

CHECK SHEET Short Change

(To be completed and attached to each application)

File No. 11239

Field Office No. 2

GMD No. 2

1. **Plugging agreement obtained for GMD?** Yes No Non Applicable
2. **Is Landowner correct as currently shown in WRIS?** Yes No **Address Change?** NO
If applicable, list Place of Use Overlap File Nos. 29362
3. **Is Water Use Correspondent correct as currently shown in WRIS?** Yes No **Address Change?** NO
Name of Former WUC --- Name of New WUC ---
4. a. **Point of diversion computer ID No(s).** 3 **for point(s) being changed.**
- b. **Show feet distances from the** SE **corner of the section for the new point(s) of diversion:**

Action	PDIV ID	Geo Ctr?	Sec	Twp	Rng	'N	'W	County	Qualifiers
DEL	54327	NO	31	18S	3W	3980	2559	McPherson	SW NW NE
ENT		NO	31	18S	3W	4054	2547	McPherson	SW NW NE

c. **If multiple points of diversion exist and rates and quantities are individually assigned, show:**

Old PDIV ID	Authorized Rate	Additional Rate	Authorized Quantity	Additional Quantity
<u> </u>	<u> </u> gpm/cfs	<u> </u> gpm/cfs	<u> </u> af/mgy	<u> </u> af/mgy
<u> </u>	<u> </u> gpm/cfs	<u> </u> gpm/cfs	<u> </u> af/mgy	<u> </u> af/mgy
<u> </u>	<u> </u> gpm/cfs	<u> </u> gpm/cfs	<u> </u> af/mgy	<u> </u> af/mgy

- d. **Name of Drainage Basin** Little Arkansas River **Is this correctly shown in WRIS?** Yes No
- e. **Formation Name & No.** Equus Beds (190) **Special Use Area** ---

5. **Distances from the previous p/d:** 38 ' N 0 ' W

6. WATER RIGHT ACTION TRAIL COMMENTS

10/31/2017 Change Application Received (date accepted for priority)
10 / 31 / 17 Change Approved
 Notice and Proof by 12/31/2018
 / / Completion Requirement Removed (Change No. C)

7. METER ACTION TRAIL COMMENTS

10 / 31 / 17 DWR Meter Required by 12/31/2018
 / / Anti-Reverse Meter Required by / /
 / / Meter Seal Required by / /

8. Base Acres --- Year --- Minimum Reasonable Quantity ---

Date Created **10/31/17** by **TJS**
Date Entered by

CHECK SHEET ATTACHMENT

Changes to the place of use will be:

File Number 11239

Action	Owner Person ID	Place Use ID #	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	
D CHG	59039	28199	31	18S	3W	Acres Authorized																	
						New Acres																	
						Acres Authorized																	
						New Acres																	
						Acres Authorized																	
						New Acres																	
						Acres Authorized																	
						New Acres																	

Names and Address:

1. Person ID # <u>59039</u> Dale E. & Emily Schmidt Trusts 504 Foxborough Drive McPherson KS 67460	2. Person ID # _____ _____ _____ _____ _____	3. Person ID # _____ _____ _____ _____ _____
--	--	--

GENERAL INSTRUCTIONS

- | | | |
|--|---|---|
| 1. Give to Applicant:
a. <u>Original</u> application/approval
b. Original receipt (one for <u>each</u> application)
c. Information packet containing:
<ul style="list-style-type: none"> • Notice and Proof form • Water Meter Specifications • Acceptable Meter list • Water level measurement tube specifications • Check Valve specifications • Pink Sheet - K.S.A. 82a-728 letter • Form stating to record in Register of Deeds Office (OPTIONAL AS NEEDED) | 2. Send to headquarters:
a. Good, <u>scannable</u> copy of application and/or approval and this check sheet
b. Original check and copy of receipt
c. Test hole log
d. GMD recommendation, if any
e. Map or aerial photograph, if any
3. Send to KDHE: Letter (KDHE.LT) advising of location of abandoned well. <input type="checkbox"/> | 4. Date stamp received and approved.
5. Complete ownership and WUC change information. |
|--|---|---|

CONDITIONS

1. Insert notice and proof date.
2. Type or print applicant's/owner's name on line.
3. Complete notary statement.

ADDITIONAL PHOTOCOPIES

HQ _____
 GMD2 _____
Driller's Copy _____

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 WATER METER REQUIRED



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. 11239

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 10/31/2017
 OCT 31 2017

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

Stafford Field Office
 Division of Water Resources

2. Name and address of Applicant: Dale E. Schmidt
504 Foxborough Drive, McPherson, KS 67460

Phone Number: (620) 242-3927 Email address: deschmidt12@gmail.com

Name and address of Water Use Correspondent: Dale E. Schmidt Trust
504 Foxborough Drive, McPherson, KS 67460

Phone Number: (620) 242-3927 Email address: deschmidt12@gmail.com

3. The presently authorized place of use is:

Owner of Land --- NAME: Dale E. & Emily Schmidt Trusts

ADDRESS: 504 Foxborough Drive, McPherson, KS 67460

(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	
31	18S	3W	40	40	40	34													154

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: NO CHANGE

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		

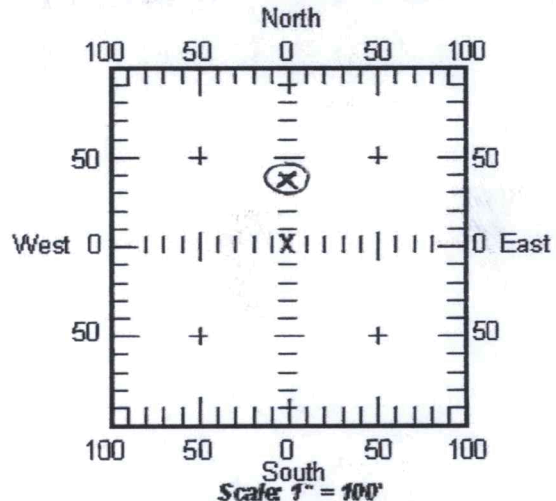
For Office Use Only: Code _____	Fee \$ <u>100</u> TR # _____	Receipt Date _____	Check # <u>1028</u>
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5. **Presently authorized point of diversion:**
 One in the SW Quarter of the NW Quarter of the NE Quarter of Section 31, Township 18 South, Range 3W (E/W), in McPherson County, Kansas, 3980 feet North 2559 feet West of Southeast corner of section.
 Authorized Rate 1135 GPM Authorized Quantity 166 AF Depth of well 194 (feet)
 (DWR use only: Computer ID No. 3* GPS 4016* feet North 2547* 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 NW Quarter of the NE Quarter of Section 31, Township 18 South, Range 3W (E/W), in McPherson County, Kansas, 4018 4054** feet North 2559 2547** feet West of Southeast corner of section.
 Proposed Rate 1135 GPM Proposed Quantity 166 AF Proposed well depth (feet) ~195
 This point is: Additional Well Geo Center List other water rights that will use this point No. 29362

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) Existing well casing failed.
 Moving well 38 feet North.

13a. If the proposed point of diversion will be relocated within 100 feet of the existing point of diversion, indicate its location on the diagram below in relation to the existing point of diversion. (PLEASE NOTE: The "X" in center of diagram below represents presently authorized point of diversion.)



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

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

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

11. Groundwater Management District recommendation attached? Yes No

12. Assisted by T. Boese, GMD2
 * TJS-SFFO
 ** EHS

13b. If the proposed point of diversion will be relocated more than 100 feet but within 1320 feet from 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.

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14. If the proposed groundwater point of diversion is 300 or fewer feet from 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 October 30, McPherson, Kansas, this 30th day of October, 2017.

Dale E. Schmidt, Trustee
 (Owner)

 (Spouse)

Dale E. Schmidt, Trustee of the Dale E. Schmidt Trust
 (Please Print)

 (Please Print)

Emily Schmidt, Trustee
 (Owner)

 (Spouse)

Emily Schmidt, Trustee of the Emily Schmidt Trust
 (Please Print)

 (Please Print)

 (Owner)

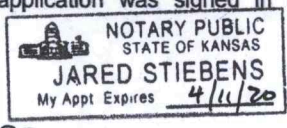
 (Spouse)

 (Please Print)

 (Please Print)

State of Kansas }
 County of McPherson } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 30 day of October, 2017.



Jared Stiebens
 Notary Public

My Commission Expires 4/11/2020

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

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Stafford Field Office

SUMMARY ORDER APPROVING APPLICATION FOR CHANGE AND IMPOSING CONDITIONS

This Summary Order is issued under authority of K.S.A. 82a-708b, as amended, and K.A.R. 5-5-1, *et seq.* and other applicable provisions of the *Kansas Water Appropriation Law, K.S.A. 82a-701 et seq.*, and rules and regulations promulgated thereunder. With the exception of those conditions expressly contained herein, this Summary Order does not change the terms, conditions and limitations of File No. 11239.

1. A change application was received on 10/31/2017 requesting that the place of use and / or point of diversion authorized under the above-referenced file number be changed as described in the application.
2. On and after the effective date of this summary order, the authorized place(s) of use shall be located substantially as shown on the topographic map accompanying the application to change the place of use. Applicable Not Applicable
3. The change in point of diversion shall not impair existing rights and shall be limited to the same source or sources of water as previously authorized. The point of diversion authorized by this summary order shall be located within a 50 foot radius of the authorized point(s) of diversion. Applicable Not Applicable
4. The point(s) of diversion authorized herein shall not actually be located more than 88 feet from the previously authorized point(s) of diversion. Applicable Not Applicable
5. As required by K.A.R. 5-3-5d, if the works for diversion is a well with a diversion rate of 100 gallons per minute or more, a tube or other device suitable for making water level measurements shall be installed, operated and maintained in accordance with K.A.R. 5-6-13. Applicable Not Applicable
6. The owner of the authorized place(s) of use shall properly install an acceptable water flow meter on or before December 31, 2018, or before the first use of water, whichever occurs first. The water flow meter shall be installed, operated and maintained in accordance with K.A.R. 5-1-4 through 5-1-12. As required by K.S.A. 82a-732, as amended, and K.A.R. 5-3-5e, the owner shall maintain records and report the reading of the water flow meter and the total quantity of water diverted annually to the Chief Engineer by March 1 following the end of each calendar year. Applicable Not Applicable
7. Installation of the works for diversion of water shall be completed on or before December 31, 2018, or within any authorized extension of time. By March 1, 2019 the applicant shall notify the Chief Engineer that construction of the works for diversion has been completed, on the form provided by the Chief Engineer, as required by K.A.R. 5-8-4e. Applicable Not Applicable
8. The completed well log shall be submitted with the required notice. Applicable Not Applicable
9. All diversion works into which any type of chemical or other foreign substance will be injected into the water shall be equipped with an in-line, automatic, quick-closing check valve capable of preventing pollution of the source of the water supply. The check valve(s) shall be installed, operated and maintained in accordance with K.A.R. 5-3-5c. Applicable Not Applicable
10. Additional Conditions are attached. Yes No
11. In accordance with K.S.A. 82a-708a, as amended, and K.A.R. 5-5-14, all of the owners of the authorized place(s) of use of water appropriated under the above-referenced file number are responsible for compliance with its terms, conditions and limitations, as amended and/or supplemented by this Summary Order, and with applicable provisions of the *Kansas Water Appropriation Law* and the *Rules and Regulations* promulgated thereunder. Failure to comply with these provisions may result in civil penalties pursuant to K.S.A. 82a-737, as amended, and/or the suspension or revocation and dismissal of the water or appropriation right or any other enforcement actions authorized by law.

Administrative Appeal and Effective Date of Order

If you are aggrieved by this order, pursuant to K.S.A. 82a-1901, you may request an evidentiary hearing before the Chief Engineer or request administrative review by the Secretary of Agriculture. A request for hearing by the Chief Engineer must be filed within **15 days** of service of this Order and a request for administrative review by the Secretary must be filed within **30 days** pursuant to K.S.A. 77-531. Any request for administrative review must state a basis for review pursuant to K.S.A. 77-527. File any request with **Kansas Department of Agriculture, Legal Division, 1320 Research Park Drive, Manhattan, KS 66502**. Failure to timely request a hearing or review may preclude review under the Kansas Judicial Review Act.

For Use by Register of Deeds

FOR OFFICE USE ONLY
**APPLICATION APPROVED AND
SUMMARY ORDER ISSUED**

By: Cameron R. Conant
Duly Authorized Designee of the Chief Engineer

(Print Name): Cameron R. Conant
Division of Water Resources - Kansas Department of Agriculture

Date of Issuance: 10/31/17

State of Kansas)

County of Stafford) SS

Acknowledged before me on 10/31/17

by Cameron Conant

Signature: Jessica Engelbrecht



My commission expires:

(Notary Seal)
File No. 11239

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**Equus Beds Groundwater Management District No. 2
Abandoned Well Plugging Agreement**

I, Dale E. Schmidt, the undersigned and owner of an abandoned water well understand that an abandoned water well is a groundwater contamination threat and a public health and safety hazard.

The abandoned water well is located SW, NW, NE, Section 31, Township 18 South, Range 3W, MP County which is approximately 3980 feet north and 2559 feet west of the apparent SE section corner. Total well depth is 194 feet and the diameter of the well is 16 inches. Current depth to static water level in the well is ~110 feet below land surface. The well was previously authorized by water permit no. 11239 & 29362.

I agree to properly plug the abandoned well pursuant to the Equus Beds Groundwater Management District rules and regulations K.A.R. 28-30-200 through K.A.R. 28-30-207 and the following agreement provisions:

1. Well plugging operations will be supervised by either (a) a water well contractor licensed with the Kansas Department of Health and Environment, (b) a professional engineer or geologist licensed to practice in the State of Kansas, or (c) the abandoned water well owner or land owner of the property on which the water well or borehole is located.
2. The above described well will be plugged: a) by _____, 20____, or **b)** within 30 days after the replacement well, approved by a change in point of diversion, becomes operational.
3. A completed WWC-5P form will be submitted to the Kansas Department of Health and Environment within 30 days after the abandoned well is plugged and a copy of the WWC-5P form will be furnished to the District within the same period of time.
4. The well owner or authorized agent will notify the District 48 hours before plugging operations occur.
5. Failure to comply with the provisions of this agreement shall constitute noncompliance of the groundwater management district rules and regulations K.A.R. 28-30-200 through K.A.R. 28-30-207.

Dated this 30th day of October, 2017 at McPherson County

Signature *Dale E. Schmidt*

Address 504 Foxborough Dr

City, State, Zip Code McPherson, KS 67460

Telephone 620-242-3927

State of Kansas County of McPherson

Subscribed and affirmed to before me this 30 day of October, 2017,

by *Jared Stiebens*
(Notary Public)

My Commission Expires 4/11/2020



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CERTIFICATE OF SERVICE

On this **31 October 2017**, I hereby certify that the attached Change in Point of Diversion, File No. 11239 and 29362 dated October 31, 2017 was mailed to the following:

Dale E Schmidt
504 Foxborough Drive
McPherson, KS 67460

pc: Water Rights Section
GMD 2



Staff