

File No. **GT-17** 11. County: **GT** Basin: **BEAR CREEK** Stream: Formation Code: Special Use:

12. Points of Diversion										Rate and Quantity							
CHK	MOD	DEL	ENT	PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Rate gpm/cfs	Quantity af/mgy	Rate gpm/cfs	Quantity af/mgy	Overlap PD Files
CHK																	
CHK																	
CHK																	
CHK																	
CHK																	

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										NE¼				NW¼				SW¼				SE¼				Total	Owner	Chg?	Overlap Files
CHK	MOD	DEL	ENT	PUSE	S	T	R	ID		NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼				
CHK				4143	5			28S38W	1	L-1 40	L-2 40	40	40									40	40	40	40	320	8a	Y	MULTIPLE
CHK				28784	4			28S38W	1	L-1 40	L-2 40	40	40	L-3 40	L-4 40	40	40	40	40	40	40	40	40	40	40	640	8a	Y	MULTIPLE
ENT				4005	10			28S38W	1	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	640	8a	Y	MULTIPLE

Base Acres: Year: Minimum Reasonable Quantity:

Comments: **NOTE: ADDED LOT DESCRIPTIONS ON THE PU** **OVERLAPPING WR ON PU: GT-17; GT-18; GT-22-D2; 1629 & 10880**

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

April 6, 2023

MORGAN & SHANNON HECK
BOX 803
SUNRAY, TX 79086

RE: Filed Office Application for Change
Water Right, File Nos. GT-017; GT-018; GT-022-D2; 1,629 & 10,880

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 that reads "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc: GMD 3


CERTIFICATE OF SERVICE

On this 6th day of April, 2023, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Vested Right, File Nos. GT-017, GT-018 and GT-022-D2 and Water Right, File Nos. 1,629 and 10,880 dated 6th day of April, 2023 was mailed postage prepaid, first class, US mail to the following:

MORGAN & SHANNON HECK
BOX 803
SUNRAY, TX 79086

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.

RECEIVED
 12:40 pm
 MAR 31 2023

File No. GT 017

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: MORGAN HECK

BOX 803 SURAY TX 79086

Phone Number: (806)922-2767 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: ~~HECK FARMS PARTNERSHIP~~ Morgan and Shannon Heck

ADDRESS: BOX 803 SUNRAY TX 79086

(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	
5	28	38W	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	320	
4	28	38W	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	640	

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: ~~HECK FARMS PARTNERSHIP~~ Morgan and Shannon Heck

ADDRESS: BOX 803 SUNRAY TX 79086

(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	
5	28	38W	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	320	
4	28	38W	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	640	
10	28	38W	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	640	

For Office Use Only: Code _____ Fee \$ 200.00 TR # _____ Receipt Date 3/31/23 Check # 5697

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?

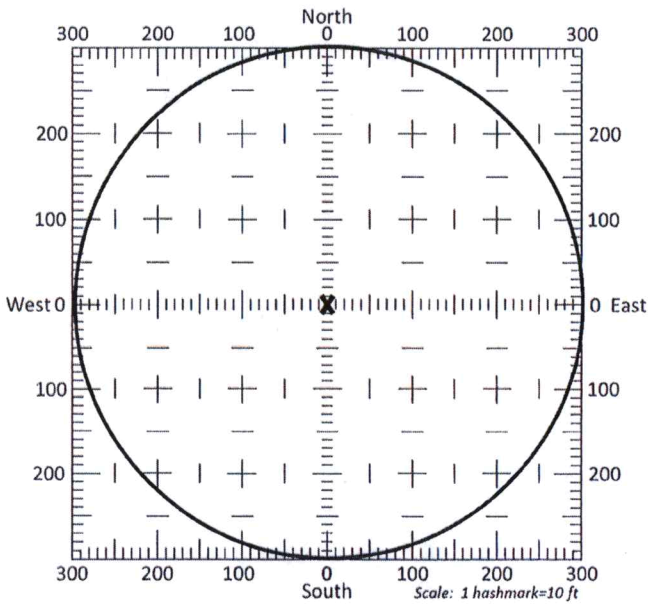
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by MM/DWR _____

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.)

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.)

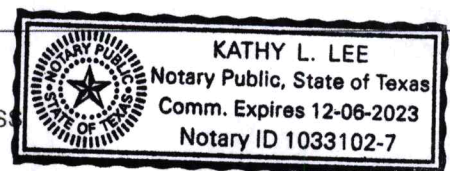
If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized 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 Sunny ^{Texas} ~~Kansas~~, this 30 day of March, 2023.

_____ (Owner)	_____ (Spouse)
<u>Morgan Hed</u> (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)

State of ~~Kansas~~ Texas
 County of Moore



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 30 day of March, 2023.

My Commission Expires 12/06/2023

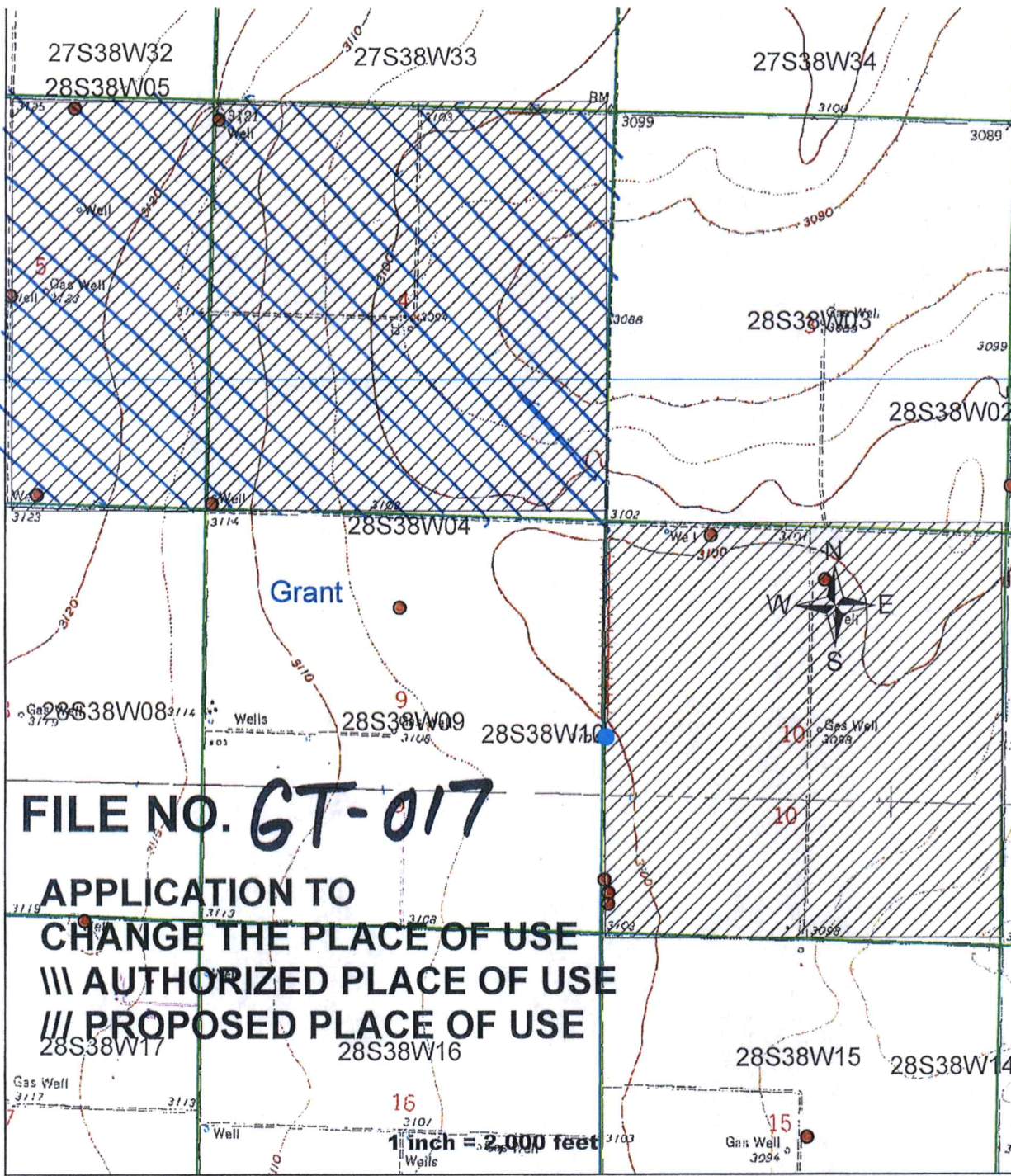
Kathy L. Lee
 Notary Public

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**

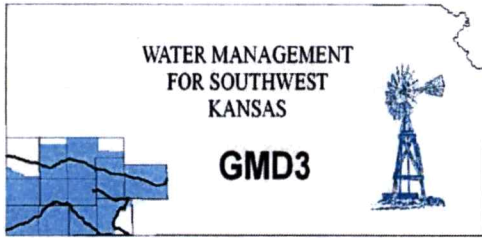
- (1) Application to change a point of diversion 300 feet or less \$100
- (2) Application to change a point of diversion more than 300 feet \$200
- (3) Application to change the place of use \$200



FILE NO. GT-017

**APPLICATION TO
CHANGE THE PLACE OF USE
\\ AUTHORIZED PLACE OF USE
/// PROPOSED PLACE OF USE**

1 inch = 2,000 feet



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

April 6, 2023

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

RECEIVED

APR 06 2023

Garden City Field Office
Division of Water Resources

RE: Applications for Change in Place of Use
Water Right, File Nos. GT 17, GT 18, GT22 D2, 1629 & 10880

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). 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,

A handwritten signature in blue ink that reads "Jason L. Norquest".

Jason L. Norquest
Assistant Manager

GMD3 Change Review

File No(s): GT17, GT18, GT22 D2, 1629, 10880.

DWR office: GC.

App filed to change: PU.

Is Landowner(s) correct in WRIS: Morgan Heck.

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			
Difference	0	0	
a2 + b2 = c2	0	0	0

GPS for proposed PD: Lat: Long: .

Is proposed PD stacking on existing WRs? No change to any PDs.

Is Proposed PU overlapping existing WRs? Making complete overlap.

Neighboring certified well(s) notified: .

Name .

Address .

Zip .

Email: Phone: .

Domestic well(s) notified: .

Name .

Address .

Zip .

Base Acres: .

Perfected Acres: .

Irr. Return-Flow %

Grant County

GT17: 800AF @ 1795.32gpm. Blanket authority over 5 wells

320 acres E2 5-28-38

640 acres 4-28-38

GT18: 1200AF @ 2693gpm. Blanket authority over same 5 wells w/GT17

Same acres as GT17

GT22 D2: 400AF @ 996gpm

640 acres 10-28-38

1629: 250AF @ 1000gpm. Blanket authority on 1 well & battery of 2 wells

Same acres as GT22 D2

GMD3 Change Review

10880: 630AF @ 690gpm

Same acres as GT22 D@ & 1629

Proposed acres are all currently authorized, no new acres proposed.

Is a waiver needed: Making a complete overlap in currently authorized acres.

Recommendation: After review of all available information, current area rules appear met. Staff recommends approval of the applications.



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

April 5, 2023

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

Re: Request for Recommendation,
File Nos. GT-017; GT-018; GT-022-D2; 1629 & 10880

Dear Sir or Madam:

We are enclosing a copy of the referenced application, which was submitted by Morgan Heck 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 blue ink that reads "Austin McColloch".

Austin McColloch
Assistant Water Commissioner

Enclosure
pc:

STATE OF KANSAS, GRANT COUNTY
This instrument was filed for record on December 28, 2022 1:10 PM
and duly recorded in DD Book 92, Page 547-548
Fee: \$38.00 Instrument# 202201089
Dana Y. McDaniel
Dana Y. McDaniel Register of Deeds



DEED BOOK 92
PAGE 547

Reception *DM*
Numerical *DM*
Direct *DM*
Indirect *DM*
Stamped *DM*
Computer *DM*
Orig. Comp. *DM*

LIMITED LIABILITY COMPANY WARRANTY DEED

File No. 22-0815

THIS INDENTURE, made this 23 day of December, 2022, by and between,

Syracuse Dairy, LLC, a Kansas Limited Liability Company, a limited liability company duly organized under the laws of the State of Kansas, as GRANTOR,

and

Morgan Heck and Shannan Heck, as joint tenants with the right of survivorship and not as tenants in common, as GRANTEE.

WITNESSETH: THAT SAID GRANTOR, in consideration of the sum of Ten Dollars and other good and valuable consideration, the receipt and sufficiency which is hereby acknowledged by GRANTOR, does hereby grant, bargain and sell, convey and confirm, unto the said GRANTEE, and unto Grantee's heirs and assigns forever, the following described real property situated in the County of Grant, State of Kansas to-wit:

Surface Rights only, including Water Rights, in and to:

All of Section Four (4), Township Twenty-eight (28) South, Range Thirty-eight (38) West of the Sixth Principal Meridian, Grant County, Kansas; and

The Northeast Quarter (NE/4); and the East Twenty feet (20') of the Northwest Quarter (NW/4) of Section Five (5), Township Twenty-eight (28) South, Range Thirty-eight (38) West of the Sixth Principal Meridian, Grant County, Kansas; and

The Southeast Quarter (SE/4) of Section Five (5), Township Twenty-eight (28) South, Range Thirty-eight (38) West of the Sixth Principal Meridian, Grant County, Kansas; and

All of Section Ten (10), Township Twenty-eight (28) South, Range Thirty-eight (38) West of the Sixth Principal Meridian, Grant County, Kansas.

Subject to all easements, restrictions and reservations, if any, now of record, and all the taxes and assessments that may be levied, imposed or become payable hereafter.

R. G. Barnhardt
Robert G. Barnhardt

Beth Castle-Barnhardt
Beth Castle-Barnhardt

State of Colorado

County of La Plata

On this 29th day of December, 2022, before me personally appeared Robert G. Barnhardt and Beth Castle-Barnhardt, to me known to be the person(s) described in and who executed the foregoing instrument, and acknowledged that he/she/they executed the same as his/her/their free act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal in said County and State, the day and year last above written.

My commission expires: August 23rd 2026

(seal)



Leland Casey Belone
Notary Public

Printed Name: Leland Belone

When recorded return to:
Frazee Abstract & Title, Inc
301 North Main, PO Box 413
Syracuse, KS 67878