

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

1. File Number: ST-006	2. Status Change Date:	3. Change Num: C2	4. Field Office: 4	5. GMD: 3
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: 10/27/2023
8a. Applicant(s) New to system <input type="checkbox"/> KENT AINSWORTH 3096 N ROAD B JOHNSON, KS 67855		Person ID <u>22627</u> Add Seq# _____	8c. Landowner(s) New to system <input type="checkbox"/> SONJA J HATHAWAY 218 N WILSON ST ULYSSES, KS 67880-1950	
8b. Landowner(s) New to system <input type="checkbox"/> KENT & BEVERLY AINSWORTH 3096 N ROAD B JOHNSON, KS 67855		Person ID <u>52672</u> Add Seq# _____	8d. WUC New to system <input type="checkbox"/> 8a	
9. Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: <u>12/31/2024</u> <input checked="" type="checkbox"/> N & P Date to Comply: <u>3/1/2025</u>				
<input type="checkbox"/> Anti-Reverse Meter <input type="checkbox"/> Meter Seal <input checked="" type="checkbox"/> Check Valve <input checked="" type="checkbox"/> N & P Form <input checked="" type="checkbox"/> Water Tube <input checked="" type="checkbox"/> Driller Copy <input checked="" type="checkbox"/> H & E Letter <input type="checkbox"/> Conservation Plan Date Required: _____ Date Approved: _____ Date to Comply: _____				
10. Use Made of Water From: _____ To: _____				
Date Prepared: 10/30/2023 By: AM Date Entered: _____ By: _____				

File No. **ST-006** 11. County: **ST** Basin: **N F CIMARRON RIVER** Stream: Formation Code: **211/330** 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																	
CHK																	
CHK																	
DEL																	

ENT SW SE NW 12 28S 39W 2673 3755 5495 1000 5495 1000 ST-020; 461 & 12532

****BLANKET R & Q BETWEEN ALL WELLS - NO CHANGE****

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 CHK MOD DEL ENT	PUSE	S	T	R	ID	NE¼				NW¼				SW¼				SE¼				Total	Owner	Chg?	Overlap Files
						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																									
CHK																									
CHK																									
CHK																									
CHK																									
CHK																									

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

Mike Beam, Secretary

Laura Kelly, Governor

October 30, 2023

KENT & BEVERLY AINSWORTH
3096 N ROAD B
JOHNSON, KS 67855

RE: Filed Office Application for Change
Water Right, File No. ST-006; ST-020; 461 & 12532

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 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.

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.

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, appearing to read "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc:

CERTIFICATE OF SERVICE

On this 30th day of October, 2023, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Vested Right, File Nos. ST-006 and ST-020 and Water Right, File Nos. 461 and 12,532 dated 30th day of October, 2023 was mailed postage prepaid, first class, US mail to the following:

KENT & BEVERLY AINSWORTH
3096 N ROAD B
JOHNSON, KS 67855

Pc:

SONJA J HATHAWAY
218 N WILSON ST
ULYSSES, KS 67880-1950



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. ST-6

RECEIVED
9:00 AM
OCT 27 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: Kent Ainsworth

3096 N Road B, Johnson, KS 67855

Phone Number: () _____ Email address: _____

Name and address of Water Use Correspondent: Same As Above

Same As Above

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** 10-27-23 **Check #** 14624

5. **Presently authorized point of diversion:**
 One in the SW Quarter of the SE Quarter of the NW Quarter of Section 12, Township 28 South, Range 39 W, in STANTON County, Kansas, 2672 feet North 3691 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ 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 SW Quarter of the SE Quarter of the NW Quarter of Section 12, Township 28 South, Range 39 W, in STANTON County, Kansas, 2673 feet North 3755 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 NE Quarter of the NE Quarter of the NE Quarter of Section 11, Township 28 South, Range 39 W, in STANTON County, Kansas, 5225 feet North 85 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) _____

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

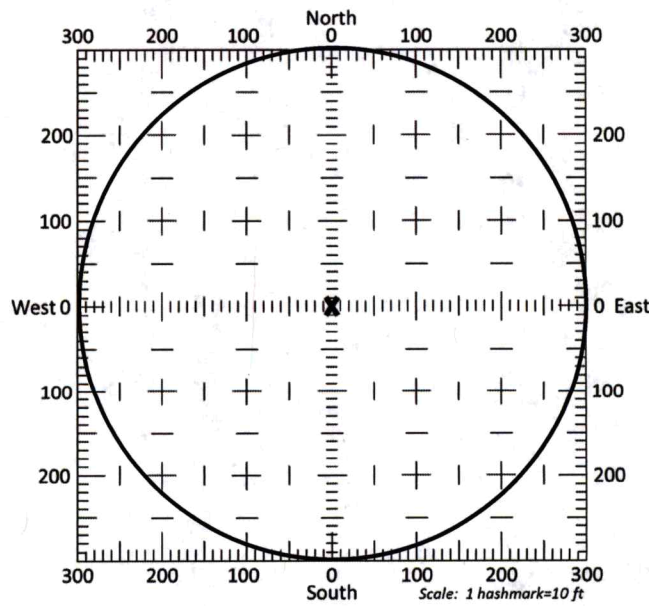
9. The change(s) (was)(will be) completed by?

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

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by JG/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. ~~ST-20~~ ST-006

Presently authorized point of diversion:

One in the SW Quarter of the SW Quarter of the SE Quarter
of Section 12, Township 28 South, Range 39 WEST,
in STANTON County, Kansas, 21 feet North 2567 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) GEO CENTER

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 _____.

Presently authorized point of diversion:

One in the NW Quarter of the SW Quarter of the NE Quarter
of Section 12, Township 28 South, Range 39 W,
in STANTON County, Kansas, 3910 feet North 2570 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 _____.

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 ULLYSSES, Kansas, this 26th day of OCTOBER, 2023.

<input checked="" type="checkbox"/> <u>Kent Ainsworth</u> (Owner)	_____ (Spouse)
<input checked="" type="checkbox"/> <u>Kent Ainsworth</u> (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)

State of Kansas }
County of Grant } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 26 day of October, 2023.

Miriam Yazmin Garcia
Notary Public

My Commission Expires 11/16/27

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**

3795 W. Jones Ave.
 Garden City, KS 67846
 PH: 620-277-2389



PO Box 639
 Garden City, KS 67846
 Fax: 620-277-0224

KENT AINSWORTH Home 680-495-3256 CELL: 680-353-4184

Customer Name: Kent Ainsworth WO#: 25993 Date: 10-12-23
 Street Address: 3096 N Road B Test #: 1 E LOG: Yes
 City, State: Johnson, KS 67855 Driller: Dale Guinn
 County: Stanton Quarter: NW Section: 12 Township: 28 Range: 39
 Location: 63ft West of Existing Well GPS: N37.62775 W101.53946
 Rig #: 10002 Elevation: 3151' Static WL: 271ft Estimated?
 Proposed Well Depth 639
 REPLACEMENT WELL LOCATION 20' Sump

%	Footage			Description of Strata
	From	Pay	To	
	0		2	Top Soil
	2		36	Brown Sandy Clay
	36		45	Sand Fine
	45		77	Brown Clay
	77		105	Sand Fine w/ Many clay stringers
	105		115	Sand Fine Med Course Small Gravel
	115		159	Brown Clay
	159		182	Brown Sandy Clay w/ Some Fine Sand Strips
	182		219	Brown Clay
	219		230	Sand Fine w/ Some clay Mixed
	230		264	Brown Clay
30	264	21	292	Sand Fine Med Course Small Few Med & Large Gravel
	292		303	Brown Clay
5	303	38	341	Sand Fine w/ Many Clay Layers
20	341	14	355	Sand Fine Med
15	355	9	364	Sandstone w/ Little Soapstone "Used Some Water Mixed 2 Bran"
5	364	22	386	Sandstone & Soapstone
	386		431	Shale
5	431	9	440	Shale & Some Sandstone
	440		459	Shale
5	459	38	497	Sandstone w/ Few Shale Strips
15	497	99	596	Sandstone
10	596	23	619	Sandstone w/ Few Thin Soapstone Strips
	619		640	Red Bed
				Super Gel X -7
				Bran -2
				Grout -5
				Hole Plug -6
				Perma Plug -1
				5/4 Drag Blade -1

Kent Ainsworth


Test Hole # 1 of 10-12-23

NW 12-28-39 ST

FILE #'s ST6, ST20, 461 & 12532

Legend

 37.62775 N 101.53946 W

 37.62775 N 101.53946 W

Google Earth

4000 ft

