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. MAY 0 3 2021 File No. <u>50234</u> Application is hereby made for approval of the Chief Engineer to change the (check one or both):

DIVISION OF WATER RESOURCES Point of Diversion under the water right which is the subject of this application in accordance with the conditions described below. Place of Use Surface water
 ■ Groundwater The source of supply is: Name and address of Applicant: DURWIN F MALL 825 HIDDEN VALLEY DR CLAY CENTER KS 67432 Email address: Phone Number: (____) Name and address of Water Use Correspondent: SAME Email address: Phone Number: (____ The presently authorized place of use is: Owner of Land ---- NAME: NO CHANGE ADDRESS: __ (If there is more than one landowner, attach supplemental sheets as necessary.) TOTAL SW1/4 ACRES NW1/4 SE1/4 SW1/4 NW1/4 NE1/4 SW1/4 SE1/4 NW1/4 NW1/4 SW1/4 SE1/4 NE1/4 NE1/4 NW1/4 SW1/4 SE1/4 Twp. Range If this application is for a change in place of use, it is proposed that the place of use be changed to:

		nication																	
Ov	vner of	Land -	NA	ME: _											G TH JE	- 9 10	V Win		<u></u>
			DDDE	.00							2021								
/IF	there is	more th	an one	landow	ner, at	ach su	ppleme	ntal sh	eets as	neces	sary.)			1		SE	1/4		TOTAL
(11	there to	111011			-41			NV	V1/4			SV	1/4		-			CE1/	ACRES
		Range		NE	= 1/4		11516	LAMANA	SIAMA	SF1/4	NE1/4	NW1/4	SW1/4	SE1/4	NE1/4	NW/4	SVV74	SEA	
Sec.	Twp.	Range	NE1/4	NW1/4	SW1/4	SE1/4	NE/4	1900/4	1000		a forms	form on	monso	- Lorenti	3				
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	Receipt Date 5/3/2021 Check # 3498
For Office Use Only: Code CGT Fee \$ 2-00.00 TR #	Receipt Date <u>57 57 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 </u>

	Presently authorized point of diversion:				
- (One in the NE Quarter of the	SE	Quarter of the	NW	Quarter
- (of Section, Township	6	South, Range	4 EAST	(E/W),
l i	in <u>CLAY</u> County, Kansas, <u>3410</u> fee	et North _	2742 feet West of S	outheast corner	of section.
	Authorized Rate Authorized Quantity		Depth of well	(feet))
- [,	(DWR use only: Computer ID No GPS		feet North	feet Wes	it)
	☐This point will not be changed ☐This point will be changed as	s follows: [☐ No change, point better de	escribed with GPS	as follows:
	Proposed point of diversion: (Complete only if change is	requeste	ed or if existing point is l	better described	d by GPS)
	One in the SE Quarter of the	NE	Quarter of the	NW	Quarter
- [.	of Section 21, Township	6	South, Range	4 EAST	(E/W),
1	in CLAY County, Kansas, 4050 fe	et North _	<u>2782</u> feet West of S	Southeast corner	of section.
	Proposed Rate Proposed Quantity		Proposed well depth (feet)	·
-	This point is: Additional Well Geo Center List other	r water rig	hts that will use this point		
L					
: Г	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, fe	et North	feet West of S	Southeast corner	of section.
	Authorized Rate Authorized Quantity	-	Depth of well	(feet	e)
	(DWR use only: Computer ID No GPS _		feet North	feet We	st)
	This point will not be changed This point will be changed as	s follows:	No change point better de	escribed with GPS	as follows:
	Proposed point of diversion: (Complete only if change is				
	One in the Quarter of the		Quarter or the		Quarter
1	of Section, Township	4 NJ 41-	Soulii, Railye	Carrida a anti-a a anni	(E/VV),
	in County, Kansas, fe	eet North _	teet vvest of a	Southeast come	or section.
- 1	Proposed RateProposed Quantity				
L	This point is: Additional Well Geo Center List othe	r water rig	ints that will use this point		-
7.	The changes herein are desired for the following reasons? (please be specific) THE PUMP SITE WAS COMPLETED > 300 FT FROM AUTHORIZED AT 641' AWAY. THIS WILL AUTHORIZE THE ACTUAL PUMP SITE.	line: 30	00 200 100 North	100 200	300 गुगाप
8.	If a well, is the test hole log attached? Yes No	200		1+1+	200
9.	The change(s) (was)(will be) completed by?		F/ =	Managements Security 18	\ =
	UPON APPROVAL	100	$ otag{f E}_1 + 1 + 1 = 1 otag$	1 + 1 +	1 100
					1
10.	If the point of diversion is a well:		F ≡		=
	(a) What are you going to do with the old well?	West 0	<u>[</u>		□ East
			<u> </u>	workerster transfer	4
		100	$\exists \cdot \perp \cdot \perp \cdot \equiv$	1 + 1 +	100
	(b) When will this be done?	100	E(' ' ' E	1 1 1	' /] 100
			E / - =		/=
11.	Groundwater Management District recommendation attached?	200		1+1+	200
	Yes No			_ /_	=
			Endandard III	والمساور المسلو	
12.	. Assisted by <u>KAT</u>	3	00 200 100 0	100 200	300
13a	a. If the proposed point of diversion will be relocated more than 30 feet but within 2,640 feet of the existing point of diversion, attace a topographic map or aerial photograph. For groundwate sources, show all wells (including domestic) within one-half mill of the proposed point of diversion and the names and mailin addresses of the owners. For surface water sources, show the names and addresses of the landowner(s) one-half mill	00 ch 13b.If ther foo le on ng div ne with	South	scale: 1 hashmion will be relocated to diversion, and in relation to the nt of diversion received. (PLEASE NOT e represents	ted within a 300 icate its location existing point of nust be located E: The "X" in

14. If the proposed	groundwater point of diversion is 300	O or fewer feet fro	om the existing point of diversion, compl	ete the following:
(a) Does the u ☐ Yes	indersigned represent all owners of th ☐ No (If no, all owners mu	he currently authous sign this application	orized place(s) of use identified in this a cation.)	pplication?
(b) Will the ow affected if t ☐ Yes	vnership interest of any owner of the this application is approved as requed In No (If yes, all owners m	sted?	rized place(s) of use identified in this a ication.)	oplication be adversely
(c) If this appli ☐ Yes	cation is not approved expeditiously, ☐ No (If no, all owners mu		stantial damage to property, public heal cation.)	th or safety?
or a change in place	oposes a surface water change in po e of use, the application must be sign zed statement authorizing representa	ned by all owners	groundwater change in point of diversion of the currently authorized place of use	on greater than 300 feet, , or their duly authorized
age and the own their behalf, in re	er, the spouse of the owner, or	a duly author which this app	ation and under penalty of perjurized agent of the owner(s) to mak plication pertains. I further verify	e this application on
Dated at	Clay Center	Kansas this	30th day of April	20 21
Durwi	n F. Mall		Shirley h.	Mall
Durwin	(Owner) (Please Print)	Townsystem of the State of the	Shirley Welease Print)	Mall
	(Owner)		(Spouse)	
	(Please Print)		(Please Print)	
	(Owner)		(Spouse)	
	(Please Print)	***************************************	(Please Print)	
State of Kansas County of	ss			
I hereby certify of april	that the foregoing application w	/as signed in r	my presence and sworn to before	me this 30 day
	NOTARY	THERESA CHA My Appointm		
My Commission Exp	pires _11-17-2003	November November		
ONLY COMPLETE AP accurate information; r the appropriate fee mu	maps, if necessary, must be included; sign	Fo be complete, all natures of all the ap	of the applicable portions of the application f ppropriate owners' must be affixed to the app	orm must be completed with lication and notarized; and
		FEE SCHEDU	<u>JLE</u>	
forth in the schedule (1) Applica	e below: Make checks payable to: K tion to change a point of diversion 30	(ansas Departme) O feet or less	er this section shall be accompanied by ent of Agriculture	\$100

FILE NO 50,234



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Scale: 1:12,000