



Garden City Field Office
2508 Johns Street
Garden City, Kansas 67846-2804

Jackie McClaskey, Secretary
David W. Barfield, Chief Engineer
Michael A. Meyer, Water Commissioner

Phone: (620) 276-2901
Fax: (620) 276-9315
www.agriculture.ks.gov
Sam Brownback, Governor

January 31, 2018

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

Re: Water Right file number 19191

Dear Mr. Norquest;

The Philip Smith has applied to relocate the wells 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 read "Thomas P Makens".

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. 19191

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: PHILLIP W SMITH

31806 4 RD COPELAND KS 67837

Phone Number: () _____ Email address: _____

Name and address of Water Use Correspondent: CHAD STAPLETON

33902 10 RD MONTEZUMA KS 67867

Phone Number: () _____ Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: PHILLIP W SMITH & LEO MCDUGAL TRUST

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	

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 irrigated 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	

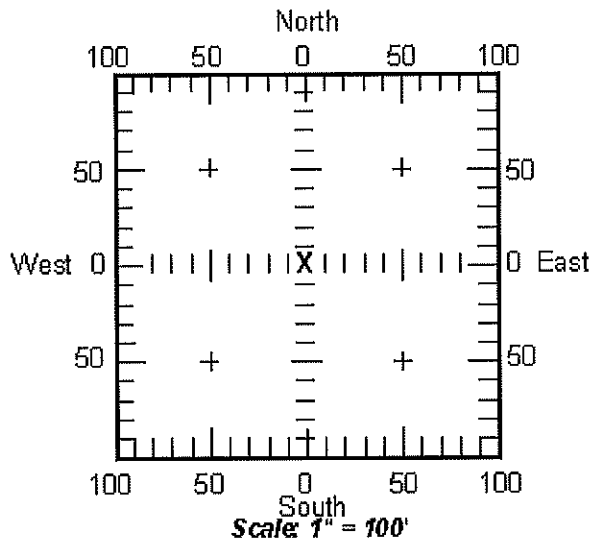
For Office Use Only: Code _____ Fee \$ _____ TR # _____ Receipt Date _____ Check # _____

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ cs _____ Quarter of the _____ nw _____ Quarter
 of Section _____ 10 _____, Township _____ 29 _____ South, Range _____ 30 _____ W,
 in Gray _____ County, Kansas, _____ 2658 _____ feet North _____ 4135 _____ 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 _____ se _____ Quarter of the _____ se _____ Quarter of the _____ nw _____ Quarter
 of Section _____ 10 _____, Township _____ 29 _____ South, Range _____ 30 _____ W,
 in Gray _____ County, Kansas, _____ 2708 _____ feet North _____ 2963 _____ 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 _____ 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:
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 _____

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. When do you propose to complete the new point of diversion?
February 29, 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

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.

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 Capeland, Kansas, this 31st day of Jan, 2018.

<u><i>Philip W. Smith</i></u> (Owner)	_____	(Spouse)
<u>Philip W. Smith</u> (Please Print)	_____	(Please Print)
_____	_____	(Spouse)
_____	_____	(Please Print)
_____	_____	(Spouse)
_____	_____	(Please Print)

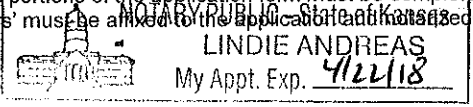
State of Kansas }
County of Gray } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 31st day of January, 2018.

Lindie Andreas
Notary Public

My Commission Expires 4/22/2018

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.

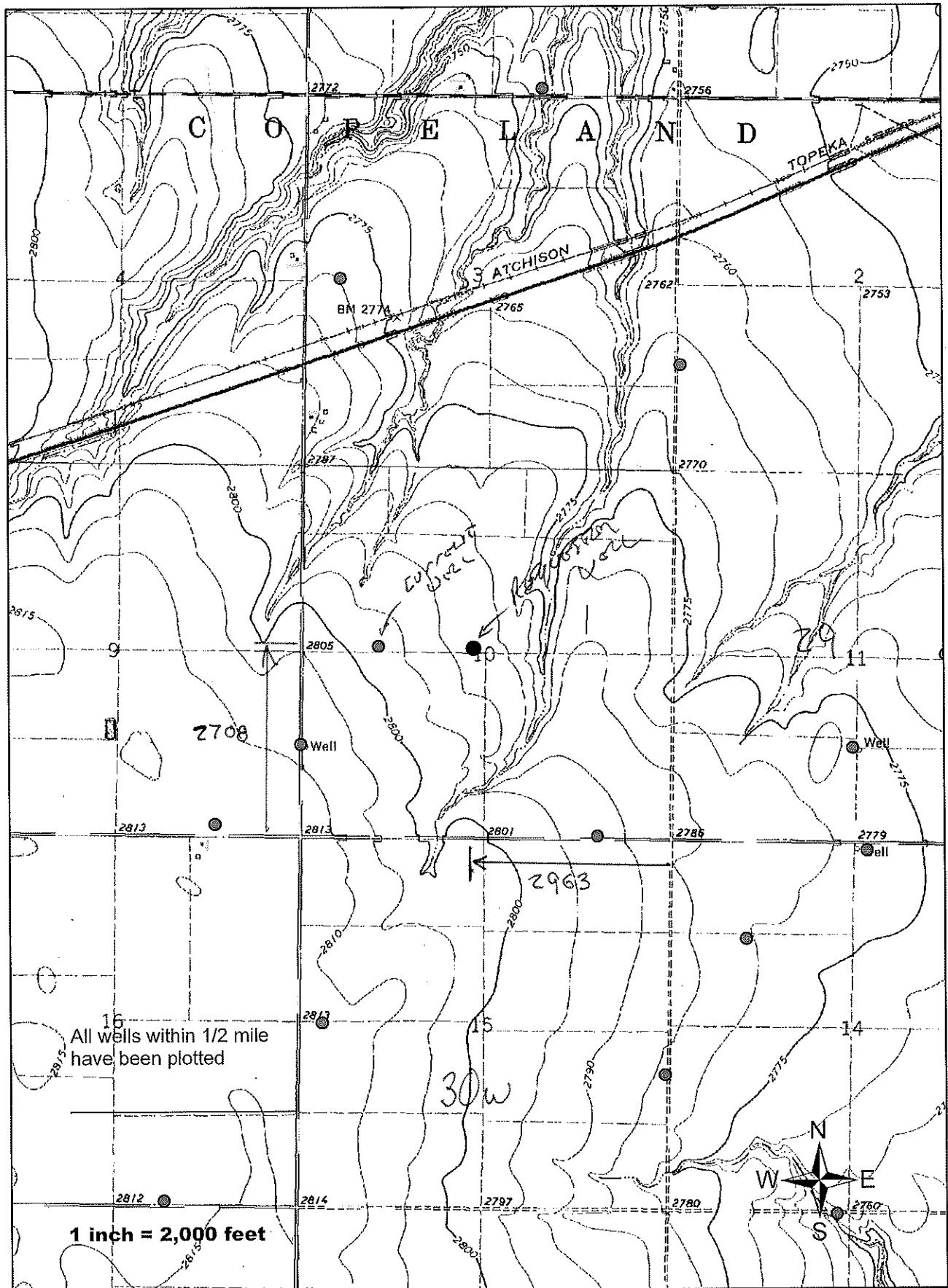


FEE SCHEDULE

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	<u>\$200</u>
(3) Application to change the place of use	\$200

19191



WELL LOG

DATE: 1/19/2018



CUSTOMER NAME: PHIL SMITH

LEGAL: NW 10-29S-30W

COUNTY: GRAY

GPS: 37 32' 28.78" N

-100 35' 21.49" W

T.H. #2

DRILLER: CHRIS P

WO#: 17-890

TW	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
	0	2	TOP SOIL	FIRM	DARK	SLOW		SMOOTH
	2	48	CLAY AND SILTY CLAY	FIRM	DARK	SLOW		SMOOTH
X	48	59	FINE-MEDIUM GRAVEL	SOFT	RED	FAST		SMOOTH
	59	111	SILTY CLAY WITH TRACES OF FINE SAND	SOFT	TAN	SLOW		SMOOTH
X	111	156	FINE-MEDIUM GRAVEL AND SOME COARSE SAND	SOFT	RED	FAST		CHATTER
	156	169	SILTY CLAY WITH TRACES OF FINE SAND	SOFT	TAN	FAST		SMOOTH
	169	184	FINE-MEDIUM SAND	SOFT	RED	SLOW		SLIGHT CHATTER
	184	202	SANDY CLAY AND SOME FINE SAND	SOFT	TAN	SLOW		SMOOTH
X	202	236	FINE-MEDIUM SAND AND FINE GRAVEL	SOFT	RED	FAST		CHATTER
X	236	272	FINE-MEDIUM GRAVEL	SOFT	RED	FAST		CHATTER
X	272	291	FINE-MEDIUM GRAVEL AND MEDIUM-SOME COARSE SAND	SOFT	RED	FAST		CHATTER
X	291	305	FINE SAND AND SILT	SOFT	RED	VERY FAST		SLIGHT CHATTER
X	305	342	COARSE SAND AND FINE-MEDIUM GRAVEL	SOFT	RED	FAST		CHATTER
X	342	345	FINE-TR. MEDIUM GRAVEL W/ THIN SANDY CLAY LENSE	SOFT	RED	FAST		IN & OUT CHATTER
X	345	366	FINE-MEDIUM GRAVEL	SOFT	RED	FAST		CHATTER
	366	395	FINE SAND AND SILT WITH SANDY CLAY LAYERS	SOFT	RED	SEMI FAST		SOME CHATTER
	395	422	SANDY CLAY W/FEW FINE SAND LENSES	SEMI DENSE	TAN	SLOW		SMOOTHER
	422	425	FINE SAND	SOFT	TAN	FASTER		SLIGHT CHATTER
	425	451	SANDY CLAY W/F. SAND LENSES @ 436 - 443	SEMI DENSE	TAN	SLOW		SMOOTHER
	451	465	FINE - TR. MED SAND	SOFT	RED	FAST		SLIGHT CHATTER
	465	475	CLAY	FIRM	GRAY	SLOW	X	SMOOTH
	475	500	SHALE	FIRM	DARK GRAY	SLOW	X	SMOOTH

SWL 230'

36

19

7

37

2

21

21

3

5

14

171'