

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

1. File Number: 11439	2. Status Change Date: <i>2/20/18</i>	3. Change Num: c3	4. Field Office: 04	5. GMD: 03
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: 12/12/17
8a. Applicant(s) New to system <input type="checkbox"/> DANNY J & SONDR A KOEHN 10714 CC RD MONTEZUMA KS 67867		Person ID <u>24666</u> Add Seq# <u>1</u>		
8b. Landowner(s) New to system <input type="checkbox"/> DANNY J & SONDR A KOEHN 10714 CC RD MONTEZUMA KS 67867		Person ID <u>24666</u> Add Seq# <u>1</u>		
8c. Landowner(s) New to system <input type="checkbox"/> LOREN D & MARSHA L KOEHN 4906 STATE ROAD 144 COPELAND KS 67837-8222		Person ID <u>34086</u> Add Seq# <u>1</u>		
8d. WUC New to system <input type="checkbox"/> DANNY J & SONDR A KOEHN 10714 CC RD MONTEZUMA KS 67867		Person ID <u>24666</u> Add Seq# <u>1</u>		
9. Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: <u>12/31/18</u> <input type="checkbox"/> N & P Date to Comply: _____				
<input type="checkbox"/> Anti-Reverse Meter <input type="checkbox"/> Meter Seal <input type="checkbox"/> Check Valve <input type="checkbox"/> N & P Form <input type="checkbox"/> Water Tube <input type="checkbox"/> Driller Copy <input 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: 2/20/18				By: TPM
Date Entered: _____				By: _____

File No. **11439** 11. County: **GRAY** Basin: **crooked** Stream: _____ Formation Code: _____ Special Use: _____

12. Points of Diversion
 CHK _____
 MOD _____
 DEL PDIV _____
 ENT _____

Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)			Rate and Quantity		
							Rate	Quantity	af/mgy	Rate	Quantity	af/mgy
							gpm/cfs	af/mgy	gpm/cfs	af/mgy	Overlap	PD Files

nc _____

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 _____

Place of Use	CHK	MOD	DEL	ENT	PUSE	S	T	R	ID	NE 1/4			NW 1/4			SW 1/4			SE 1/4			Total	Owner	Chg?	Overlap Files
										NE 1/4	NW 1/4	SE 1/4	NW 1/4	NE 1/4	SE 1/4	NW 1/4	NE 1/4	SE 1/4	NW 1/4	NE 1/4	SE 1/4				
NC					7999	34	28		30W 1										31	31	31	124	8c	Yes	275 11439 28806 29674 D2 29674 D1
ENT					26962	35	28		30W 1	31.25	31.25	31.25	30	30	30	30	30	30	32	32	39	516	8b	Yes	275 11439 28806 29674 D2 29674 D1
DEL					38572																				

Base Acres: _____ Year: _____ Minimum Reasonable Quantity: _____

Comments: _____



1320 Research Park Drive
Manhattan, Kansas 66502
785-564-6700

900 SW Jackson, Room 456
Topeka, Kansas 66612
785-296-3556

Secretary Jackie McClaskey

Governor Jeff Colyer, M.D.

February 20, 2018

DANNY J & SONDR A KOEHN
10714 CC RD
MONTEZUMA KS 67867

RE: Change the Place of Use, File Nos 275, 11439,
28806, 29674 D1, 29674 D2

Dear Mr. Koehn;

Enclosed you will find a *Summary Order Approving Application for Change in Place of Use* for the above referenced files. Since these orders modify the original documents, it should be recorded at the County Register of Deeds.

These orders modify the authorized acres that can be irrigated by these files. The authorized place of use is as shown on the plats within the change approvals.

A condition of this order is that an acceptable flow meter must be properly installed on the diversion works authorized under the referenced file number in accordance with the Kansas Administrative Regulations 5-1-4 through 5-1-12. This water flow meter shall be used to provide information required on the annual water use report (including the meter reading at the beginning and end of the report year).

This order shall become final if a request for a hearing is not filed with the Chief Engineer within 15 days of the date of service of this order. The date of service is the date listed on the enclosed *Certificate of Service*.

Should you have any questions, please feel free to call this office or arrange an appointment for additional assistance. Please refer to the file number when you contact us if you wish to discuss a specific file.

Sincerely,

Thomas P. Makens
Assistant Water Commissioner

TPM:tpm
Enclosures
GMD#3

CERTIFICATE OF SERVICE

On this 21st day of February 2018, I hereby certify that the attached original Approval of Application to Change the Place of Use under Water Right File 275, 11439, 28806, 29674 D1, 29674 D2 dated February 20, 2018, was mailed postage prepaid, first class, US mail to the following:

DANNY J & SONDR A KOEHN
10714 CC RD
MONTEZUMA KS 67867

Copy provided to GMD#3

A handwritten signature in black ink, appearing to be 'J. Koehn', written over a horizontal line.

Division of Water Resources

Submit completed application to:
 Kansas Department of Agriculture
 Division of Water Resources
 Field Office for your area.

Call for address:

Topeka -- (785) 862-6300
 Stafford -- (620) 234-5311
 Stockton -- (785) 425-6787
 Garden City -- (620) 276-2901
www.ksda.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. 11439

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 1:33pm
 DEC 12 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
 Garden City Field Office
 Division of Water Resources

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: Danny J & Sondra Koehn
10714 CC Rd, Montezuma, KS 67867
 Phone Number: (620)846-0357 Email address: dkoehn5@gmail.com
 Name and address of Water Use Correspondent: SAME

Phone Number: () Email address: _____

3. The presently authorized place of use is:
 Owner of Land --- NAME: Danny J & Sondra Koehn
 ADDRESS: 10714 CC Rd, Montezuma, KS 67867
 (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					
34	28s	30w																	31.0	31.0	31.0	31.0	124.0
35	28s	30w					30.0	30.0	30.0	30.0	31.0	30.0	40.0	40.0	32.0	32.0	39.0	27.0					391.0

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: Danny J & Sondra Koehn
 ADDRESS: 10714 CC Rd, Montezuma, KS 67867 LORIN & MARSHA KOEHN
 (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					
34	28s	30w																	31.0	31.0	31.0	31.0	124.0
35	28s	30w	31.2	31.2	31.2	31.2	30.0	30.0	30.0	30.0	31.0	30.0	40.0	40.0	32.0	32.0	39.0	27.0					516.0

C121039

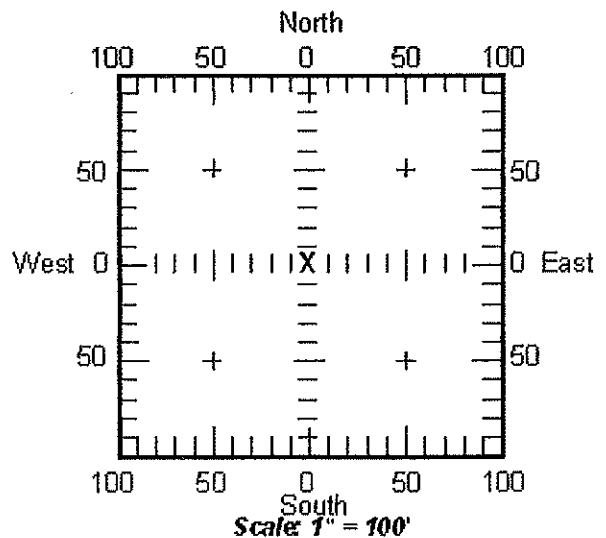
5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ CW _____ Quarter of the _____ SW _____ Quarter
 of Section _____ 35 _____, Township _____ 28 _____ South, Range _____ 30 _____ W,
 in GRAY _____ 1800 _____ County, Kansas, _____ 1320 _____ feet North _____ 4776 _____ feet West of Southeast corner of section.
 Authorized Rate _____ 15700gpm _____ Authorized Quantity _____ 526AF 518 _____ 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:
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 _____ 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 _____
 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:
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 _____
 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 _____

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DEC 12 2017
Garden City Field Office (E/W),
Division of Water Resources

7. Why do you need a new point of diversion? NA

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. When do you propose to complete the new point of diversion?
NA

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

11. Groundwater Management District recommendation attached? Yes No

12. Assisted by GMD3/JLN

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.

13a. If the proposed point of diversion will be relocated within 100 feet of the existing point of diversion, indicate its location on

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 regard 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 12-12-17, Kansas, this _____ day of _____, 20_____.

Danny A. Koehn
(Owner)

Sandra Koehn
(Spouse)

DANNY J KOEHN
(Please Print)

Sandra Koehn
(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

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DEC 12 2017

Wichita Falls Field Office
Division of Water Resources

State of Kansas }
County of Gray } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 12 day of December, 2017.

JACKIE BROWN
Notary Public - State of Kansas
My Appt. Exp. 12-10-19

Jackie Brown
Notary Public

My Commission Expires 12-10-19

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

14. If the proposed groundwater point of diversion is 300 or fewer feet from existing point of diversion, complete the following:

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 Yes No (If no, all owners must sign this application.)
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Dated at COPELAND, Kansas, this 12 day of Feb, 2018.

X Lorin D Koehn
(Owner)

X Marsha L Koehn
(Spouse)

Lorin D Koehn
(Please Print)

Marsha L Koehn
(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

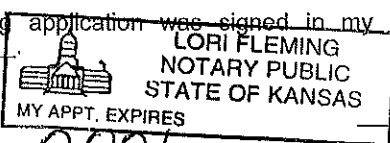
RECEIVED

FEB 16 2018

Garden City Field Office
Division of Water Resources

State of Kansas }
County of Gray } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 12 day of February, 2018.



My Commission Expires 2-19-2021

Lori Fleming
Notary Public

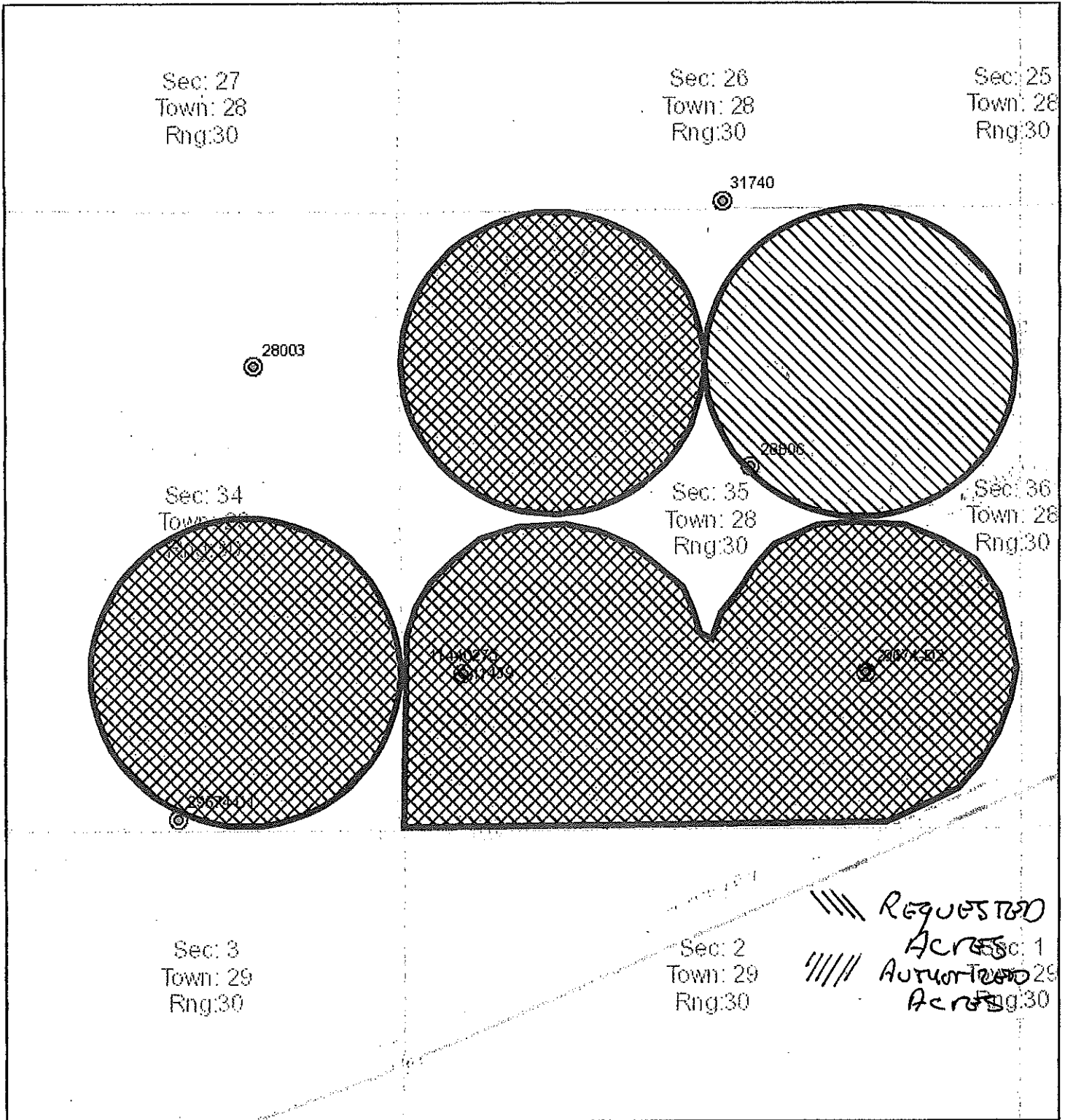
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- (2) Application to change a point of diversion more than 300 feet \$200
- (3) Application to change the place of use \$200

Change App PU 275, 11439, 29674 D1 & D2



November 30, 2017

DISCLAIMER: This map is not intended for conveyances, nor is it a legal survey. The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments.

Legend

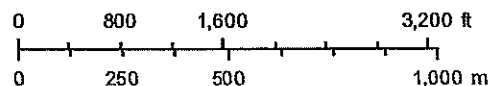
- Meters
- Wells
- Sections

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DEC 12 2017

Garden City Field Office
Division of Water Resources

1:18,056



Sources: Esri, HERE, DeLorme, Intermap, increment P Corp., GEBCO, USGS, FAO, NPS, NRCAN, GeoBase, IGN, Kadaster NL, Ordnance Survey, Esri Japan, METI, Esri China (Hong Kong), swisstopo, MapmyIndia, © OpenStreetMap contributors, and the GIS User Community