

File No. **35046** 11. County: **FI/HS** Basin: **ARKANSAS RIVER** Stream: Formation Code: Special Use:

12. Points of Diversion
 Rate and Quantity
 Authorized Additional
 Rate Quantity Rate Quantity
 gpm af gpm af Overlap PD Files

CHK	MOD	DEL	ENT	PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Rate gpm	Quantity af	Rate gpm	Quantity af	Overlap PD Files
CHK					21905												

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 _____

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				
			ENT	17296	33		26S33W	1							34	34	34	34	35	35	35	35	416	8a	N	MULTIPLE		
			ENT	267	32		26S33W	2															276	8a	N	MULTIPLE		
			ENT	23241	5		27S33W	1															280	8a	N	MULTIPLE		
			ENT	29046	34		26S33W	3							34	34	34	34					136	8a	N	MULTIPLE		
			DEL	25689																								

Base Acres: Year: Minimum Reasonable Quantity:
 Comments: **OVERLAPPING WATER RIGHTS ON PU: 13316; 16786; 33056; 35046 & 35047**

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 7, 2023

ELDON & TERRY ALEXANDER
13990 S SANDHILL RD
GARDEN CITY, KS 67846-8803

RE: Filed Office Application for Change
Water Right, File Nos. 13316; 16786; 33056; 35046 & 35047

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. **Note:** this approval does not allow any single point of diversion to exceed its annual authorized quantity.

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, appearing to read "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc: GMD 3

CERTIFICATE OF SERVICE

On this 7th day of June, 2023, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Water Right, File Nos. 13,316, 16,786, 33,056, 35,046 and 35,047 dated 7th day of June, 2023 was mailed postage prepaid, first class, US mail to the following:

ELDON & TERRY ALEXANDER
13990 S SANDHILL RD
GARDEN CITY, KS 67846-8803

Pc:

GMD 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. 35046

RECEIVED
 4:32 pm
 MAY 25 2023

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: ELDON & TERRY ALEXANDER
13990 S SANDHILL RD GARDEN CITY KS 67846-8803
 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: ELDON & TERRY ALEXANDER
 ADDRESS: 13990 S SANDHILL RD GARDEN CITY KS 67846-8803
 (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	
33	26S	33W									34	34	34	34					136

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 SHEET
 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 5-25-23 Check # 27810

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter
 of Section _____, Township _____ South, Range _____ (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 _____ (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 _____ (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 _____ (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 W/ FILE NOS. 16786; 33056; 35046
13316 & 35047

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

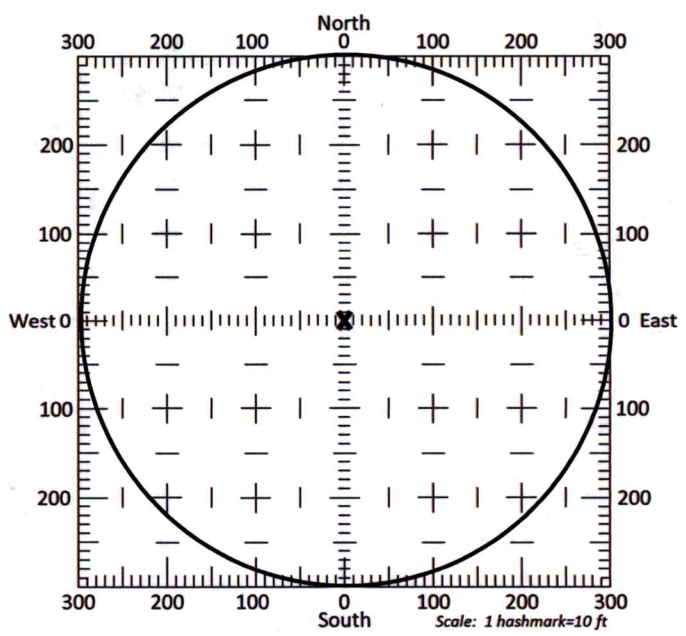
9. The change(s) (was)(will be) completed by?
UPON APPROVAL

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? _____

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 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. _____
MAKE ADDITIONAL COPIES AS NECESSARY

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

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				

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: ELDON & TERRY ALEXANDER
ADDRESS: 13990 S SANDHILL RD GARDEN CITY KS 67846-8803

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					
32	26S	33W	35	35	35	35	34	34	34	34												276	
			L-1	L-2			L-3	L-4															
5	27S	33W	35	35	35	35	35	35	35													280	
33	26S	33W	35	35	35	35								34	34	34	34	35	35	35	35		416

Owner of Land ---- NAME: ELDON & TERRY ALEXANDER
ADDRESS: 13990 S SANDHILL RD GARDEN CITY KS 67846-8803

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						
34	26S	33W																					136	

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.)

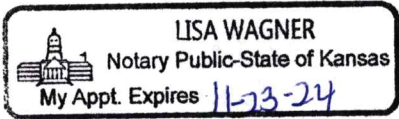
If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized 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, Finney County, Kansas, this 30th day of May, 2023.

(Owner)	<u>Terry Alexander</u> (Spouse)
(Please Print)	<u>Terry Alexander</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 30th day of May, 2023.

[Signature]
Notary Public

My Commission Expires 11-23-24.

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
MAY 30 2023

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 25th day of May, 2023.

Eldon Alexander
 (Owner)

 (Spouse)

Eldon Alexander
 (Please Print)

 (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 25th day of May, 2023.



My Commission Expires _____

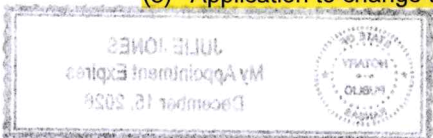
Julie Jones
 Notary Public

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 PLACE OF USE WATER RIGHT, FILE NO. 35046



Copyright © 2013 National Geographic Society, i-cubed

	Authorized Point of Diversion
	Permitted Water Right
	Domestic Well within 1/2 mile
	Authorized Place of Use
	Proposed Place of Use

List of owner name and addresses within 1/2 mile:

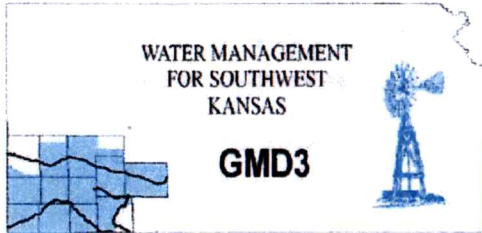


By signing below I agree that all wells, including domestic, and owners names and addresses within 1/2 mile of the proposed point of diversion have been shown on the map

(Signature)

Date

Date AM/GCFO
1:24,000 Scale



**Southwest Kansas
Groundwater Management District No. 3**
2009 E. Spruce Street
Garden City, Kansas 67846
(620) 275-7147 phone
www.gmd3.org

June 6, 2023

Austin McColloch
Division of Water Resources
4532 W Jones Ave., Suite B
Garden City, Kansas 67846

RECEIVED

JUN 06 2023

Garden City Field Office
Division of Water Resources

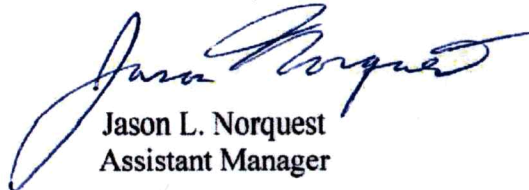
RE: Applications for Change in Place of Use
Water Right, File Nos. 13316, 16786, 33056, 35046 & 35047

Dear Austin:

We have reviewed the applications for the above referenced water rights. The proposals are 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 in accordance with K.A.R. 5-5-11(b). No new acres being proposed. It is therefore recommended that the applications 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,



Jason L. Norquest
Assistant Manager

GMD3 Change Review

File No(s): 13316, 16786, 33056, 35046, 35047.

DWR office: GC.

App filed to change: PU.

Is Landowner(s) correct in WRIS: Eldon & Terry Alexander.

If NO, is documentation included?

Is Water Use Correspondent correct in WRIS? ___.

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 0
<hr/>		

GPS for proposed PD: Lat: ___ Long: ___.

Is proposed PD stacking on existing WRs? No Change.

Is Proposed PU overlapping existing WRs? Complete overlap of all WRs .

Neighboring certified well(s) notified: ___.

Name ___.

Address ___.

Zip ___.

Email: ___. Phone: ___.

Domestic well(s) notified: ___.

Name ___.

Address ___.

Zip ___.

Base Acres: ___.

Perfected Acres: ___.

Irr. Return-Flow ___%

Finney/Haskell County

13316 Authorized 272AF@995gpm

280 acres E2 33-26-33

16786 authorized 3 PDs

ID01 32-26-33, 272AF@965gpm

ID01 5-27-33, 254AF@835gpm

ID02 5-27-33, 272AF@965gpm

140acres NE 32-26-33

280acres N2 5-27-33

33056 authorized 272AF@815gpm

136acres NW 32-26-33

GMD3 Change Review

35046 authorized 272AF@1000gpm

136acres SW 33-26-33

35047 authorized 272AF@ 965gpm

136acres SW 34-26-33

Total acres: 1108 acres

Proposed same acres as currently authorized by all the WRs

Is a waiver needed: No, no new acres, just proposed complete overlap .

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

A handwritten signature in blue ink, consisting of a large, stylized 'J' followed by a few loops and a short horizontal stroke.

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

June 1, 2023

GROUNDWATER MANAGEMENT DISTRICT #3
2009 E SPRUCE ST
GARDEN CITY KS 67846

Re: Request for Recommendation,
File Nos. 13316; 16786; 33056; 35046 & 35047

Dear Sir or Madam:

We are enclosing a copy of the referenced application, which was submitted by Eldon & Terry Alexander and appears to be in proper form, for your review.

We are delaying any further action for a period of 15 days from the date of this letter to allow you time to submit your recommendation concerning this application. Please submit your recommendation within the allotted time, or any authorized extension of time thereof.

If you have any questions, please contact me at (620) 276-2901. If you wish to discuss a specific file, please have the file number ready to that I may help you more efficiently.

Sincerely,

A handwritten signature in black ink, appearing to read "Austin McColloch".

Austin McColloch
Assistant Water Commissioner

Enclosure
pc: