

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

WATER METER REQUIRED

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.

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 9:40am
 JUN 11 2018

File No. 4787

Stafford 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: Bronson Smith

ILS Land LLC, PO Box 1506, Great Bend KS 67530-1506

Phone Number: (620)792-6166 Email address: bronson.smith@ilsbeef.com

Name and address of Water Use Correspondent: ILS Land LLC

PO Box 1506, Great Bend KS 67530-1506

Phone Number: (620)792-6166 Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: ILS Land LLC

ADDRESS: PO Box 1506, Great Bend KS 67530-1506

(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	
3	19	14W					10	10	40	30									90
4	19	14W	5		5	35													45
																	Total	135	

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: ILS Land LLC

ADDRESS: PO Box 1506, Great Bend KS 67530-1506

(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	
3	19	14W					18.5	18.5	39	39									115
4	19	14W	5			25													30
																	Total	145	

For Office Use Only: Code _____ Fee \$ 200 - TR # _____ Receipt Date _____ Check # 16537

5. **Presently authorized point of diversion:**
 One in the SW Quarter of the NW Quarter of the NW Quarter of Section 3, Township 19 South, Range 14 W, in Barton County, Kansas, 4,235 feet North 5,289 feet West of Southeast corner of section. Authorized Rate 1,000 gpm Authorized Quantity 150 AF Depth of well unknown (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 _____ 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 none

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) Change the authorized acres to accommodate a sub-surface drip irrigation system.

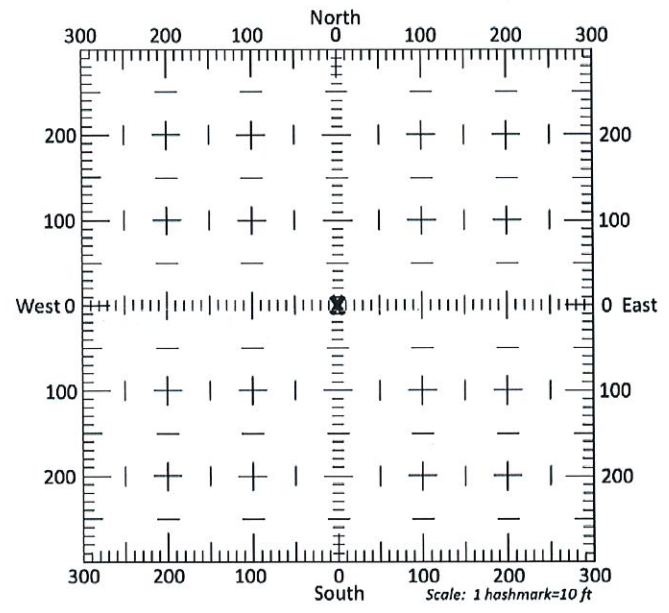
8. If a well, is the test hole log attached? Yes No

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?
N/A
 (b) When will this be done? N/A

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by EKF/SFFO



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.)**

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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 Great Bend, Kansas, this 6th day of June, 2018.

Bronson Smith

 (Owner)

 (Spouse)

Bronson Smith

 (Please Print)

 (Please Print)

 (Owner)

 (Spouse)

 (Please Print)

 (Please Print)

 (Owner)

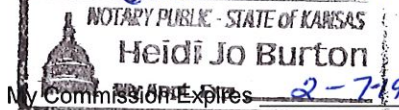
 (Spouse)

 (Please Print)

 (Please Print)

State of Kansas }
 County of Barton } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 6th day of June, 2018.


 NOTARY PUBLIC - STATE OF KANSAS
 Heidi Jo Burton
 My Commission Expires 2-2-19

Heidi Jo Burton

 Notary Public

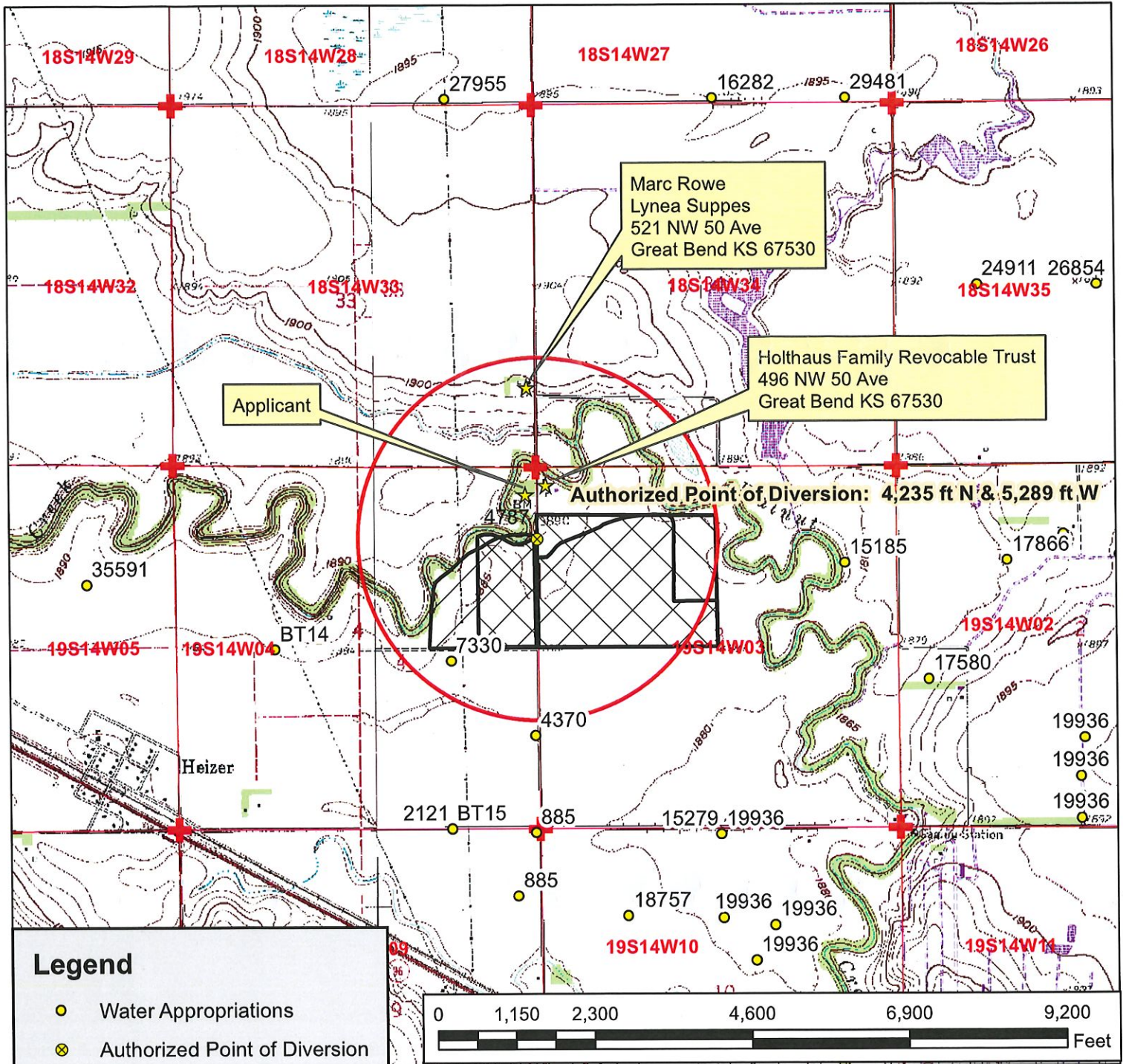
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, all of the applicable portions of the application form must be completed with accurate information; maps, if necessary, must be included; signatures of all the appropriate owners' must be affixed to the application and notarized; and the appropriate 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

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Legend

- Water Appropriations
- ⊗ Authorized Point of Diversion
- ★ Domestic Well
- ⊕ Section Corner
- Half Mile Circle
- ▭ Section Line

Place of Use

- ▨ Proposed
- ▩ Authorized

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Water Right, File No. 4787

Change in Place of Use Application Map
3 & 4-19-14W // Barton County

To the best of my knowledge, all groundwater wells within
1/2 mile of the proposed point of diversion have been shown.

[Signature]
Signature

6/6/18 EKF-SFFO 1:24,000 scale

