

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

1. File Number: 21388	2. Status Change Date: 3-13-2023	3. Change Num: C4	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: 02/24/2023
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8a. Landowner,
 New to system

Person ID **67796**
 Add Seq# _____

**LOEWEN FAMILY FARMS LLC
 PO BOX 67
 SEMINOLE, TX 79360-0067**

8c. Landowner(s)
 New to system

Person ID _____
 Add Seq# _____

8b. Landowner(s), correspondent
 New to system

Person ID _____
 Add Seq# _____

8d. WUC, applicant
 New to system

Person ID **67428**
 Add Seq# _____

**JACOB R & SUSANA P LOEWEN
 PO BOX 67
 SEMINOLE, TX 79360-0067**

9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: **12/31/2023** N & P Date to Comply: **3/1/2024**

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: _____

See attached deed

Date Prepared: **03/13/2023** By: **MAM**
 Date Entered: _____ By: _____

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

March 13, 2023

JACOB R & SUSANA P LOEWEN
PO BOX 67
SEMINOLE, TX 79360-0067

RE: Field Office Application for Change
Water Right, File Nos. 15582, 21386, 21387, 21388, 21389-D3, 21390

Dear Sir:

Enclosed are orders 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 numbers.

Your attention is directed to the enclosures and to the terms, conditions, and limitations specified in these approvals 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. Please note that water well completion forms must be completed and submitted after completion of the well. Also note the conditions on the summary order.

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 blue ink signature of Michael A. Meyer.

Michael A. Meyer
Water Commissioner

MAM:
Enclosures

CERTIFICATE OF SERVICE

On this 13th day of March 2023, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File Nos. 15,582, 21,386, 21,387, 21,388, 21,389-D3, 21390 dated 13th day of March 2023 was mailed postage prepaid, first class, US mail to the following:

JACOB R & SUSANA P LOEWEN
PO BOX 67
SEMINOLE, TX 79360-0067



Division of Water Resources Staff

F12
F11

Submit completed application to:
Kansas Department of Agriculture
Division of Water Resources
Field Office for your area.

DWR FIELD OFFICE APPLICATION FOR APPROVAL TO CHANGE THE PLACE OF USE AND/OR THE POINT OF DIVERSION



STATE OF KANSAS

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>

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. 21388

RECEIVED
3:33 pm
FEB 24 2023

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.

Garden City Field Office
Division of Water Resources

The source of supply is: Groundwater Surface water

2. Name and address of Applicant: JACOB R & SUSANA P LOEWEN

PO BOX 67, SEMINOLE, TX 79360-0067

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: same no change

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: _____

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 2-24-23 Check # Kan Pay Counts

Visa

5. **Presently authorized point of diversion:**
 One in the SE Quarter of the SE Quarter of the SE Quarter of Section 8, Township 25 South, Range 34 W, in FI County, Kansas, 250 feet North 475 feet West of Southeast corner of section.
 Authorized Rate --- Authorized Quantity --- Depth of well --- (feet)
 (DWR use only: Computer ID No. 07 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 SE Quarter of the SE Quarter of the SE Quarter of Section 8, Township 25 South, Range 34 W, in FI County, Kansas, 150 feet North 475 feet West of Southeast corner of section.
 Proposed Rate --- Proposed Quantity --- Proposed well depth (feet) 2720
 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 NE Quarter of the SW Quarter of Section 8, Township 25 South, Range 34 W, in FI County, Kansas, 2494 feet North 3255 feet West of Southeast corner of section.
 Authorized Rate --- Authorized Quantity --- Depth of well --- (feet)
 (DWR use only: Computer ID No. 06 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 NE Quarter of the SW Quarter of Section 8, Township 25 South, Range 34 W, in FI County, Kansas, 2539 feet North 3041 feet West of Southeast corner of section.
 Proposed Rate ---- Proposed Quantity ---- Proposed well depth (feet) 2720
 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?

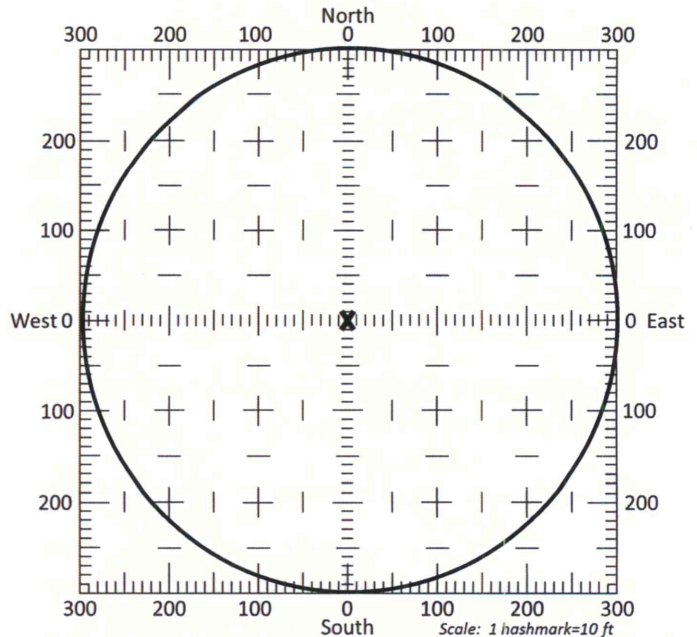
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (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. 21388

Presently authorized point of diversion:

One in the NW Quarter of the NW Quarter of the NW Quarter
of Section 8, Township 25 South, Range 34 W,
in FI County, Kansas, 5008 feet North 4682 feet West of Southeast corner of section.
Authorized Rate _____ Authorized Quantity --- Depth of well _____ (feet)
(DWR use only: Computer ID No. 06 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)

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 _____

Presently authorized point of diversion:

One in the NW Quarter of the SE Quarter of the NE Quarter
of Section 8, Township 25 South, Range 34 W,
in FI County, Kansas, 3838 feet North 1101 feet West of Southeast corner of section.
Authorized Rate _____ Authorized Quantity --- Depth of well _____ (feet)
(DWR use only: Computer ID No. 09 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)

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 _____

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)

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 _____

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)

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 _____

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 Jordan City, Kansas, this 24th day of February, 2023.

<u>Jacob Loewen</u>	
(Owner)	(Spouse)
<u>Jacob Loewen</u>	
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)

State of Kansas }
County of Stinson } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 24th day of February, 2023.



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

