

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

1. File Number: <b>26312</b>	2. Status Change Date: <i>1-17-2023</i>	3. Change Num: <b>C3</b>	4. Field Office: <b>4</b>	5. GMD: <b>3</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>11/18/2022</b>
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8a. Landowner, applicant, WUC New to system <input type="checkbox"/> Person ID <u>34700</u> Add Seq# _____  <b>DOUGLAS K &amp; JANA KOEHN</b> <b>13880 E ROAD 7</b> <b>ULYSSES, KS 67880</b>	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 <u>67091</u> Add Seq# _____  <b>JOHN CROMER ET AL</b> <b>828 ELM ST</b> <b>TWIN FALLS, ID 83301</b>	8d. WUC New to system <input type="checkbox"/> Person ID _____ Add Seq# _____
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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: \_\_\_\_\_

Date Prepared: **12/19/2022**    By: **MAM**  
 Date Entered: \_\_\_\_\_    By: \_\_\_\_\_

File No. 26312      11. County: GT      Basin: ARKANSAS RIVER      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 3851

ENT      NWNWNE      35      27      35W      4991      2360      1635      1220      1635      210      NONE

CHK 40529

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		
						NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼						
CHK	2524																										
CHK	31628																										
CHK	69688																										
CHK	69689																										

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

Mike Beam, Secretary

Laura Kelly, Governor

January 17, 2023

DOUGLAS K & JANA KOEHN  
13880 E ROAD 7  
ULYSSES, KS 67880

RE: Field Office Application for Change  
Water Right, File No. 26312

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. A condition of these approvals 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 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

pc: John Cromer et al

### CERTIFICATE OF SERVICE

On this 17<sup>th</sup> day of January 2023, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 26,312 dated 17<sup>th</sup> day of January 2022 was mailed postage prepaid, first class, US mail to the following:

DOUGLAS K & JANA KOEHN  
13880 E ROAD 7  
ULYSSES, KS 67880

pc:

JOHN CROMER ET AL  
828 ELM ST  
TWIN FALLS, ID 83301



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. 26312

**RECEIVED**  
 3:00 pm  
 NOV 18 2022

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: DOUGLAS K & JANA KOEHN

13880 E ROAD 7, ULYSSES, KS 67880

Phone Number: (620)353-3762

Email address: \_\_\_\_\_

Name and address of Water Use Correspondent: Same

Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_

3. The presently authorized place of use is:

Owner of Land ---- NAME: Same

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 \$ 200.00 TR # \_\_\_\_\_ Receipt Date 11-18-22 Check # 3149

5. **Presently authorized point of diversion:**

One in the SE Quarter of the SE Quarter of the SE Quarter of Section 35, Township 27 South, Range 35 W, in GT County, Kansas, 105 feet North 105 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. 1 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 CN Quarter of the SE Quarter of Section 35, Township 27 South, Range 35 W, in GT County, Kansas, 2615 feet North 1295 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. 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 NW Quarter of the NW Quarter of the NE Quarter of Section 35, Township 27 South, Range 35 W, in GT County, Kansas, 4991 feet North 2360 feet West of Southeast corner of section. Proposed Rate No change Proposed Quantity No change Proposed well depth (feet) 762.  
 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

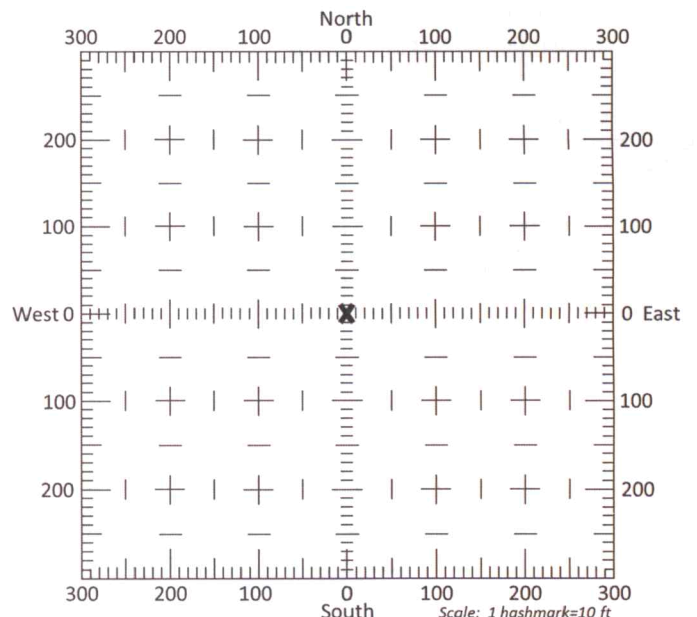
9. The change(s) (was)(will be) completed by?  
 \_\_\_\_\_  
 \_\_\_\_\_

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 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.)

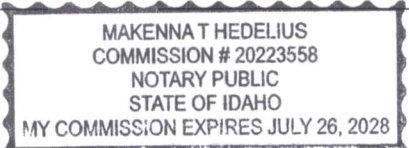
14. If the proposed groundwater point of diversion is 300 or fewer feet from the existing point of diversion, complete the following:
- (a) Does the undersigned represent all owners of the currently authorized place(s) of use identified in this application?  
 Yes     No    (If no, all owners must sign 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 Jan 9, 2023, Kansas, this 9 day of Jan, 2023.

<u>Jon T. Cromer</u> (Owner)	(Spouse)
<u>Jon T Cromer</u> (Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)



State of ~~Kansas~~ Idaho }  
 County of Twin Falls } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 9 day of January, 2023.

Makenna Hedelius  
Notary Public

My Commission Expires July 26, 2028

**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

RECEIVED

JAN 13 2023

Garden City Field Office  
Division of Water Resources

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.)
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 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.)

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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 15<sup>th</sup> day of December, 2022.

(Owner)	<u>Jana Koch</u> (Spouse)
(Please Print)	<u>Jana Koch</u> (Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)

State of Kansas }  
 County of Finney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 15<sup>th</sup> day of December, 2022.



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.

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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



14. If the proposed groundwater point of diversion is 300 or fewer feet from the existing point of diversion, complete the following:
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 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.)

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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 18<sup>th</sup> day of November, 20 22.

<u>Douglas Hoch</u> (Owner)	
<u>Douglas Hoch</u> (Please Print)	

State of Kansas }  
 County of Finney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 18<sup>th</sup> day of November, 20 22.



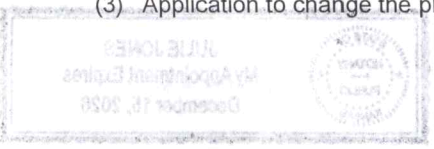
My Commission Expires \_\_\_\_\_ Julie Jones Notary Public

**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**

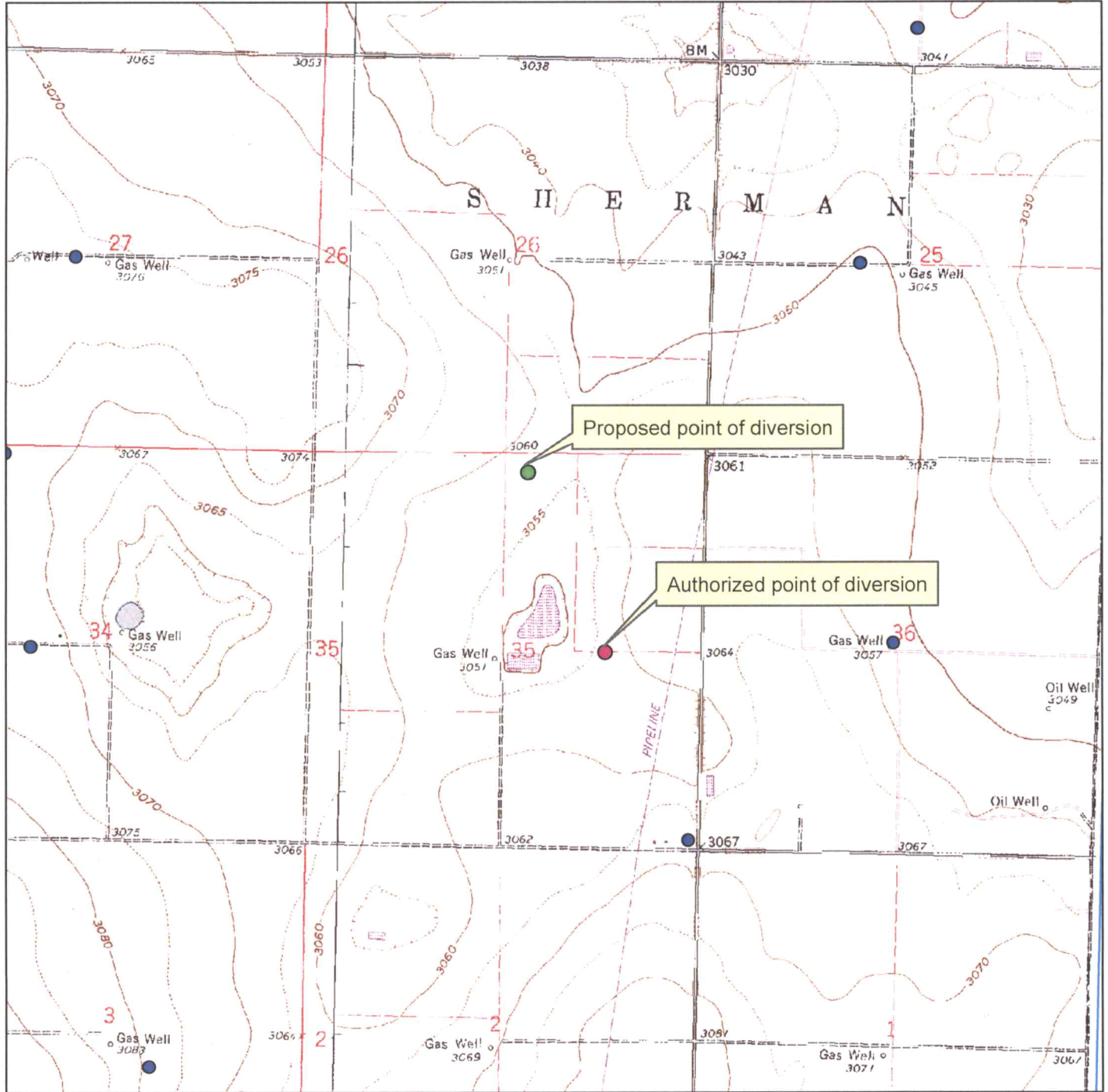
Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

- (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





# Change in point of diversion for water right 26312



- Authorized point of diversion
- Proposed point of diversion

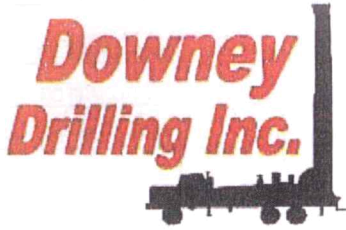


All wells within 1/2 mile are on this map.

X \_\_\_\_\_

WELL LOG

*Nearby Test - Not actual location*  
 DATE: 10/6/2022



**RECEIVED**  
 NOV 15 2022  
 Garden City Field Office  
 Division of Water Resources

CUSTOMER NAME: DOUG KOEHN

TH#1

LEGAL: NE 35-27S-35W

COUNTY: GRANT CO., KS

GPS: 37.663127

-101.117123

DRILLER: DIEGO V.

WO: 22-554

V	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
	0	4	TOP SOIL	SOFT	DRK BROWN	FAST		SMOOTH
	4	14	BROWN SILTY CLAY	SOFT	BROWN	FAST		SMOOTH
	14	36	SANDY CLAY W/ FINE SAND	SOFT	TAN	FAST		SMOOTH & VIBRATION
	36	65	FINE SAND W/ SANDY CLAY	SOFT	TAN	FAST		VIBRATION & SMOOTH
	65	71	FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
	71	93	BROWN SILTY CLAY W/ FINE SAND	SOFT	BROWN	FAST		SMOOTH & VIBRATION
	93	102	SANDY CLAY W/ FINE SAND	SOFT	TAN	FAST		SMOOTH & VIBRATION
	102	114	FINE-MED SAND W/ BROWN SILTY CLAY	SOFT	BROWN	FAST		CHOPPY
	114	117	FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
	117	119	FINE-MED-COARSE GRAVEL	STIFF		FAST		FAST CHATTER
	119	121	SANDY CLAY	SOFT	TAN	FAST		SMOOTH
	121	135	FINE-MED-COARSE SAND W/ FINE-MED GRAVEL	STIFF		FAST		FAST CHATTER
	135	147	BROWN CLAY	SOFT	BROWN	FAST		SMOOTH
	147	154	FINE-MED-COARSE SAND	SOFT		FAST		FAST CHATTER
	154	161	SANDY CLAY	SOFT	TAN	FAST		SMOOTH
	161	174	FINE-MED-COARSE SAND W/ FINE-MED-COARSE GRAVEL	STIFF		FAST		FAST CHATTER
	174	176	CEMENTED SAND	HARD	BROWN	SLOW	X	CHATTER
	176	180	FINE-MED-COARSE SAND W/ ORANGE SANDY CLAY	FIRM	ORANGE	FAST		CHOPPY
	180	185	FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
	185	190	FINE-MED-COARSE SAND W/ SANDY CLAY LEDGES	FIRM		FAST		FAST CHATTER
	190	200	GRAY SANDY CLAY	SOFT	GRAY	SLOW		VIBRATION
	200	214	FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
	214	219	SANDY CLAY	SOFT	TAN	FAST		SMOOTH
	219	240	FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
	240	259	FINE-MED SAND W/ SANDY CLAY	SOFT	TAN	FAST		VIBRATION & SMOOTH
	259	273	FINE GRAVEL W/ FINE-MED-COARSE SAND	STIFF	YELLOW	FAST		FAST CHATTER
	273	298	BLUE CLAY	SOFT	BLUE	SLOW		SMOOTH
	298	305	FINE-MED-COARSE SAND	FIRM	BLUE LIGHT BLUE	FAST SEMI SLOW		FAST CHATTER
	305	316	LIGHT BLUE CLAY W/ FINE-MED SAND & CEMENTED SAND LEDGES	FIRM	BLUE LIGHT BLUE	SLOW		SMOOTH & CHATTER
	316	319	WHITE CLAY	SOFT	WHITE	SLOW		SMOOTH
	319	324	FINE-MED-COARSE SAND W/ FINE-MED GRAVEL	STIFF		FAST REALLY FAST		FAST CHATTER
	324	329	SANDY CLAY	SOFT	TAN	FAST		SMOOTH
	329	354	FINE-MED-COARSE SAND W/ FINE GRAVEL & BROWN ROCK	STIFF	BROWN	FAST		FAST CHATTER
	354	360	FINE-MED-COARSE SAND W/ LIME ROCK	STIFF	WHITE	FAST		FAST CHATTER
	360	365	SANDY CLAY	SOFT	TAN	FAST		VIBRATION



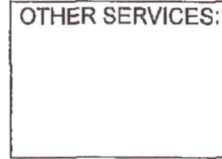


# Century GEOPHYSICAL CORP.

DOUG KOEHN

COMPANY : DOWNEY DRILLING INC  
 WELL : DOUG KOEH  
 TH#1  
 LOCATION/FIELD :  
 COUNTY : GRANT  
 LOCATION : NE  
 SECTION : 35

OTHER SERVICES:



TOWNSHIP : 27S RANGE : 35W

DATE : 10/06/22  
 DEPTH DRILLER : 762  
 LOG BOTTOM : 740.50  
 LOG TOP : 0.90

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: 10/06/22  
 LGTIME : 23:30:  
 THRESH: 99999

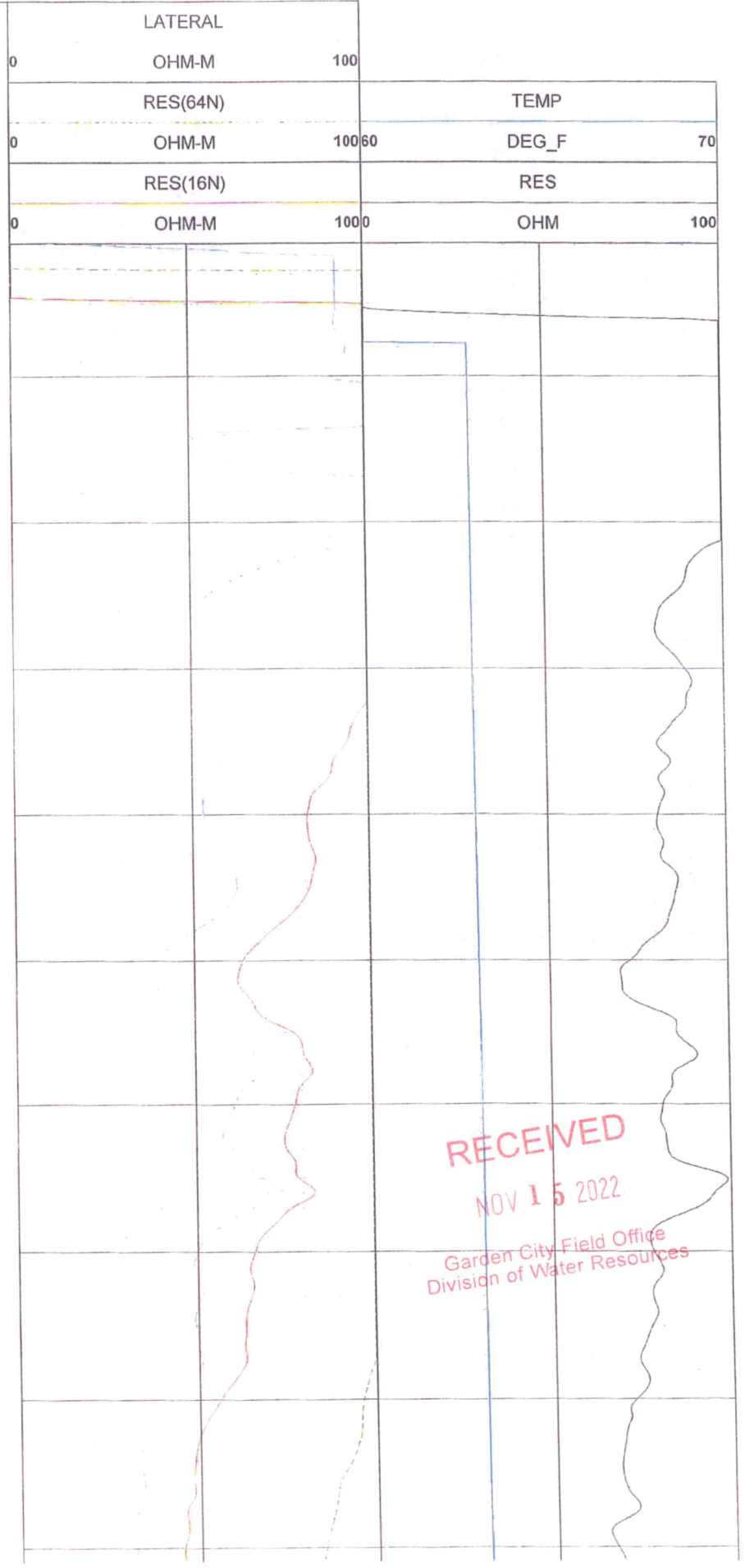
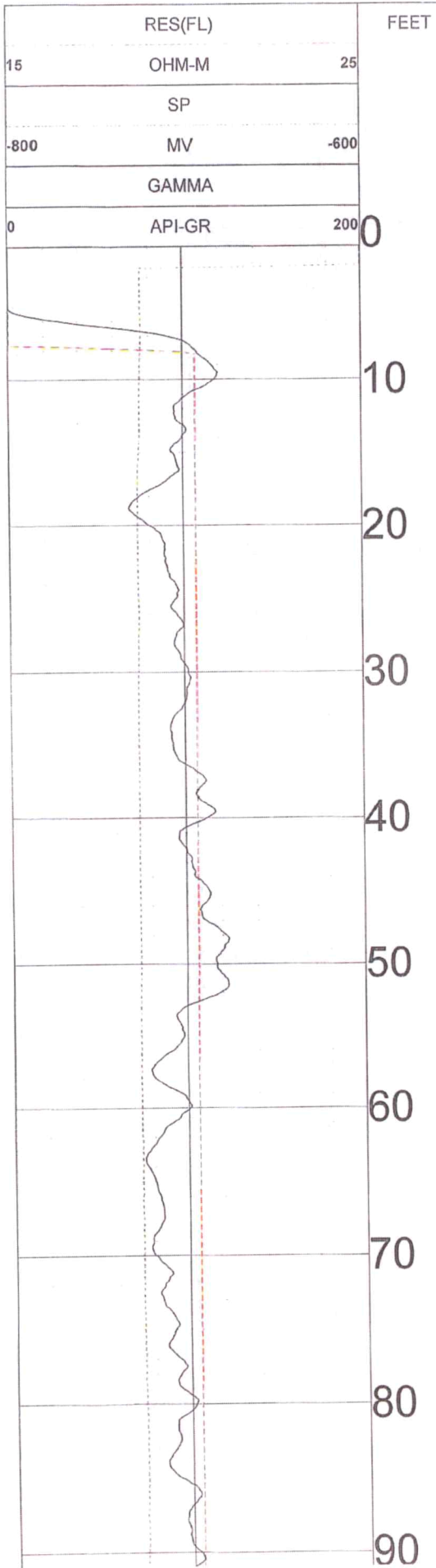
N 37.66312  
 W -101.11712

ALL SERVICES PROVIDED SUBJECT TO STANDARD TERMS AND CONDITIONS

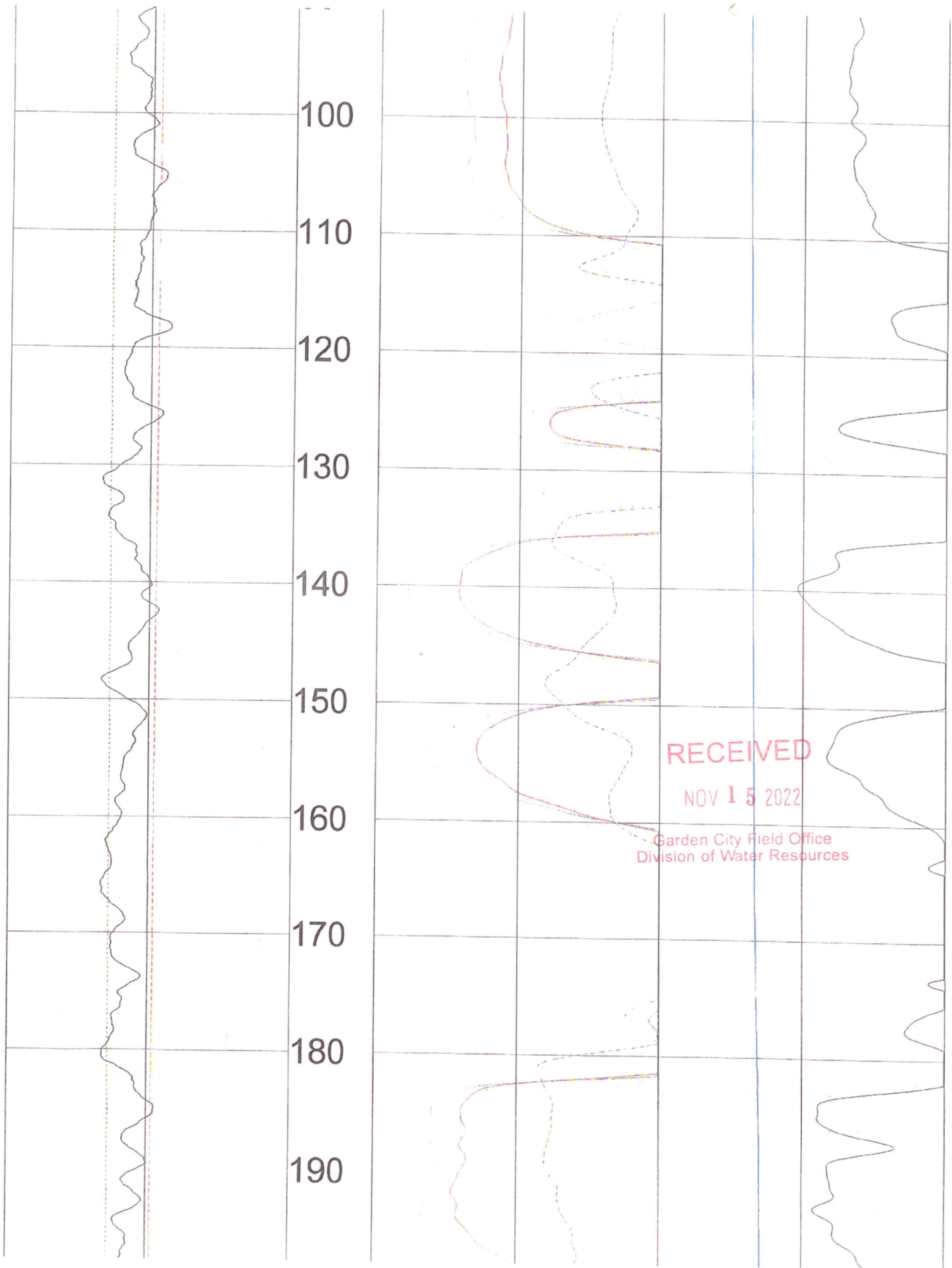
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Garden City Field Office  
 Division of Water Resources



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 Division of Water Resources

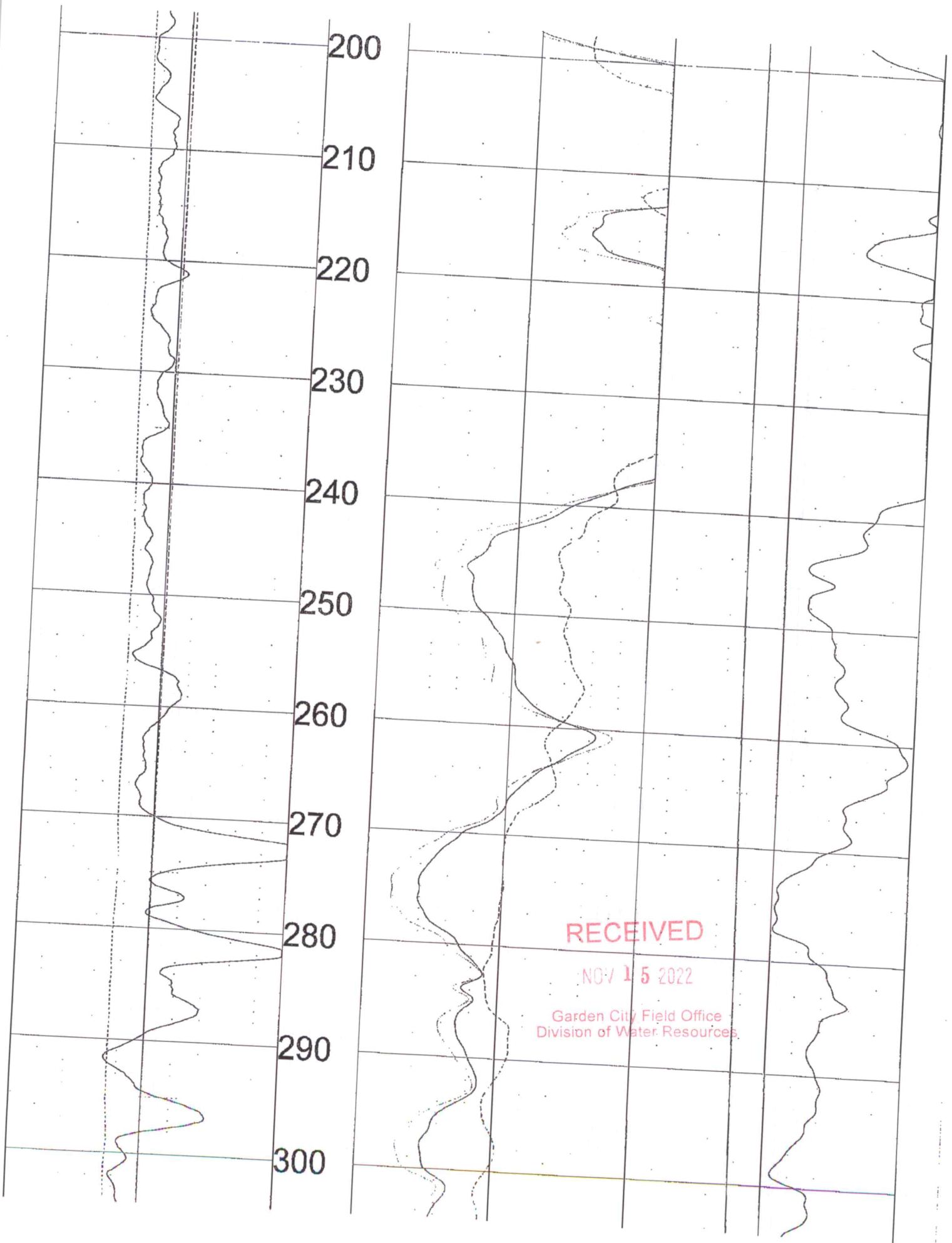


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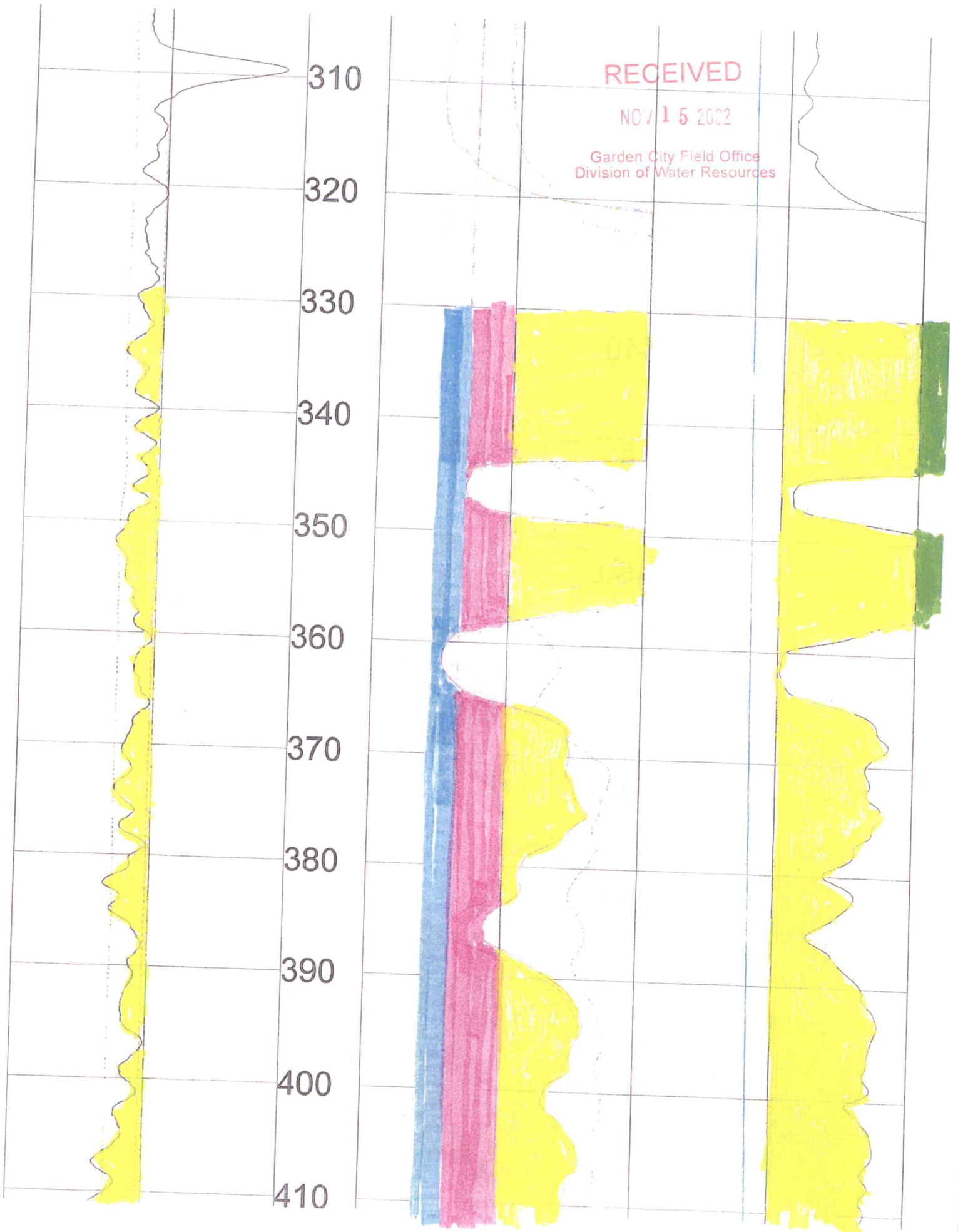


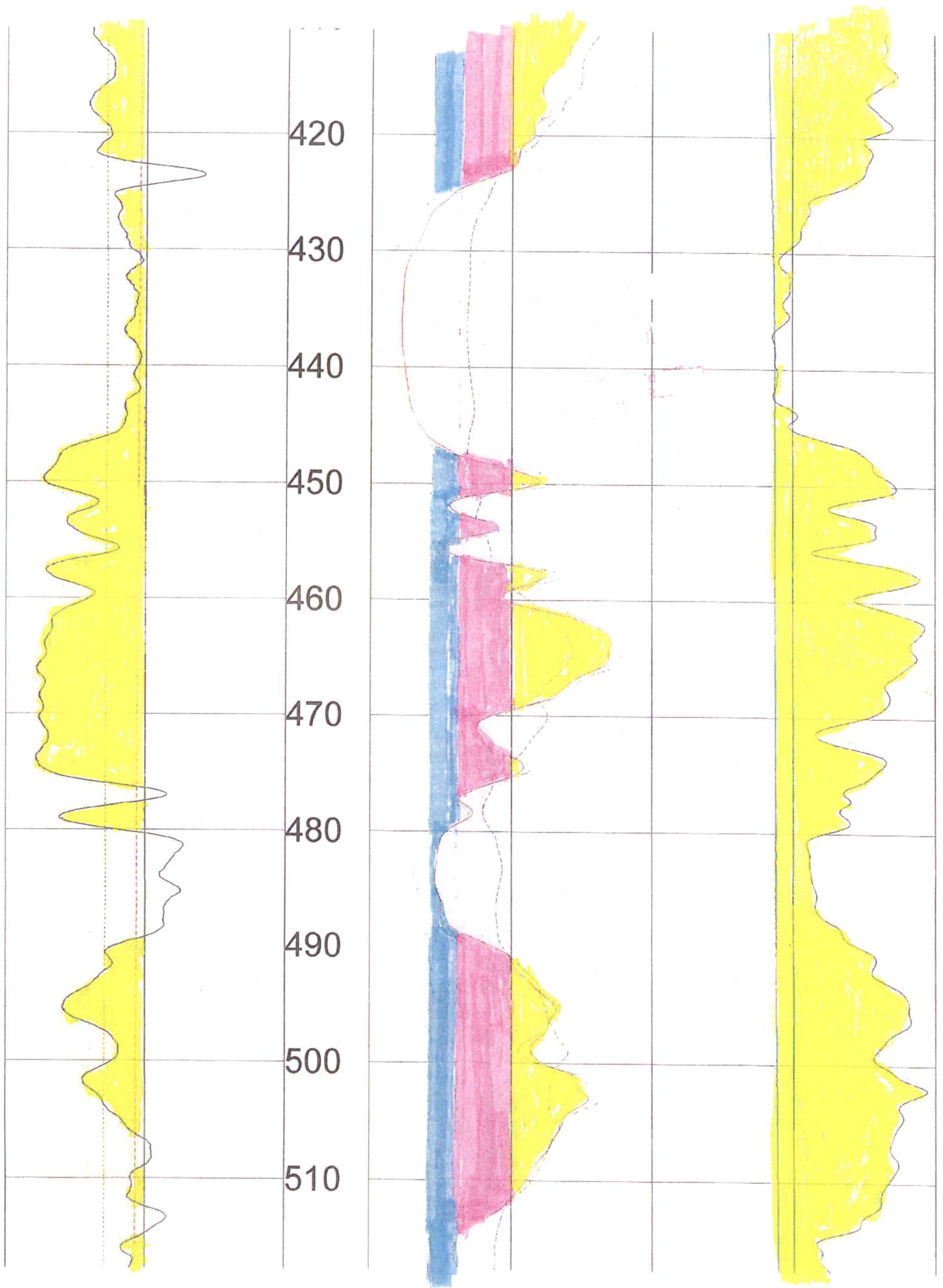


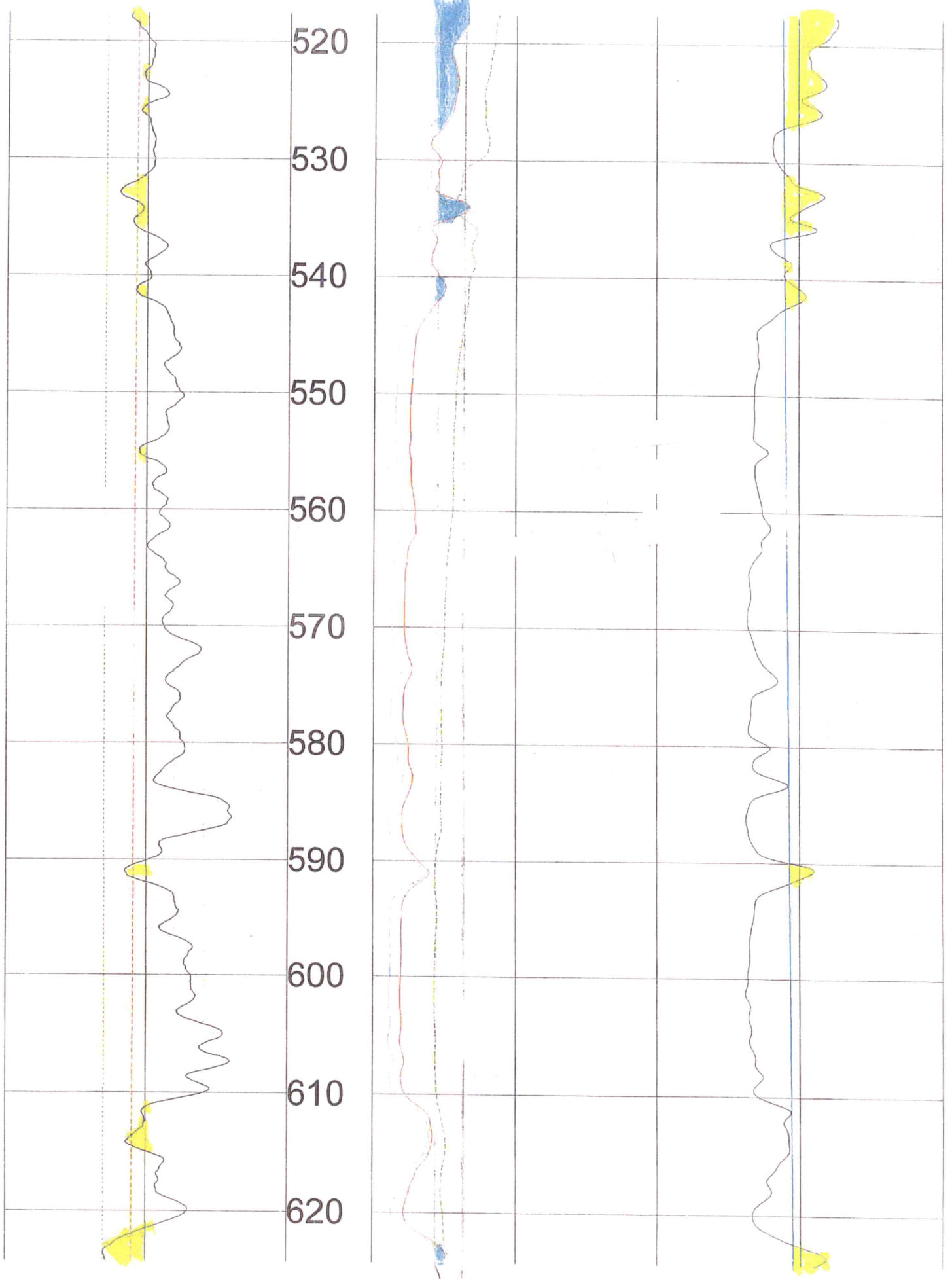
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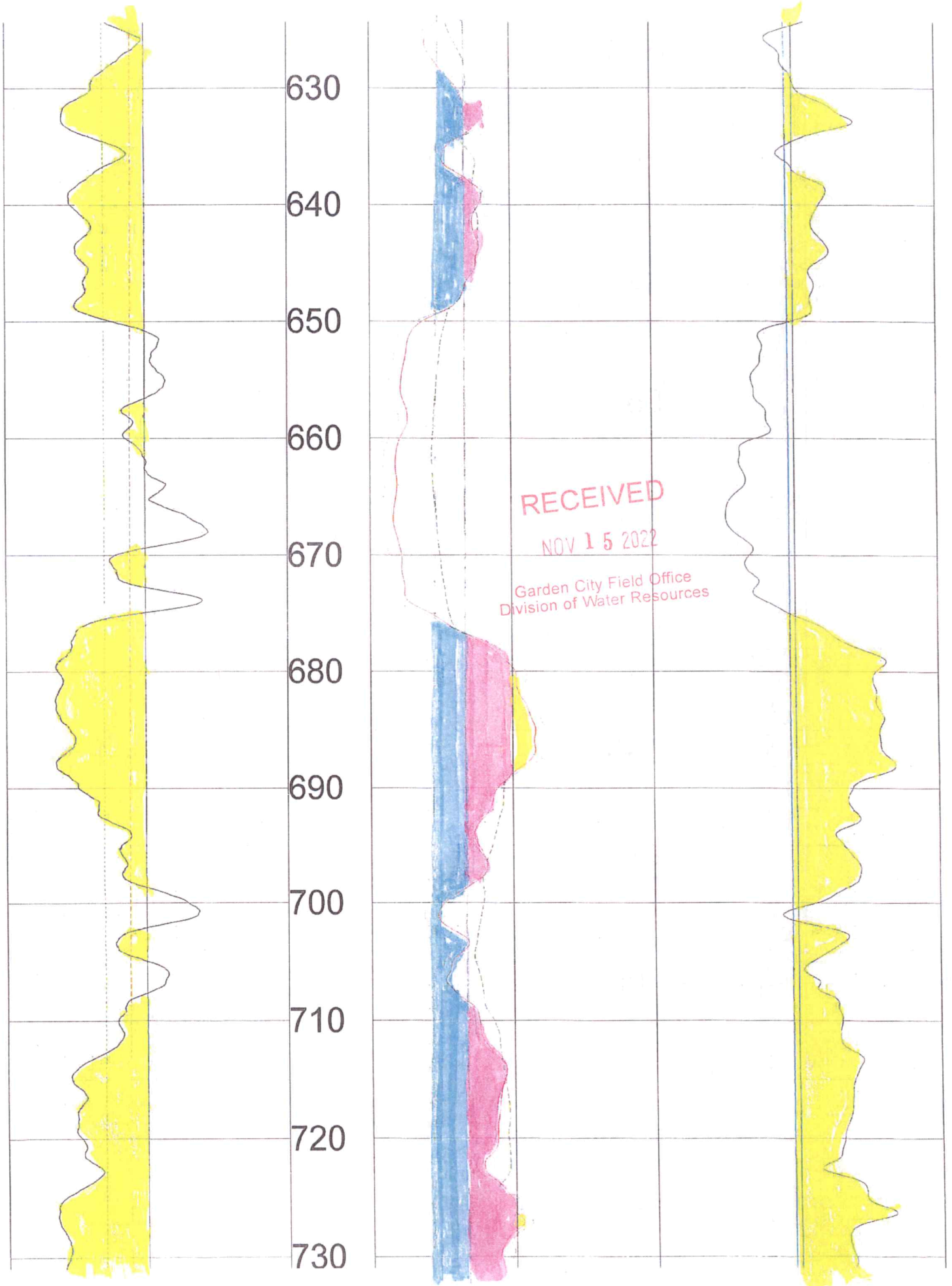
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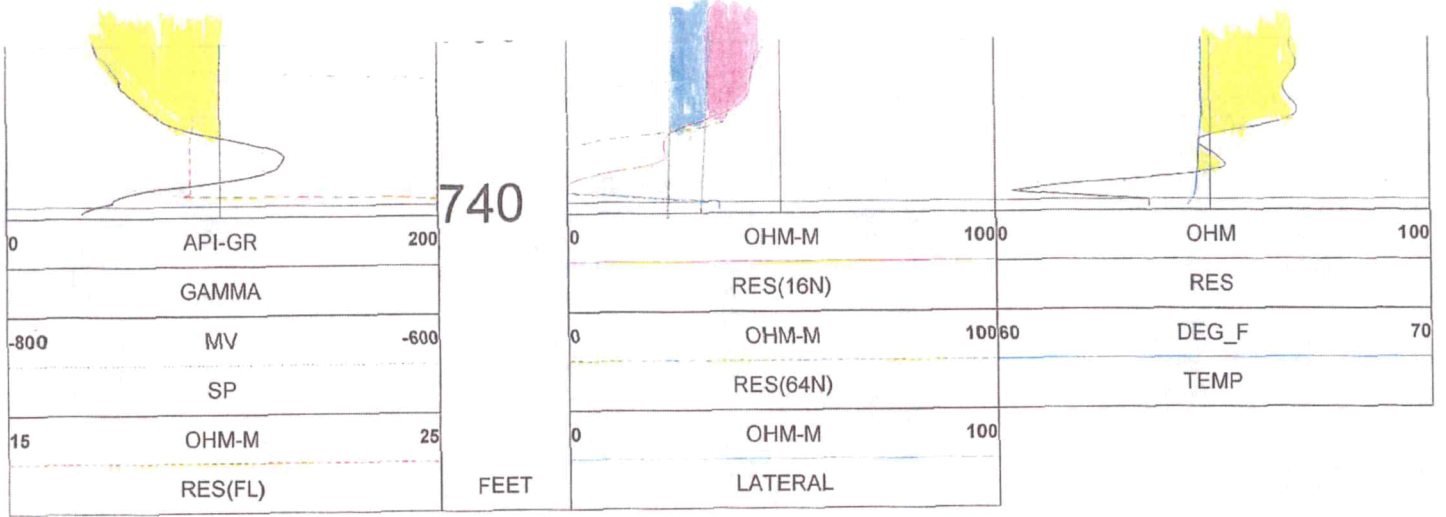
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Division of Water Resources

TOOL CALIBRATION DOUG KOEHN 10/06/22 23:30  
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]

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Garden City Field Office  
Division of Water Resources

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

November 21, 2022

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

Re: Request for Recommendation  
Water Right, File No. 26312

Dear Mr. Norquest:

This is to advise you that the Doug Koehn filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the point of diversion.

We are delaying action on the change applications 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, appearing to read "Michael A. Meyer".

Michael A. Meyer  
Water Commissioner

MAM  
Enclosures



Garden City Field Office  
4532 W. Jones, Suite A  
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

November 21, 2020

DOUGLAS K & JANA KOEHN  
13880 E ROAD 7  
ULYSSES, KS 67880

RE: Application for Change  
Water Right, File No. 26312

Dear Sir or Madam:

Application for Change in Point of Diversion was received on November 18, 2022 in the office of the chief engineer. Upon review additional information is needed.

All landowners of record of the referenced water right must sign the application in the presence of a notary. It appears that Jana is required to sign the application as well as all landowners of section 35. That appears to be Jon Cromer and others. Please see the enclosed forms for each landowner to sign the application in the presence of a notary. Please return all original forms and signatures within 15 days from the date of this letter. a copy of the application is being attached also for their information.

For the application to retain its priority of a filing, please provide all signatures pages within the next 15 days or by December 6, 2022. Failure to provide the required signatures would cause dismissal of the incomplete application.

If you have any questions, please contact our office. Please reference the water right file numbers listed above so that we may help you more efficiently.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael A. Meyer".

Michael A. Meyer  
Water Commissioner

MAM  
Enclosures