

NOTICE

This scan only represents the application as filed. The information contained herein meets the requirements of K.A.R. 5-3-1 or K.A.R. 5-5-1, and has been found acceptable for filing in the office of the Chief Engineer. The application should not be considered to be a complete application as per K.A.R. 5-3-1b or K.A.R. 5-5-2a.

Submit completed application to:
 Kansas Department of Agriculture
 Division of Water Resources
 Field Office for your area.
 Call for address:
 Topeka -- (785) 296-5733
 Stafford -- (620) 234-5311
 Stockton -- (785) 425-6787
 Garden City -- (620) 276-2901
<http://agriculture.ks.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. 41725

RECEIVED
 8:56 AM
 DEC 18 2020

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: GEORGE TRENT & TAMMY J ~~SOLEUM~~ SLOCUM
PO BOX 244 HUGOTON KS 67951

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: GEORGE TRENT & TAMMY J ~~SOLEUM~~ SLOCUM
PO BOX 244 HUGOTON KS 67951

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land --- NAME: NO CHANGE
 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
 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 \$ 200.00 TR # _____ Receipt Date 12-18-20 Check # 9027

5. **Presently authorized point of diversion:**
 One in the NE Quarter of the NE Quarter of the NW Quarter of Section 8, Township 34 South, Range 35 W, in Stevens County, Kansas, 5135 feet North 2670 feet West of Southeast corner of section.
 Authorized Rate --- Authorized Quantity --- Depth of well _____ (feet)
 (DWR use only: Computer ID No. 03 GPS _____ feet North _____ feet West)
 This point will not be changed This point will be changed as follows: No change, point better described with GPS as follows:
Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)
 One in the SE Quarter of the NE Quarter of the NE Quarter of Section 8, Township 34 South, Range 35 W, in Stevens County, Kansas, 4240 feet North 273 feet West of Southeast corner of section.
 Proposed Rate --- Proposed Quantity --- Proposed well depth (feet) 651
 This point is: Additional Well Geo Center List other water rights that will use this point 4/456

6. **Presently authorized point of diversion:**
 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.
 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: No change, point better described with GPS as follows:
Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)
 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. The changes herein are desired for the following reasons?
 (please be specific) _____

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

9. The change(s) (was)(will be) completed by?

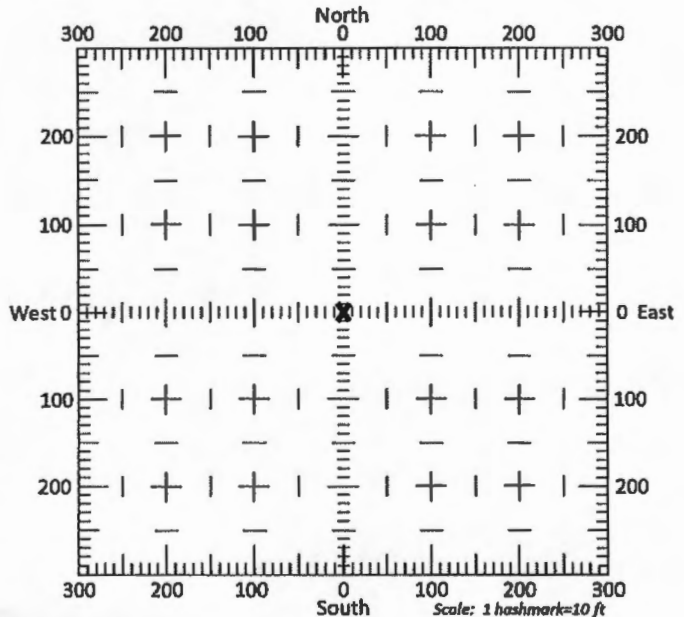
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by _____

13a. If the proposed point of diversion will be relocated more than 300 feet but within 2,640 feet of 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



13b. If the proposed point of diversion will be relocated within 300 feet of the existing point of diversion, indicate its location on the diagram shown above in relation to the existing point of diversion. (PLEASE NOTE: The "X" in center of diagram above represents the presently authorized point of diversion.)

14. If the proposed groundwater point of diversion is 300 or fewer feet from the 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 regards 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 Hugoton, Kansas, this 17 day of December, 2020.

X George Trent Stocum
(Owner)

George Trent Stocum
(Please Print)

(Owner)

(Please Print)

(Owner)

(Please Print)

X Tammy Jo Stocum
(Spouse)

Tammy Jo Stocum
(Please Print)

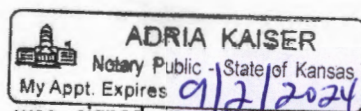
(Spouse)

(Please Print)

(Spouse)

(Please Print)

State of Kansas }
County of Stevens } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 17 day of December, 2020.

Adria Kaiser
Notary Public

My Commission Expires 9/2/2024.

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

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



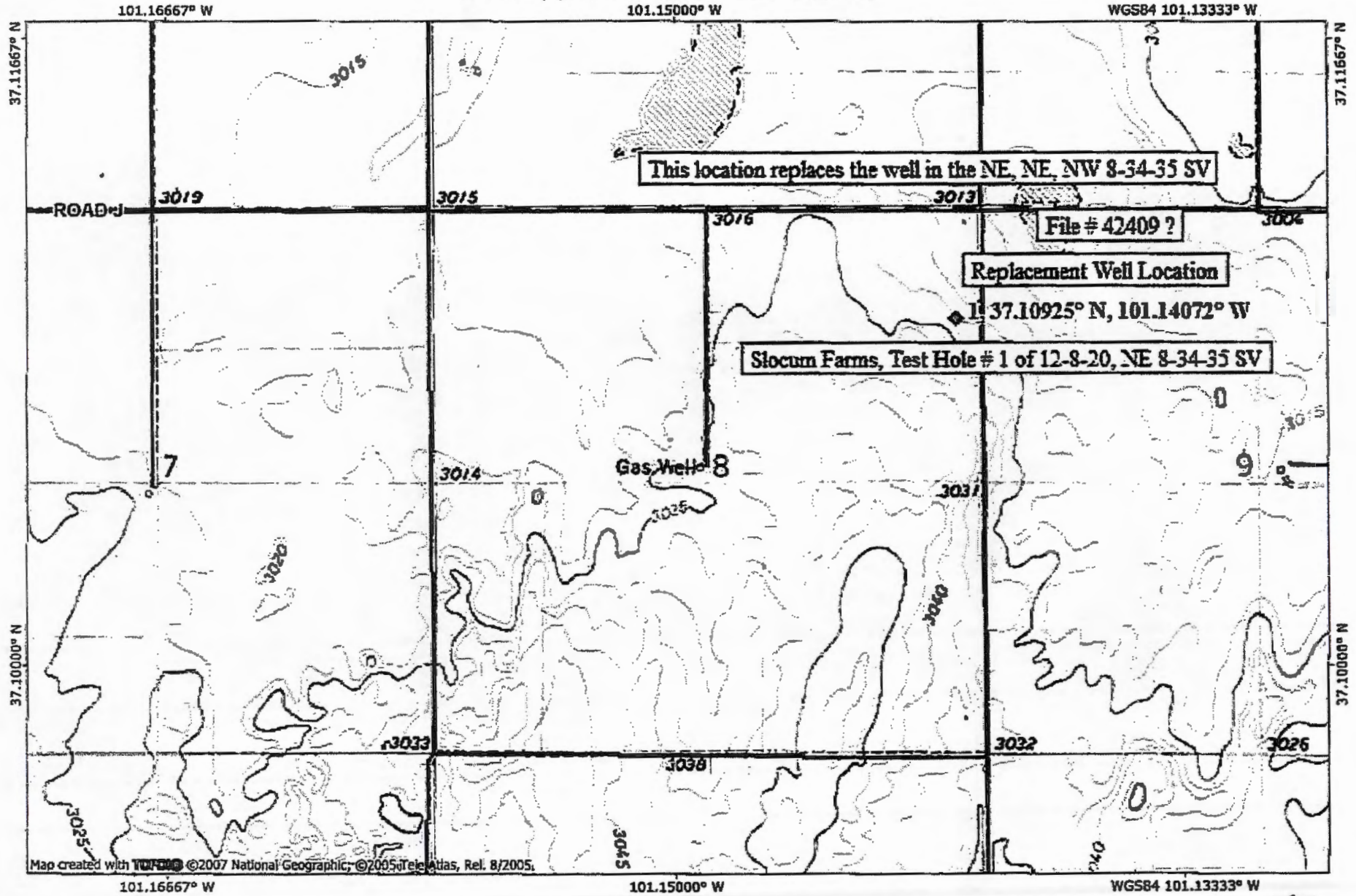
PO Box 639-
Garden City, KS 67846
Fax: 620-277-0224

TRENT SLOCUM 620-544-1999

Customer Name: Slocum Farms WO#: 21197 Date: 12-8-20
Street Address: P.O. Box 188 Test #: 1 ELOG: Yes
City, State: HUGOTON, KS 67951 Driller: Dale Guinn
County: Stevens Quarter: NE Section: 8 Township: 34 Range: 35
Location: GPS: N37.10925 W101.14072
Rig #: 10002 Elevation: 3010' Static WL: 326' Estimated?
Proposed Well Depth 651
WELL LOCATION 20' SYMP

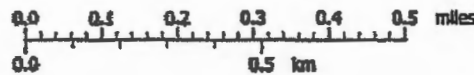
%	Footage			Description of Strata
	From	Pay	To	
	0		2	Top Soil
	2		18	Brown Sandy Clay
	18		60	Fine Med Sand w/Few Clay Layers
	60		82	Fine Med Sand Few Small Brown Gravel
	82		95	Brown Sandy Clay
	95		114	Fine Med Sand w/Very Small Brown Rock + Small Brown Rock
	114		121	Brown Clay w/Few Thin Tan Rock Layers
	121		146	Fine Med Course Sand Small Gravel
	146		157	Brown Sandy Clay
	157		204	Brown Sandy Clay w/Few Lime Rock Layers
	204		225	Brown Sandy Clay w/Some Sand Mixed
	225		230	Fine Med Course Sand
	230		284	Brown Sandy Clay "Little Sticky"
	284		327	Fine Med Sand w/Many clay Layers
	327	64	339	Brown Sandy Clay
25	339	85	424	Fine Med Sand w/Very Small Brown Rock Flakes "Fairly loose" + Few Thin Clay Layers
15	424	19	443	Fine Med Sand w/Some Clay Layers
25	443	45	498	Fine Med Sand w/Few Clay Layers + Very Small Brown Rock Flakes
15	498	22	520	Fine Med Sand w/Some Clay Layers
5	520	40	560	Fine Some Med Sand w/Many Clay Layers
10	560	40	600	Fine Some Med + Course Sand w/Many Clay Layers
	600		621	Grish Blue Clay
10	621	10	631	Fine Med Sand w/Little Clay Mixed
	631		680	Blue Clay
				Super Gel X -4
				EZ Mud 1 qt.
				Grout -2
				Hole Plug -7
				Perma Plug -1
				4 3/4 Dmg Blade -1

TOPO! map printed on 12/11/20 from "Untitled.tpo"

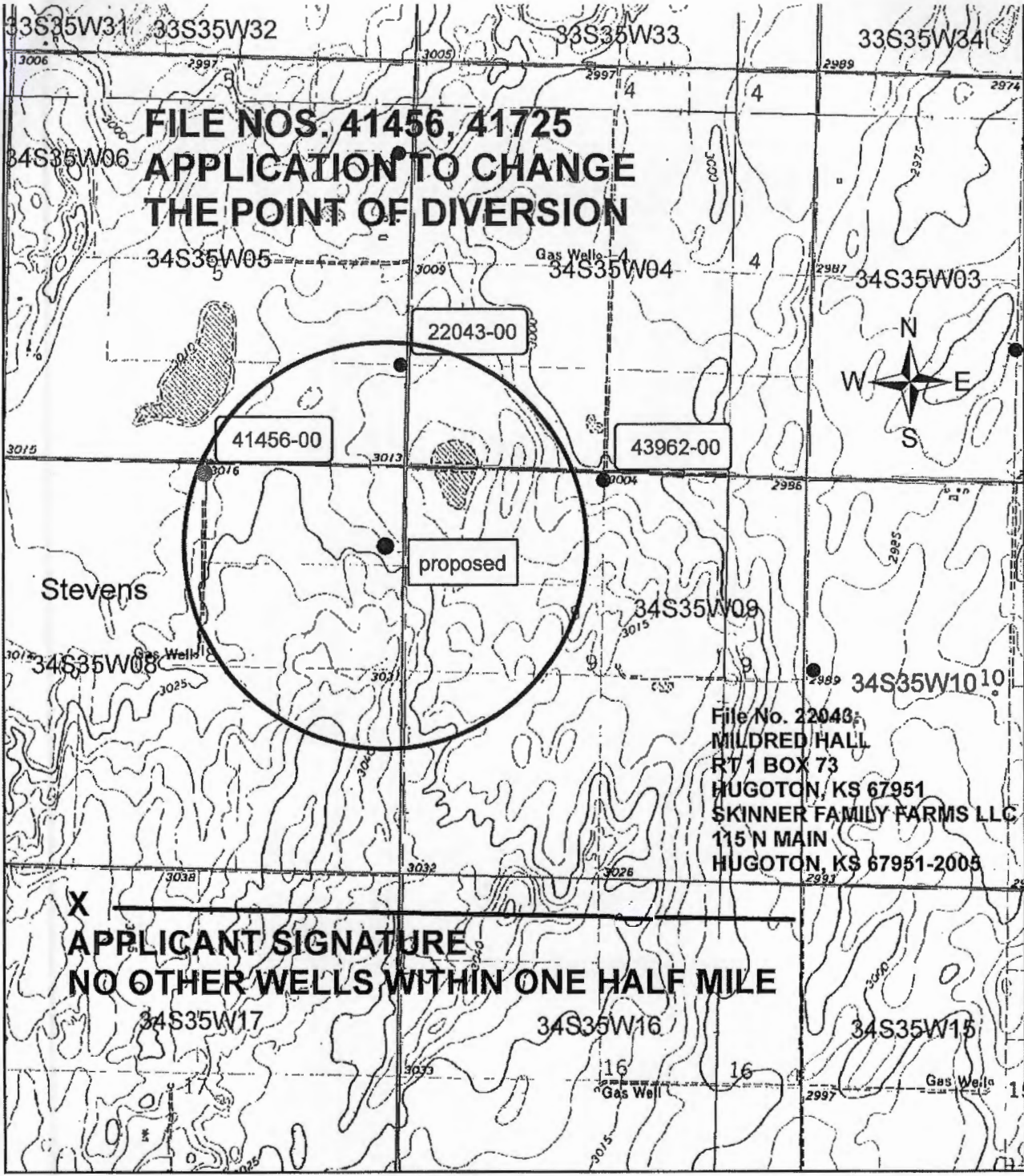


Map created with ©2007 National Geographic, ©2005 TeleAtlas, Rel. 8/2005.

NATIONAL GEOGRAPHIC



TN MN
5 1/2"
12/11/20



1 inch = 2,000 feet

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



Phone: 620-276-2901
Fax: 620-276-9315
www.agriculture.ks.gov

Mike Beam, Interim Secretary

Laura Kelly, Governor

December 21, 2020

RICHARD & SUSAN JAMES
1241 PERSHING AVE
LIBERAL, KS 67901

RE: Water Right, File No. 41456 & 41725

Dear Sir and Madam:

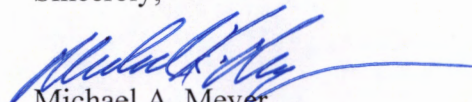
This is to advise you that George & Tammy Slocum has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, in point of diversion under the above referenced file numbers. An irrigation well is proposed to be relocated.

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

You are notified on this proposed point of diversion (well) so that you may furnish this office with any comments or other information you may want to submit. Such comments or other information must be received in this office within 15 days from the date of this letter.

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,



Michael A. Meyer
Water Commissioner

MAM
Pc:

MILDRED HALL
RT 1 BOX 73
HUGOTON, KS 67951

SKINNER FAMILY FARMS LLC
115 N MAIN
HUGOTON, KS 67951-2005

Groundwater Management District No. 3