

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

1. File Number: 7101	2. Status Change Date:	3. Change Num: C1	4. Field Office: 4	5. GMD: 3
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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: 5/6/2022
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8a. Applicant(s) / Landowner(s) New to system <input type="checkbox"/> Person ID 67213 Add Seq# _____ SHERWYN & KARI ANN UNRUH 2036 30TH RD COPELAND, KS 67837	8c. Landowner(s) New to system <input type="checkbox"/> Person ID 67233 Add Seq# _____ LEONARD FAMILY FARMS LLC 2252 ROAD OO SUBLETTE, KS 67877
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8b. Landowner(s) New to system <input type="checkbox"/> Person ID 18433 Add Seq# _____ RONALD D & CHERYL D UNRUH 2032 30TH RD COPELAND, KS 67837	8d. WUC New to system <input type="checkbox"/> Person ID _____ Add Seq# _____ 8b
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9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: **12/31/2022** N & P Date to Comply: **3/1/2023**

Anti-Reverse Meter Meter Seal Check Valve N & P Form Water Tube Driller Copy H & E Letter
 Conservation Plan Date Required: _____ Date Approved: _____ Date to Comply: _____

10. Use Made of Water From: _____ To: _____

Date Prepared: **5/10/2022** By: **AM**
 Date Entered: _____ By: _____

File No. **7101** 11. County: **HS** Basin: **ARKANSAS RIVER** Stream: Formation Code: **211** Special Use:

12. Points of Diversion
 CHK
 MOD
 DEL PDIV
 ENT
 Qualifier S T R ID 'N 'W Comment (AKA Line)
 Rate and Quantity
 Authorized Additional
 Rate Quantity Rate Quantity
 gpm/cfs af/mgy gpm/cfs af/mgy Overlap PD Files

CHK 10436																					

13. Storage: Rate _____ NF Quantity _____ ac/ft Additional Rate _____ NF Additional Quantity _____ ac/ft

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 _____

16. Place of Use CHK MOD DEL ENT	PUSE	S	T	R	ID	NE¼				NW¼				SW¼				SE¼				Total	Owner	Chg?	Overlap Files
						NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼				
MOD 2795	8				27S31W 2	40	30	40	40									40	40	40	40	310	8b	N	MULTIPLE
DEL 8369																									
ENT 12846	8				27S31W 4					34	40	40	40								154	8c	N	MULTIPLE	
CHK 18107	8				27S31W 3									40	40	40	40				160	8a	N	MULTIPLE	
ENT 35509	9				27S31W 1					31.5	31.5	31.5	31.5								126	8a	N	MULTIPLE	

Base Acres: Year: Minimum Reasonable Quantity:
 Comments: **CREATING A COMPLETE OVERLAP IN PLACE OF USE W/ FILES 7101; 14354; 15946; 16308; 23457**

Garden City Field Office
4532 W. Jones, Suite B
Garden City, KS 67846



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

Mike Beam, Secretary

Laura Kelly, Governor

May 10, 2022

SHERWYN & KARI ANN UNRUH
2036 30TH RD
COPELAND, KS 67837

RE: Filed Office Application for Change
Water Right, File Nos. 7101; 14354; 15946; 16308 & 23457

Dear Sir or Madam:

Enclosed is the order executed by the designee of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, approving the application for change under the above referenced file numbers.

Your attention is directed to the enclosures and to the terms, conditions, and limitations specified in this approval for change. A condition of this approval is that an acceptable water flow meter must be installed on the diversion works authorized under the referenced file number and meet current specifications. Please return the required notification of completion of the diversion works and/or installation of the required meter as soon as these actions are completed.

Since the order modifies the original document referred to above, it should be recorded with the Register of Deeds as other instruments affecting real estate.

Should you have any questions, please feel free contact this office. If you would prefer, you could arrange an appointment for additional assistance.

Sincerely,

A handwritten signature in blue ink that reads "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc: Ronald & Cheryl Unruh
Leonard Family Farms LLC
GROUNDWATER MANAGEMENT DISTRICT NO. 3

CERTIFICATE OF SERVICE

On this 10th day of May, 2022, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Water Right, File Nos. 7,101, 14,354, 15,946, 16,308 and 23,457 dated 10th day of May, 2022 was mailed postage prepaid, first class, US mail to the following:

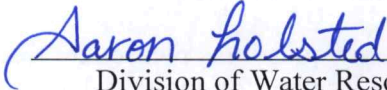
SHERWYN & KARI ANN UNRUH
2036 30TH RD
COPELAND, KS 67837

Pc:

RONALD D & CHERYL D UNRUH
2032 30TH RD
COPELAND, KS 67837

LEONARD FAMILY FARMS LLC
2252 ROAD OO
SUBLETTE, KS 67877

GROUNDWATER MANAGEMENT DISTRICT NO. 3



Division of Water Resources Staff

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.

RECEIVED
 10:45 am
 MAY 06 2022

File No. 7101

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: SHERWYN & KARI ANN UNRUH

Phone Number: (620) 271-4154 Email address: Sherwyn@UnruhMag.com

Name and address of Water Use Correspondent: NO CHANGE

NO CHANGE

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: RONALD D & CHERYL D UNRUH

ADDRESS: 2032 30TH RD COPELAND KS 67837

(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	
8	27S	31W	40	30	40	40													310

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: SAME AS ABOVE

ADDRESS: SAME AS ABOVE

(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	
8	27S	31W	40	30	40	40													310

For Office Use Only: Code _____ Fee \$ 200.00 TR # _____ Receipt Date 5-6-22 Check # 16769

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: 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 _____ 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 _____ (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 _____ 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) CREATE A COMPLETE OVERLAP
IN PLACE OF USE W/ FILE NOS. 7101; 14354; 15946;
16308 & 23457

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

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

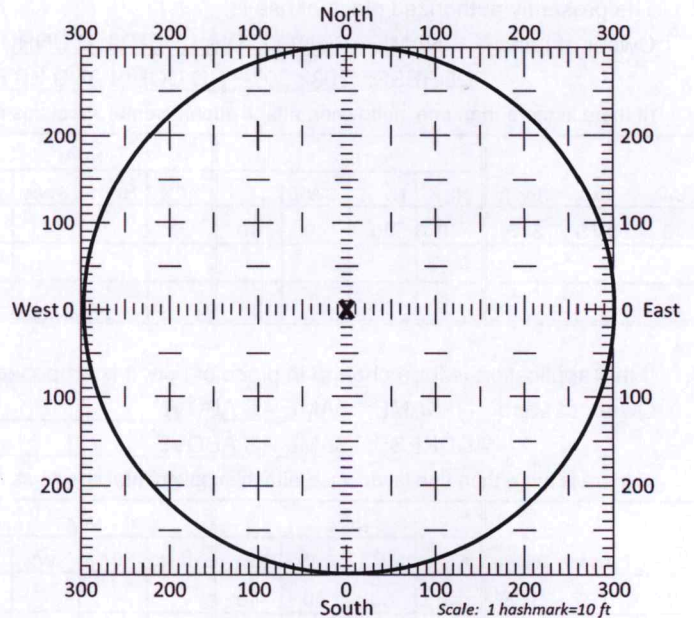
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by JG/GCFO

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 a 300 foot radius of the existing point of diversion, indicate its location on the diagram shown above in relation to the existing point of diversion. The proposed point of diversion must be located within the circle shown above. **(PLEASE NOTE: The "X" in center of diagram above represents the presently authorized point of diversion.)**

APPLICATION FOR APPROVAL TO CHANGE
THE PLACE OF USE AND/OR POINT OF DIVERSION
SUPPLEMENTAL SHEET

FILE NO. 7101

MAKE ADDITIONAL COPIES AS NECESSARY

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

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	

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	

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: LEONARD FAMILY FARMS LLC
ADDRESS: 2252 ROAD OO SUBLETTE KS 67877

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	
8	27S	31W					34	40	40	40									154

Owner of Land ---- NAME: SHERWYN & KARI ANN UNRUH
ADDRESS: 2036 30TH RD COPELAND KS 67837

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	
8	27S	31W									40	40	40	40					160
9	27S	31W					31.5	31.5	31.5	31.5									126

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	

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 Garden City, Kansas, this 18 day of April, 20 22.

Lon Unruh
(Owner)

Cheryl Unruh
(Spouse)

Ron Unruh
(Please Print)

Cheryl Unruh
(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas }
County of Finney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 18 day of April, 20 22.

Nicole Anaya
Notary Public

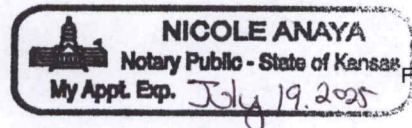
My Commission Expires July 19, 2025.

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

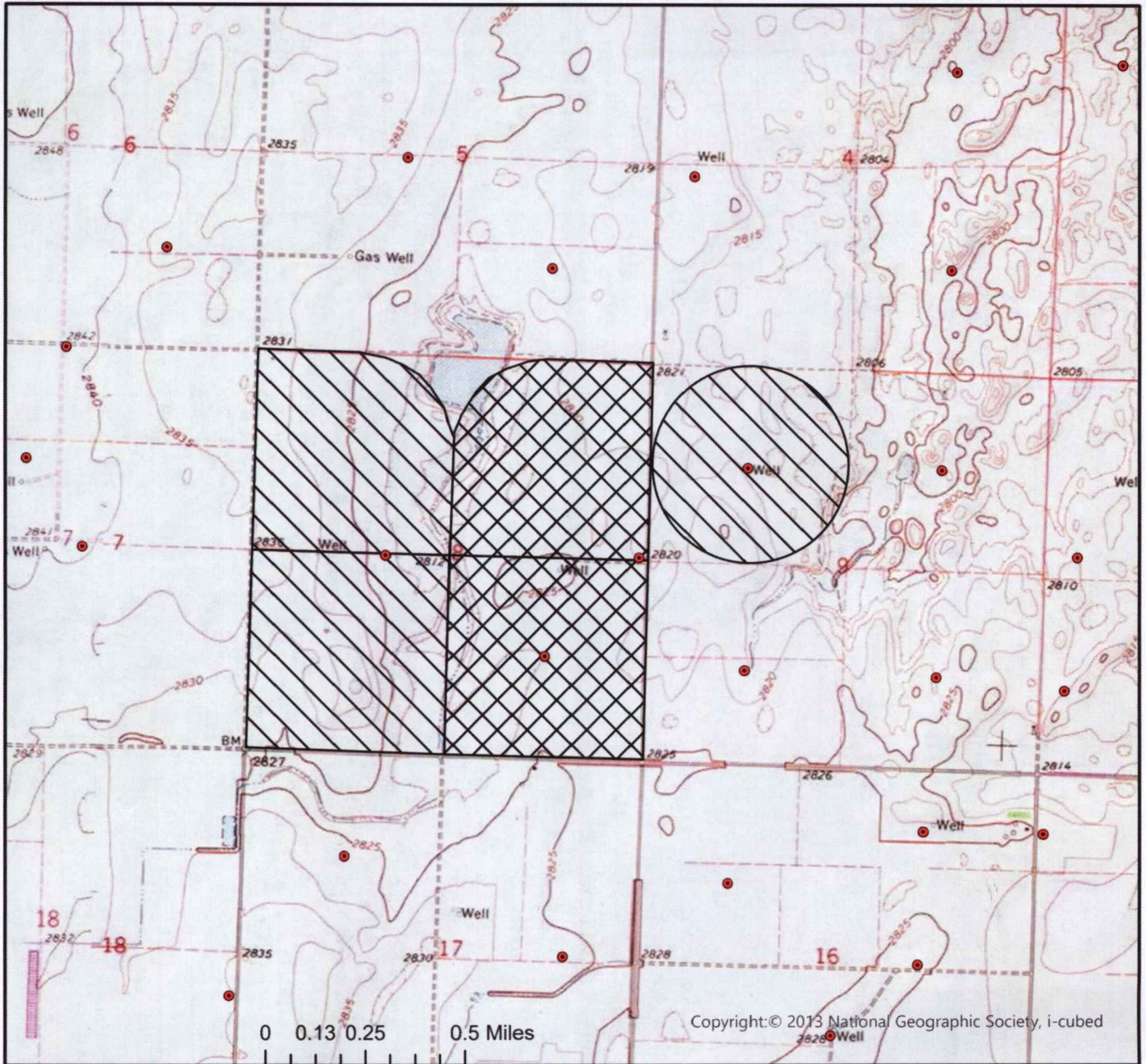
Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

- (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



CHANGE IN PLACE OF USE WATER RIGHT, FILE NO. 7101

NE & SE 1/4 of Section 8 Township 27 South Range 31 West HASKELL County



- Authorized Point of Diversion
- Domestic Well within 1/2 mile
- Domestic Well within 1/2 mile
- Authorized Place of Use
- Proposed Place of Use

List of owner name and addresses within 1/2 mile:



All wells of any kind within 1/2 mile of the requested place of use have been plotted.

Date JG/GCFO
1:24,000 Scale

(Signature)

Date