

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

1. File Number: 29881 D2	2. Status Change Date: 3/21/18	3. Change Num: C1	4. Field Office: 04	5. GMD: 03
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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: 2/16/18
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8a. Applicant(s) New to system <input type="checkbox"/>	Person ID <u>2832</u> Add Seq# <u>1</u>
CIRCLE LAND & CATTLE CORPORATION 901 ARKANSAS AVE HOLCOMB KS 67851	

8c. Landowner(s) New to system <input type="checkbox"/>	Person ID _____ Add Seq# _____
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8b. Landowner(s) New to system <input type="checkbox"/>	Person ID <u>2832</u> Add Seq# <u>1</u>
CIRCLE LAND & CATTLE CORPORATION 901 ARKANSAS AVE HOLCOMB KS 67851	

8d. WUC New to system <input type="checkbox"/>	Person ID <u>2832</u> Add Seq# <u>1</u>
CIRCLE LAND & CATTLE CORPORATION 901 ARKANSAS AVE HOLCOMB KS 67851	

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: _____
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	Date Prepared: 3/3/18	By: TPM
	Date Entered:	By:

File No. **29881 D2** 11. County: FI Basin: Ark Stream: Formation Code: Special Use:

12. Points of Diversion
 Rate and Quantity
 Authorized Additional
 Rate Quantity Rate Quantity
 gpm/cfs af/mgy gpm/cfs af/mgy
 Comment (AKA Line) 'W
 'N
 'nc

13. Storage: Rate _____ NF Quantity _____ acft Additional Rate _____ NF Additional Quantity _____ acft

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	P U S E	S T R I D	NE 1/4			NW 1/4			SW 1/4			SE 1/4			Total	Owner	Chg?	Overlap Files
			NE 1/4	SW 1/4	SE 1/4	NW 1/4	SW 1/4	SE 1/4	NE 1/4	SW 1/4	SE 1/4	NW 1/4	SW 1/4	SE 1/4				
MOD 54008	23	25	33W	2														
					34	34	34	34	34	34	34	34	34	272	nc	29881 D2 & D3		

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

STATE OF KANSAS

DEPARTMENT OF AGRICULTURE
DIVISION OF WATER RESOURCES
GARDEN CITY FIELD OFFICE
2508 JOHNS STREET
GARDEN CITY, KS 67846-2804



PHONE: (620) 276-2901
FAX: (620) 276-9315
www.agriculture.ks.gov

GOVERNOR JEFF COLYER, M.D.
JACKIE McCLASKEY, SECRETARY OF AGRICULTURE

March 21, 2018

CIRCLE LAND & CATTLE CORPORATION
901 ARKANSAS AVE
HOLCOMB KS 67851

RE: Change the Place of Use, File Nos 29881D2,
29881D3

Dear Mr. Stillwell;

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

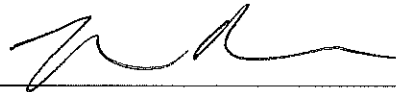
TPM:tpm
Enclosures

CERTIFICATE OF SERVICE

On this 22nd day of March 2018, I hereby certify that the attached original Approval of Application to Change the Place of Use under Water Right File 29881D2, 29881D3 dated March 21, 2018, was mailed postage prepaid, first class, US mail to the following:

CIRCLE LAND & CATTLE CORPORATION
901 ARKANSAS AVE
HOLCOMB KS 67851

Copy provided to GMD#3

A handwritten signature in black ink, appearing to be 'J. A.', 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. 29881-D2

RECEIVED
 2:32 pm
 FEB 16 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

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: CIRCLE LAND & CATTLE CORPORATION

901 ARKANSAS AVE HOLCOMB, KS 67851

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: CIRCLE LAND & CATTLE CORPORATION

901 ARKANSAS AVE HOLCOMB, KS 67851

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: CIRCLE LAND & CATTLE CORPORATION

ADDRESS: 901 ARKANSAS AVE HOLCOMB, KS 67851

(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					
23	25	33					34	34	34	34													136

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: CIRCLE LAND & CATTLE CORPORATION

ADDRESS: 901 ARKANSAS AVE HOLCOMB, KS 67851

(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					
23	25	33					34	34	34	34													136
23	25	33									34	34	34	34									136

For Office Use Only: Code _____ Fee \$ <u>200</u> TR # _____ Receipt Date <u>2/16/18</u> Check # <u>2523</u>
--

5. **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 _____ 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 _____ 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 _____

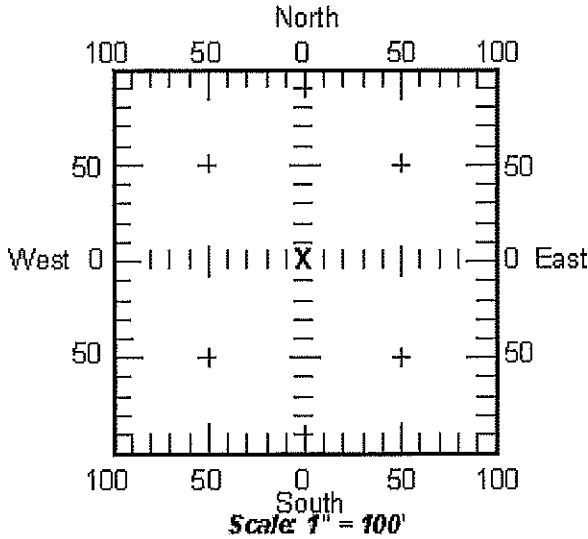
7. Why do you need a new point of diversion? _____
 No PD Change _____

8. If a well, is the test hole log attached? Yes No
9. When do you propose to complete the new point of diversion?

10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____
11. Groundwater Management District recommendation attached? Yes No
12. Assisted by LK

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.

RECEIVED

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.)

FEB 16 2018

Garden City Field Office
Division of Water Resources

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).

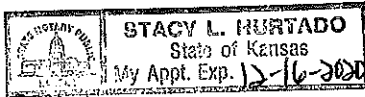
I hereby verify, being first duly sworn upon my oath or affirmation and under penalty of perjury, that I am of lawful age and the owner, the spouse of the owner, or a duly authorized agent of the owner(s) to make this application on their behalf, in regard to the water right(s) to which this application pertains. I further verify that the statements contained in this application are true, correct and complete.

Dated at _____, Kansas, this _____ day of _____, 20_____.

<u><i>Gina Bigot</i></u> (Owner)	_____	(Spouse)
<u>Gina Bigot</u> (Please Print)	_____	(Please Print)
<u><i>Man</i></u> (Owner)	_____	(Spouse)
<u>Marc Bigot</u> (Please Print)	_____	(Please Print)
_____	_____	(Spouse)
_____	_____	(Please Print)

State of Kansas }
County of Jewell } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 15th day of February, 2018.



Stacy L. Hurtado
Notary Public

My Commission Expires 12-16-2020

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

SUMMARY ORDER APPROVING APPLICATION FOR CHANGE AND IMPOSING CONDITIONS

This Summary Order is issued under authority of K.S.A. 82a-708b, as amended, and K.A.R. 5-14-3 and other applicable provisions of the *Kansas Water Appropriation Law, K.S.A. 82a-701 et. seq.*, and rules and regulations promulgated thereunder, K.A.R. 5-1-1 *et. seq.* With the exception of those conditions expressly contained herein, this Summary Order does not change the terms, conditions and limitations of File No. 29881-D2.



1. A change application was received on FEBRUARY 16, 2018 requesting that the place of use and / or point of diversion authorized under the above-referenced file number be changed as described in the application.
2. On and after the effective date of this summary order, the authorized place(s) of use shall be located substantially as shown on the topographic map accompanying the application to change the place of use. Applicable Not Applicable
3. The change in point of diversion shall not impair existing rights and shall be limited to the same source or sources of water as previously authorized. The point of diversion authorized by this summary order shall be located within a _____ foot radius of the authorized point(s) of diversion. Applicable Not Applicable
4. The point(s) of diversion authorized herein shall not actually be located more than _____ feet from the previously authorized point(s) of diversion. Applicable Not Applicable
5. As required by K.A.R. 5-3-5d, if the works for diversion is a well with a diversion rate of 100 gallons per minute or more, a tube or other device suitable for making water level measurements shall be installed, operated and maintained in accordance with K.A.R. 5-6-13. Applicable Not Applicable
6. The owner of the authorized place(s) of use shall properly install an acceptable water flow meter on or before December 31, 2018, or before the first use of water, whichever occurs first. The water flow meter shall be installed, operated and maintained in accordance with K.A.R. 5-1-4 through 5-1-12. As required by K.S.A. 82a-732, as amended, and K.A.R. 5-3-5e, the owner shall maintain records and report the reading of the water flow meter and the total quantity of water diverted annually to the Chief Engineer by March 1 following the end of each calendar year. Applicable Not Applicable
7. Installation of the works for diversion of water shall be completed on or before December 31, 20_____, or within any authorized extension of time. By March 1, 20_____, the applicant shall notify the Chief Engineer that construction of the works for diversion has been completed, on the form provided by the Chief Engineer, as required by K.A.R. 5-8-4e. Applicable Not Applicable
8. The completed well log shall be submitted with the required notice. Applicable Not Applicable
9. All diversion works into which any type of chemical or other foreign substance will be injected into the water shall be equipped with an in-line, automatic, quick-closing check valve capable of preventing pollution of the source of the water supply. The check valve(s) shall be installed, operated and maintained in accordance with K.A.R. 5-3-5c. Applicable Not Applicable
10. Additional Conditions are attached. Yes No
11. In accordance with K.S.A. 82a-708a, as amended, and K.A.R. 5-5-14, all of the owners of the authorized place(s) of use of water appropriated under the above-referenced file number are responsible for compliance with its terms, conditions and limitations, as amended and/or supplemented by this Summary Order, and with applicable provisions of the *Kansas Water Appropriation Law* and the *Rules and Regulations* promulgated thereunder. Failure to comply with these provisions may result in civil penalties pursuant to K.S.A. 82a-737, as amended, and/or the suspension or revocation and dismissal of the water or appropriation right or any other enforcement actions authorized by law.

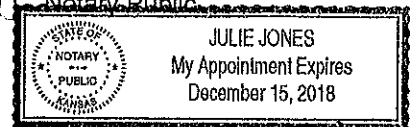
Administrative Appeal and Effective Date of Order

You have the right to a hearing in accordance with K.A.R. 5-14-3 before this Summary Order becomes final action of the Kansas Department of Agriculture. Any request for a hearing must be filed with the **Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, 109 SW 9th Street, Topeka, Kansas 66612**, within 15 days after the date shown on the Certificate of Service attached hereto. If a hearing is not requested in accordance with K.A.R. 5-14-3, this Summary Order will become effective on the 15th day after the date shown on the Certificate of Service.

For Use by Register of Deeds

FOR OFFICE USE ONLY
APPLICATION APPROVED AND SUMMARY ORDER ISSUED

By: 
Duly Authorized Designee of the Chief Engineer
(Print Name): THOMAS P. MAKENS
Division of Water Resources - Kansas Department of Agriculture
Date of Issuance: MARCH 21, 2018
State of Kansas)
County of Finney) SS
Acknowledged before me on March 21, 2018
by Thomas P. Makens
Signature: 
Notary Public



My commission expires: _____

(Notary Seal)

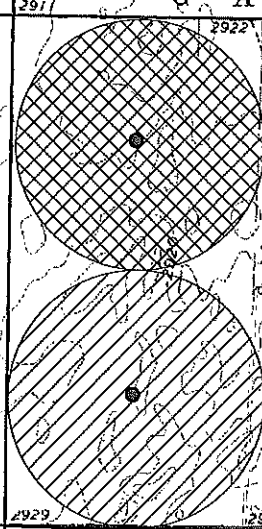
Change in Place of Use: WR 29881 D2

I agree to the best of my knowledge that all known water wells (IRR, DQM, IND, etc) are shown within green circles on map. If not, I have edited the map indicating the location of the well, type, & owner information.

Signature: 



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FEB 16 2018
Garden City Field Office
Division of Water Resources

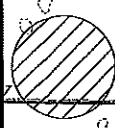


Legend

0 0.225 0.45 0.9 Miles



Current Place of Use



Proposed Place of Use

