANGE  
THE PLACE OF USE AND/OR POINT OF DIVERSION  
SUPPLEMENTAL SHEET  
**FILE NO. 7729**  
MAKE ADDITIONAL COPIES AS NECESSARY

3. *Continued:* The presently authorized place of use is:

Owner of Land ---- NAME: ROCKING FEEDERS  
ADDRESS: 439 EAST RD 4 ULYSSES, KS. 67880

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		
16	27	37W			40	15										20	40	40	20	175

Owner of Land ---- NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_

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		

Owner of Land ---- NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_

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. *Continued:* 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: ROCKING FEEDERS  
ADDRESS: 439 EAST RD 4 ULYSSES, KS. 67880

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		
16	27	37W	29	18	40	15									30	40	40	33	<del>245</del> 240	
					39	11														

Owner of Land ---- NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_

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		

Owner of Land ---- NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_

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		



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 17<sup>th</sup> day of MARCH, 20 22.

Duane C. Gall, Trustee  
(Owner)

(Spouse)

GALL FAMILY TRUST by DUANE C. GALL  
(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

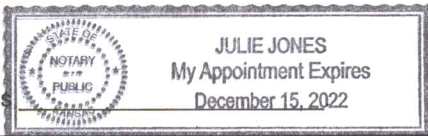
(Spouse)

(Please Print)

(Please Print)

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 17<sup>th</sup> day of March, 20 22.



Julie Jones  
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



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 Gratiot County, Michigan, Kansas, this 28th day of February, 20 22.

Barthel De Saegher  
(Owner)

Elisabeth De Saegher  
(Spouse)

Barthel De Saegher  
(Please Print)

Elisabeth De Saegher  
(Please Print)

\_\_\_\_\_  
(Owner)

~~Barthel~~  
(Spouse)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

\_\_\_\_\_  
(Please Print)

SARAH EWART  
Notary Public, State of Michigan  
County of Ingham  
(Please Print)

My Commission Expires 09-26-2024  
Acting in the County of Gratiot

State of ~~Kansas~~ Michigan }  
County of Gratiot } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 28th day of February, 20 22.

Sarah Ewart  
Notary Public

My Commission Expires 9-26-2024.

**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.

**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





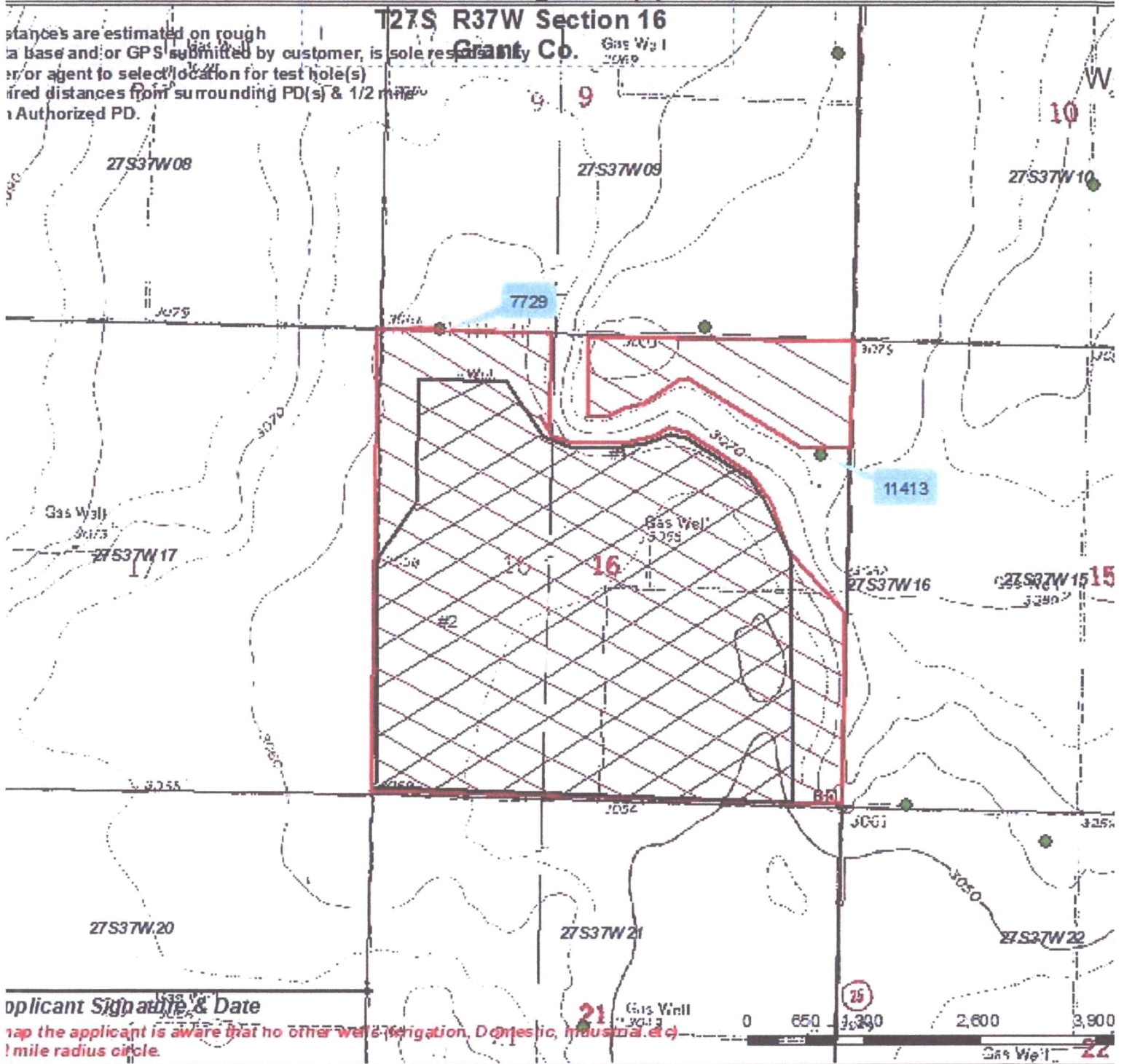


**Place of Use Change WR'(s) 7729**

**T27S R37W Section 16**

**Grant Co.**

Distances are estimated on rough  
 a base and/or GPS submitted by customer, is sole responsibility of  
 or agent to select location for test hole(s)  
 ired distances from surrounding PD(s) & 1/2 mile  
 Authorized PD.



**Applicant Signature & Date**

**Map the applicant is aware that no other wells (irrigation, Domestic, Industrial, etc.)**  
**1/2 mile radius circle.**

Authorized PD

Tested PD

Point of Diversion

1/2 Mile Radius

Water Right w/in 1/2 mile

Gas Well w/in 1/2 mile

Authorized PU

Requested PD

**Water Right w/in 1/2 mile & Owner(if apply)**

● #1 Water Right No

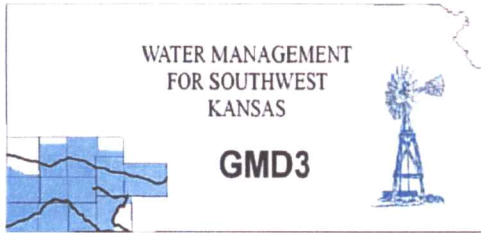
● #2 Water Right No

**Domestic well w/in 1/2 mile & Owner (if apply)**

+ A - Domestic well







**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

March 21, 2022

Michael A. Meyer  
Division of Water Resources  
4532 W Jones Ave., Suite B  
Garden City, Kansas 67846

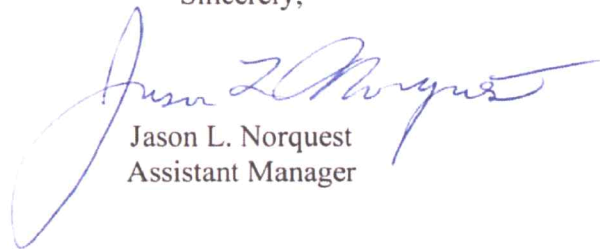
RE: Application for Change in Place of Use  
Water Right, File No. 7729

Dear Mike:

We have reviewed the application for the above referenced water right. The proposal is 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 make a complete overlap in currently authorized place of use with Water Right 11413, in accordance with K.A.R. 5-5-11(b). At the present time these water rights overlap only partially. No new acres are proposed that are not current authorized by one of the water rights. It is therefore recommended that the application 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 that reads "Jason L. Norquest".

Jason L. Norquest  
Assistant Manager

**RECEIVED**

**MAR 21 2022**

Garden City Field Office  
Division of Water Resources

## GMD3 Change Review

---

File No(s): 7729. DWR office: GC.

App filed to change: PU.

Is Landowner(s) correct in WRIS: Rocking Heifer LLC.

If NO, is documentation included?

Is Water Use Correspondent correct in WRIS? Duane Gall.

If NO, is documentation included?

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

Point of diversion ID No(s)    being changed.

	ft. North	ft. West
Authorized PD		
Proposed PD		
<hr/>		
Difference	0	0
$a^2 + b^2 = c^2$	0	0
<hr/>		

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 with 11413.

Neighboring certified well(s) notified:   .

Name   .

Address   .

Zip   .

Email:    Phone:   .

Domestic well(s) notified:   .

Name   .

Address   .

Zip   .

Base Acres:   .

Perfected Acres:   .

Irr. Return-Flow   %

**7729 currently has an incomplete overlap in PU with 11413. This application is proposing to make the two water rights have a complete overlap in place of use, which required adding more acres to 7729.**

Is a waiver needed: No new acres proposed. Application will make a complete overlap in place of use for currently authorized acres.

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



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](http://www.agriculture.ks.gov)

Mike Beam, Secretary

Laura Kelly, Governor

March 17, 2022

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

Re: Request for Recommendation  
Water Right, File No. 7729

Dear Mr. Norquest:

This is to advise you that Rocking Heifer, LLC, has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the place of use.

We are delaying action on the change application 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 blue ink that reads "Michael A. Meyer". The signature is fluid and cursive, with a long, sweeping underline that extends to the right.

Michael A. Meyer  
Water Commissioner

MAM  
Enclosures