

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 14, 2018

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

Re: Water Right file number 6963

Dear Mr. Norquest;

Pat Josserand 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.

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 11:55 AM
 FEB 08 2018

File No. 6963

1. Application is hereby made for approval of the Chief Engineer to change the (check one or both): Garden City Field Office
Division of Water Resources

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: PAT JOSSERAND

PO BOX 390 JOHNSON KS 67855

Phone Number: () _____ Email address: _____

Name and address of Water Use Correspondent: _____

PO BOX 390 JOHNSON KS 67855

Phone Number: () _____ Email address: _____

3. The presently authorized place of use is:
 Owner of Land ---- NAME: see attachment
 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: _____
 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 2/8/18 Check # CARD

5. **Presently authorized point of diversion:**
 One in the sw Quarter of the nw Quarter of the sw Quarter
 of Section 36, Township 28 South, Range 40 W,
 in Stanton County, Kansas, 1549 feet North 4745 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
 (DWR use only: Computer ID No. 3 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 sw Quarter of the sw Quarter
 of Section 36, Township 28 South, Range 40 W,
 in Stanton County, Kansas, 831 feet North 5163 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 _____

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

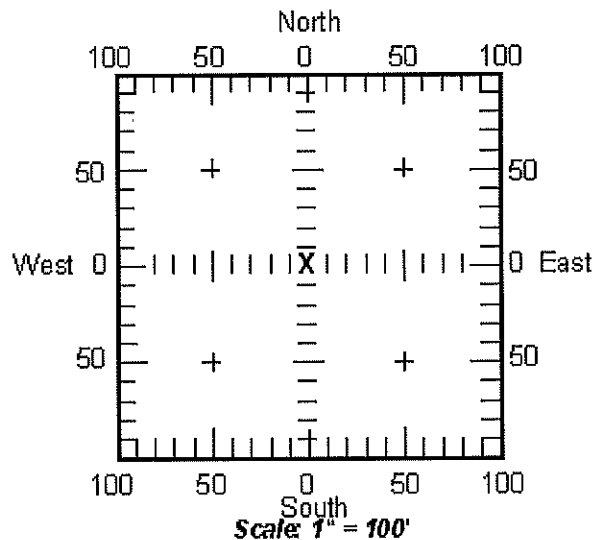
9. When do you propose to complete the new point of diversion?
february 15, 2018

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.

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.)

RECEIVED

FEB 08 2018

Shawnee City Field Office
Department 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 Johnson, Kansas, this 6th day of February, 2017.

Pat Josseland (Owner) _____ (Spouse) _____

Pat Josseland Triple J (Please Print) _____ (Please Print) _____

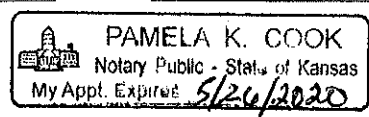
Pat Josseland Josseland Sam (Owner) _____ (Spouse) _____

Pat Josseland (Please Print) _____ (Please Print) _____

Pat Josseland Josseland Cath (Owner) _____ (Spouse) _____

Pat Josseland (Please Print) _____ (Please Print) _____

State of Kansas }
County of Stanton } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 6th day of February, 2018.

Pamela K. Cook
Notary Public

My Commission Expires May 26, 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

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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Carroll 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 Wichita Ks, Kansas, this 17th day of January, 2018.

Lance Josseland, for Emer F Josseland LLC
(Owner)

(Spouse)

Lance Josseland
(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

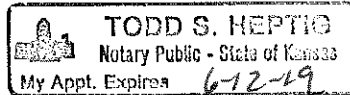
(Spouse)

(Please Print)

(Please Print)

State of Kansas

County of Sedgwick } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 17 day of January, 2018.

Todd S. Heptig
Notary Public

My Commission Expires 6-12-19

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.

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FEB 08 2018

Public Health & Safety
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).

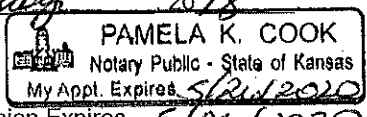
I hereby verify, being first duly sworn upon my oath or affirmation and under penalty of perjury, that I am of lawful age and the owner, the spouse of the owner, or a duly authorized agent of the owner(s) to make this application on their behalf, in regard to the water right(s) to which this application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

Dated at Johnson, Kansas, this 6th day of February, 2018.

<u>Melvin Winger Premier</u> (Owner)	_____	(Spouse)
<u>Melvin Winger</u> (Please Print)	_____	(Please Print)
<u>Pat Posserand PRA Triple J</u> (Owner)	_____	(Spouse)
<u>Pat Posserand</u> (Please Print)	_____	(Please Print)
<u>Pat Posserand Jessuand Cattle</u> (Owner)	_____	(Spouse)
<u>Pat Posserand</u> (Please Print)	_____	(Please Print)

State of Kansas }
County of Stanton } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 6th day of February, 2018.



Pamela K. Cook
Notary Public

My Commission Expires 5/21/2020

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.

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 Yes No (If no, all owners must sign this application.)

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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 Johnson, Kansas, this 2nd day of February, 2018.

[Signature]
(Owner)

[Signature]
(Spouse)

GUTHRIE A. JESSERAN
(Please Print)
(Owner)

[Signature]
(Spouse)

[Signature]
(Please Print)
(Owner)

[Signature]
(Spouse)

[Signature]
(Please Print)
(Owner)

[Signature]
(Spouse)

State of Kansas }
County of Stanton } SS

PAMELA K. COOK
Notary Public - State of Kansas
My Appt. Expires 5/26/2020

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 2nd day of February, 2018.

My Commission Expires 5/26/2020

Pamela K. Cook
Notary Public

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.

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JAN 31 2018

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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- (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.)

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FEB 08 2018

Garden City Field Office
Surface 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 McPherson, Kansas, this 26th day of January, 2018.

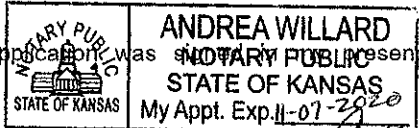
McPherson College, by

PEOPLES BANK & TRUST COMPANY

BY Keith P. Tucker
Keith P. Tucker, Farm Manager

_____	_____
(Please Print)	(Spouse)
_____	_____
(Owner)	(Spouse)
_____	_____
(Please Print)	(Please Print)
_____	_____
(Owner)	(Spouse)
_____	_____
(Please Print)	(Please Print)

State of Kansas
County of McPherson } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 26th day of January, 2018.

Andrea Willard
Notary Public

My Commission Expires 11-07-2020

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.

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 Yes No (If no, all owners must sign this application.)

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(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.)

FEB 08 2018

(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.)

Gardner 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 Castle Rock, Colorado, Kansas, this 2nd day of February, 2018.

[Signature]
(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

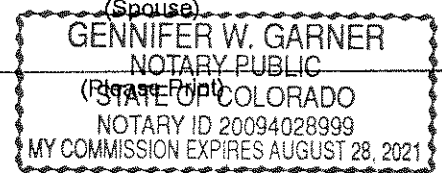
(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)



State of ~~Kansas~~ Colorado }
County of Douglas } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 2 day of February, 2018.

[Signature]
Notary Public

My Commission Expires 08/28/2021

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.

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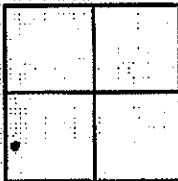
Sec. 36 Blk T 28
 Survey R 40 Co. Stanton
 N. 37.56481° W. 101.65291°



Garden City Field Office
 Division of Water Resources
 No. 23016

P.O. Box 784
 Sunray, Texas 79086
 (806) 946-4421

Seth Nelson



Test Waterwell

DATE 9-6-17

NO. 2-17

FROM	TO	DESCRIPTION	SAND
0	100	Surface top soil fine sand w/ sandy clay strips	
100	220	Brown sticky clay	
220	380	Sand w/ minor clay strips	
380	400	med to coarse fairly loose sand w/ gravel	20
400	420	med to coarse fairly loose sand w/ gravel	20
420	440	med to coarse fairly loose sand w/ gravel	20
440	460	med to coarse fairly loose sand w/ gravel	20
460	480	Tight yellow sandstone w/ hard sandstone strip to black clay	17 tons
480	500	Black clay + shale w/ hard sandstone strips	4 tons
500	520	Tight yellow to gray sand/sandstone w/ clay mix	20
520	540	Tight tan sand/sandstone w/ red clay strip ^{used lot} water 536	16
540	560	fine tight sand/sandstone w/ loose sand strip + some clay mix ⁵³⁶	20
560	580	fine tight sand/sandstone w/ loose sand strip + some clay mix ⁵³⁶	20
580	600	fine tight sand/sandstone w/ loose sand strip loose core 599	20
600	620	fine tight sand/sandstone w/ loose sand strip ^{used lot} WATER	
		1/2 drag bit.	
		2 sets hells 1 set 66-11U	
		4 1/2 BRTS Hydro pac req.	
		1 BKT Hydro Seal.	
		NO electric Log.	

EMERY F JOSSERAND LLC
1827 N DENISE MARIE ST
WICHITA KS 67212-7408

IVAN L JOSSERAND TESTAMENTARY TRUST
PATRICK & MICHAEL TTEES
PO BOX 390
JOHNSON KS 67855

JOSSERAND CATTLE INC
PO BOX 539
JOHNSON KS 67855

MARGARET G JOSSERAND
102 E LANE DR APT 8
JOHNSON KS 67855

MCPHERSON COLLEGE
ADMINISTRATIVE OFFICE
PO BOX 1402
MCPHERSON KS 67460

PREMIER FARMS LLC
MELVIN WINGER
PO BOX 914
JOHNSON KS 67855

MICHAEL JOSSERAND
5572 KILLEN AVE
CASTLE ROCK CO 80104

PATRICK JOSSERAND & CYNTHIA JOSSERAND
PO BOX 390
JOHNSON KS 67855-0390

SUMMER LAND TRUST
GERALDINE SUMMER
302 HIGHLAND PL
WASHINGTON IL 61571-1455

TRIPLE J PARTNERSHIP
PAT JOSSERAND
PO BOX 390
JOHNSON KS 67855

JOSSERAND FARMS INC
PATRICK JOSSERAND
PO BOX 390