

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 28, 2018

Southwest Kansas Groundwater
Management District No 3
409 Campus Drive, Suite 106
Garden City KS 67846

Re: Water Right file number 12768 D1

Dear Mr. Norquest;

Schmidt Golden Acres has applied to relocate the well authorized by the above water right number. There are no neighboring wells within ½ mile of the requested.

We are delaying action for 15 days on the change application to allow you time to review and provide a recommendation if you feel one is warranted.

Thank you and as always feel free to call or write us at any time.

Sincerely;

A handwritten signature in black ink, appearing to be "T. Makens", written in a cursive style.

Thomas P Makens

TPM:tpm
enc

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. 12768 D1

RECEIVED
 3:53pm
 FEB 27 2018

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

Garden City Field Office
 Division of Water Resources

2. Name and address of Applicant: SCHMIDT GOLDEN ACRES LLC 18032 LEMON DR STE C
PMB #112 YORBA LINDA CA 92886

Phone Number: (714) 996-3619 Email address: _____

Name and address of Water Use Correspondent: SCHMIDT GOLDEN ACRES LLC 18032 LEMON DR STE C
PMB #112 YORBA LINDA CA 92886

Phone Number: () _____ Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: SCHMIDT GOLDEN ACRES LLC 18032 LEMON DR STE C
 ADDRESS: PMB #112 YORBA LINDA CA 92886

(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: no change to acres

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 \$ 200 TR # _____ Receipt Date 2/27/18 Check # 1131

5. **Presently authorized point of diversion:**
 One in the sw Quarter of the sw Quarter of the sw Quarter of Section 35, Township 30 South, Range 31 W, in Haskell County, Kansas, 280 feet North 5200 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:
Proposed point of diversion: (Complete only if change is requested)
 One in the nw Quarter of the ne Quarter of the sw Quarter of Section 35, Township 30 South, Range 31 W, in Haskell County, Kansas, 2273 feet North 3472 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 nw Quarter of the nw Quarter of the nw Quarter of Section 35, Township 30 South, Range 31 W, in Haskell County, Kansas, 5150 feet North 5237 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (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:
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 _____

7. Why do you need a new point of diversion? _____
 old well needs to be replaced

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

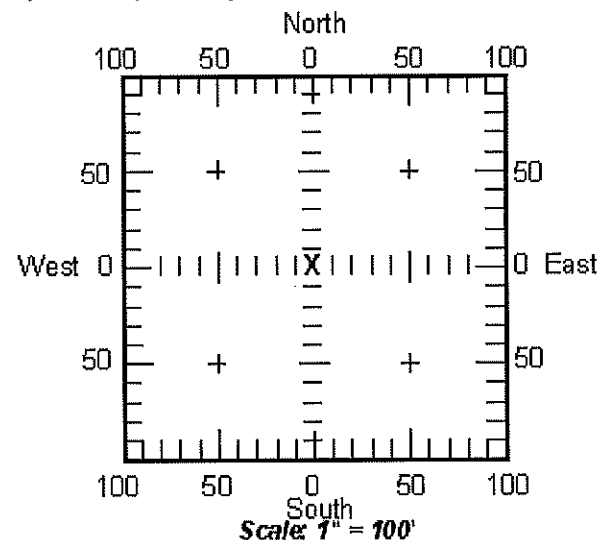
9. When do you propose to complete the new point of diversion?
March 10, 2018

10. If the point of diversion is a well:
 (a) What are you going to do with the old well?
plug
 (b) When will this be done? 2018

11. Groundwater Management District recommendation attached? Yes No

12. Assisted by tpm

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.)



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.

TOPO! map printed on 02/01/18 from "Untitled.tpo"

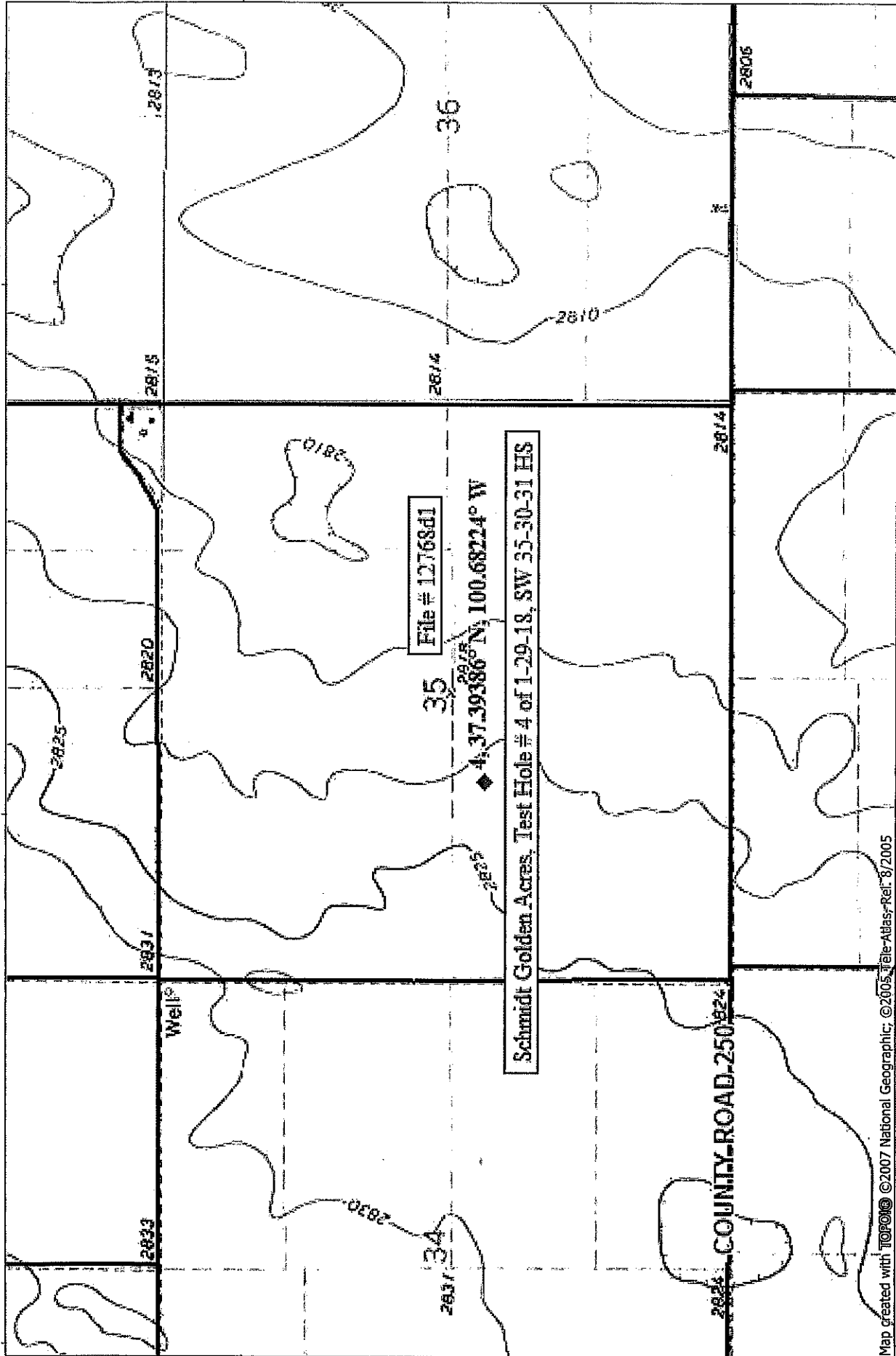
100.70000° W

100.68333° W

NAD27 100.66667° W

37.40000° N

37.40000° N



File # 12768d1

4. 37.39386° N, 100.68224° W

Schmidt Golden Acres, Test Hole # 4 of 1-29-18, SW 35-30-31 HS

COUNTY ROAD 250

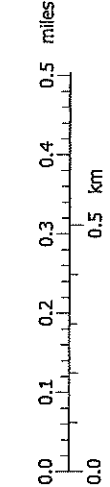
Map created with TOPO! © 2007 National Geographic, © 2005. @eleAtlas-Ref: 8/2005

100.70000° W

100.68333° W

NAD27 100.66667° W

NATIONAL GEOGRAPHIC



TNTMN

5 1/2°

02/01/18

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



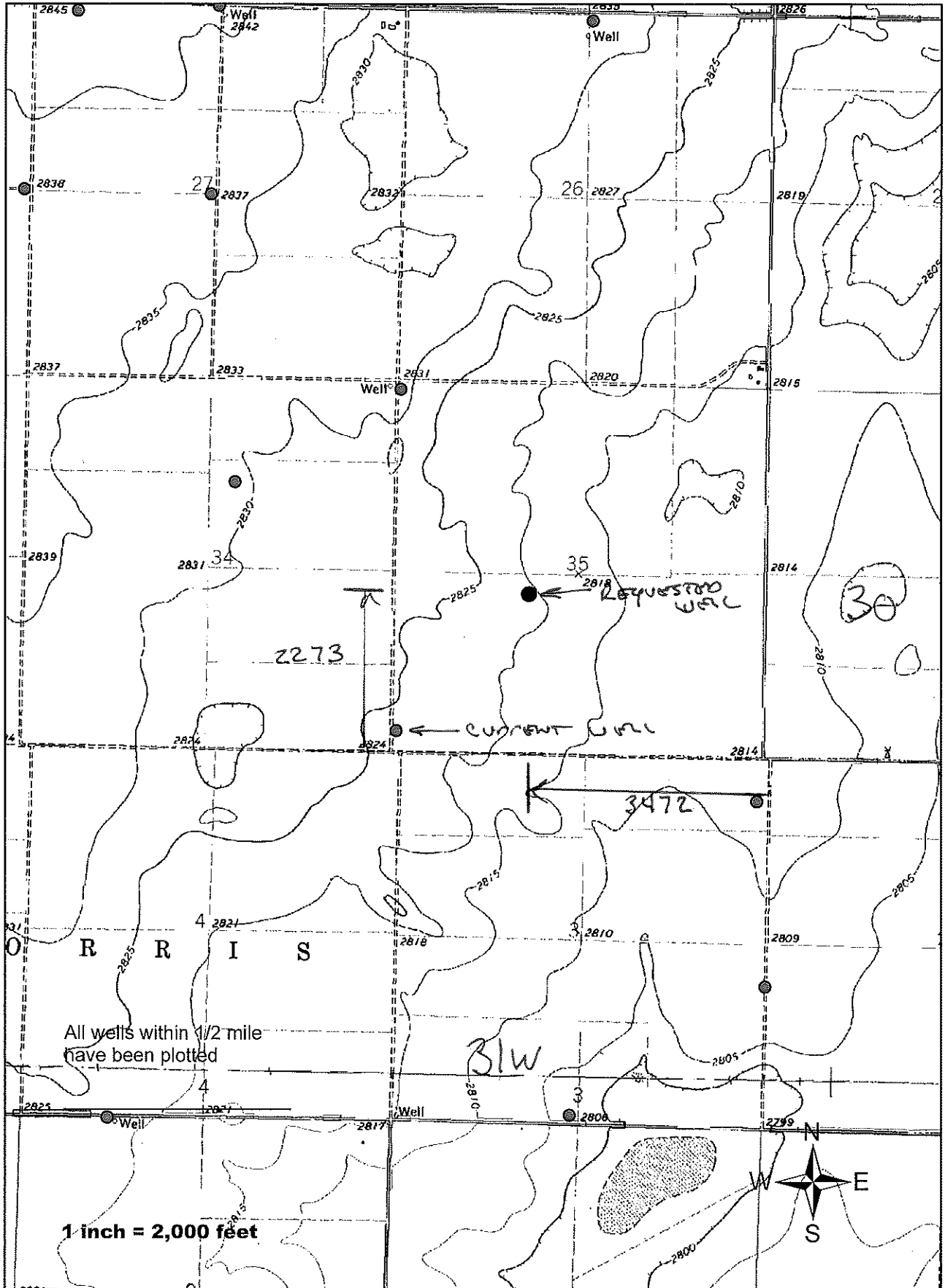
PO Box 639
 Garden City, KS 67846
 Fax: 620-277-0224

LEON WINFREY 620-629-0946

Customer Name: Schmidt Golden Acres, LLC WO#: 12946 Date: 1-29-18
 Street Address: PMB #12 18032 LEMON DR. SUITE C Test #: 4 E LOG: _____
 City, State: FORBA LINDA, CA 94886 Driller: Dale Guinn
 County: Haskell Quarter: SW Section: 35 Township: 30 Range: 31
 Location: _____ GPS: N37.37386 W100.68224
 Rig #: 10002 Elevation: 2812' Static WL: 313' Estimated? _____
 Proposed Well Depth 580
 WELLOCATION 20' Samp

%	Footage		Description of Strata	
	From	To		
	0	2	Top Soil	
	2	41	Brown Sandy Clay	
	41	58	Fine Sand w/ few clay stringers	
	58	77	Brown Sandy Clay	
	77	94	Red Sandy Clay	
	94	100	Brown Sandy Clay	
	100	138	Sand fine to med course few small gravel	
	138	148	Brown Clay	
	148	173	Sand fine to med course	
	173	190	Brown & Blue Clay	
	190	217	Sand fine to med course	
	217	241	Brown & Blue Clay	
	241	265	Sand fine to med course	
	265	280	Brown & some Blue Clay	
5	280	5	318	Brown & few Blue Clay w/ many fine sand strips
25	318	62	380	Sand fine to med course
30	380	41	421	Sand fine to med course small gravel
25	421	19	440	Sand fine to med course
30	440	46	486	Sand fine to med course small gravel
10	486	32	518	Fine Sand w/ few clay ledges
	518		526	Soapstone
10	526	20	546	Sandstone w/ couple soapstone ledges
5	546	14	560	Sandstone w/ few red bed strips
	560		580	Red Bed
				Super Gel X -2
				Grout -5
				3/4" Plug 3/4 -6
				Perma Plug -1
				1/4" Drug Block -1
				12768 DI

12768 D1



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 Yorba Linda, Calif., Kansas, this February 23 day of 2018.

Saralyn Brown
(Owner)

(Spouse)

Saralyn Brown
(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas

County of _____

} SS

See Attached Jurat Certificate

I hereby certify that the foregoing application was signed in my presence and sworn to before me this _____ day of _____, 20_____.

Notary Public

My Commission Expires _____.

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



Jurat Certificate California only

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of ORANGE

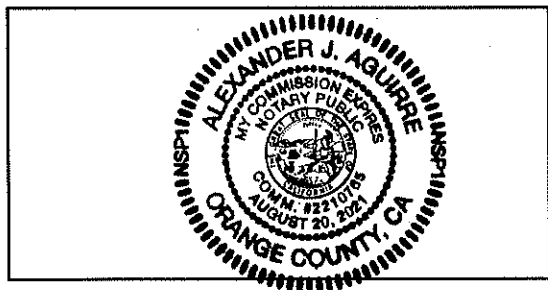
Subscribed and sworn to (or affirmed) before me on this 23rd

day of FEBRUARY, 2019, by SARAUN K. BROWN

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Place Seal Here

Signature *Alex J. Aguirre*



Description of Attached Document

Type or Title of Document

SUMMARY ORDER APPROVING APPLICATION FOR CHANGE AND IMPROVING CONDITIONS

Document Date

2/23/2019

Number of Pages

1

Signer(s) Other Than Named Above

N/A