

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

April 18, 2018

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

Re: Water Right file number 2955 7661 12343 22520

Dear Mr. Norquest;

The Hamm Estate has applied to alter the acres authorized to add a pivot location. The base acres are 750. There are three neighboring wells all belong to the same owner.

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. I have enclosed a copy of the change for your perusal.

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

Sincerely;

Thomas P Makens

encs.

STATE OF KANSAS

DEPARTMENT OF AGRICULTURE
1320 RESEARCH PARK DRIVE
MANHATTAN, KS 66502
PHONE: (785) 564-6700
FAX: (785) 564-6777



900 SW JACKSON, ROOM 456
TOPEKA, KS 66612
PHONE: (785) 296-3556
www.agriculture.ks.gov

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

March 29, 2018

JAMES A HUSH
PO BOX 458
PLAINS KS 67869

RE: Water Right file no. 2955 7661 12343 22520

This is to advise you that the Hamm Estate has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the place of use under the above referenced application.

You are notified on this proposed change in place of use so that you may furnish this office with any comments or other information you may want to submit.

You can find the complete application posted by water right file number as referenced above at www.agriculture.ks.gov/divisions-programs/dwr/water-appropriation/notices Should you have any questions, please feel free to call this office. If you would prefer, an appointment could be arranged for additional assistance. Please refer to the file number when you contact us if you wish to discuss a specific file.

Sincerely,

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

Thomas P. Makens
Environmental Scientist III

pc: GMD#3

STATE OF KANSAS

DEPARTMENT OF AGRICULTURE
1320 RESEARCH PARK DRIVE
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PHONE: (785) 564-6700
FAX: (785) 564-6777



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www.agriculture.ks.gov

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

March 29, 2018

DOUGLAS B FOX
PO BOX 235
PLAINS KS 67869

RE: Water Right file no. 2955 7661 12343 22520

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Sincerely,

A handwritten signature in black ink, appearing to read "T. Makens", written over a horizontal line.

Thomas P. Makens
Environmental Scientist III

pc: GMD#3

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.

RECEIVED
 1:36pm
 MAR 29 2018

File No. 7661

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: LAYNE ANGELL

P O BOX 249 PLAINS KS 67869

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: LAYNE ANGELL

P O BOX 249 PLAINS KS 67869

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land --- NAME: RUBY M HAMM LIFE ESTATE

ADDRESS: BOX 457 PLAINS KS 67869

(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	
14	33	30w	30	40	40	35	40	40	40	40	40	40	40	40	40	40	40	40	625

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: RUBY M HAMM LIFE ESTATE

ADDRESS: BOX 457 PLAINS KS 67869

(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	
14	33	30w	9	33	40	33	33	9	33	40	40	33	9	33	9	40	33	33	460

For Office Use Only: Code _____ Fee \$ 200 TR # _____ Receipt Date 3/29/18 Check # 6636

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 _____

MAR 29 2018

Garden City Field Office

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 change to water wells

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

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

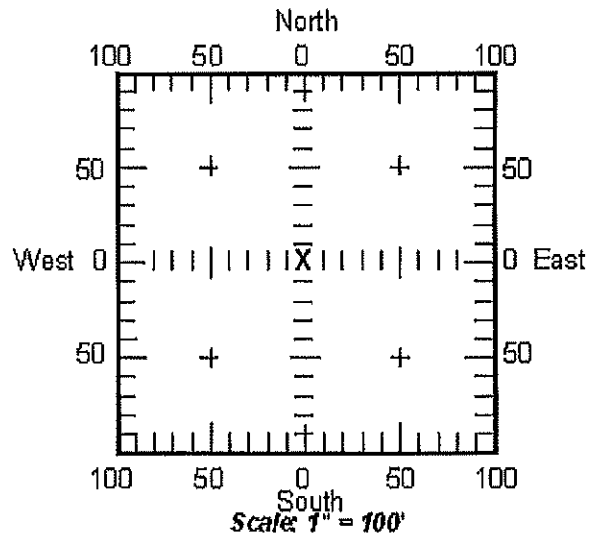
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached? Yes No

12. Assisted by 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.

APPLICATION FOR APPROVAL TO CHANGE
THE PLACE OF USE AND/OR POINT OF DIVERSION
SUPPLEMENTAL SHEET
FILE NO. 7661
MAKE ADDITIONAL COPIES AS NECESSARY

RECEIVED

MAR 29 2018

Garden City Field Office
Division of Water Resources

3. *Continued:* The presently authorized place of use is:

Owner of Land ---- NAME: TERRENCE L & TREY L, MICHAEL L & JACQUELINE J SCOTT HAMM & HOLLIE ROESCH
ADDRESS: _____

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	
15	33	30w	18	23	37	37													115

Owner of Land ---- NAME: TERRENCE L & TREY L, MICHAEL L & JACQUELINE J HAMM
ADDRESS: _____

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		
15	33	30w														10	10			20

Owner of Land ---- NAME: _____
ADDRESS: _____

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. *Continued:* 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: TERRENCE L & TREY L, MICHAEL L & JACQUELINE J SCOTT HAMM & HOLLIE ROESCH
ADDRESS: _____

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		
15	33	30w	18	23	37	37														115

Owner of Land ---- NAME: TERRENCE L & TREY L, MICHAEL L & JACQUELINE J HAMM
ADDRESS: _____

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		
15	33	30w														30	30	29	29	118

Owner of Land ---- NAME: _____
ADDRESS: _____

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		

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.)

MAR 29 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 Virginia Beach, Va, Kansas, this 22nd day of March, 2018.

[Signature]

 (Owner)

SCOTT E Hamm

 (Please Print)

 (Owner)

 (Please Print)

 (Owner)

 (Please Print)

 (Spouse)

 (Please Print)

 (Spouse)

 (Please Print)

 (Spouse)

 (Please Print)

State of ~~Kansas~~ Virginia
County of Va Beach } SS

ANNETTE MICHELLE CLARK
 Notary Public
 Commonwealth of Virginia
 7636815

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 30th day of March, 2018.

[Signature]

 Notary Public

My Commission Expires 11-30-2019.

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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MAR 29 2018

Garden City Field Office
Division of Water Resources

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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, Kansas, this 20TH day of MARCH, 2018.

[Signature]
(Owner)

(Spouse)

TERENCE L. HAMM
(Please Print)

(Please Print)

[Signature]
(Owner)

(Spouse)

RUBY M. HAMM TERENCE L. HAMM
(Please Print) C.O. EXECUTOR

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas }
County of Seward } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 20TH day of MARCH, 2018.

My Commission Expires 11-17-21

[Signature]
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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 MAR 29 2018
 Garden City Field Office
 Division of Water Resources

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Dated at Tulsa County, Oklahoma, Kansas, this 20th day of March, 2018.

Michael L Hamm
 (Owner)
Michael L Hamm
 (Please Print)
Hollie Koersch
 (Owner)
Hollie Koersch
 (Please Print)

 (Owner)

 (Please Print)

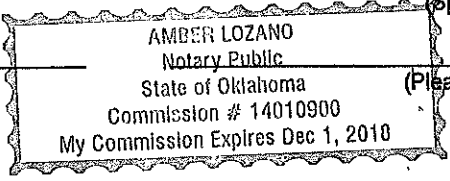
Jacqueline J Hamm
 (Spouse)
Jacqueline J Hamm
 (Please Print)

 (Spouse)

 (Please Print)

 (Spouse)

 (Please Print)



State of Oklahoma
~~State of Kansas~~ } SS
 County of Tulsa

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 20th day of March, 2018.

Amber Lozano
 Notary Public

My Commission Expires Dec 1, 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.

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RECEIVED

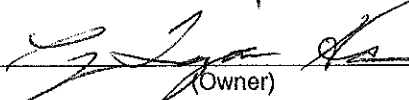
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Garden City Field Office
Division of Water Resources

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Dated at Colorado Springs, ^{Colorado} ~~Kansas~~, this 26th day of MARCH, 2018.

 _____ (Owner)	_____ (Spouse)
<u>Trey Logan Hamm</u> (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)

State of ^{Colorado} ~~Kansas~~ } SS
County of El Paso

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

BRYAN FOUST
NOTARY PUBLIC
STATE OF COLORADO
NOTARY ID 20134022182
MY COMMISSION EXPIRES MAY 10, 2021



Notary Public

My Commission Expires May 10, 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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2955 7661 12343 22520

