

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. 8739

RECEIVED
 3:00 pm
 NOV 10 2022

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: TOM STOPPEL

PO BOX 592, SUBLETTE, KS 67877

Phone Number: () _____ Email address: _____

Name and address of Water Use Correspondent: _____

Phone Number: () _____ Email address: _____

3. The presently authorized place of use is:

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			

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 \$ 200.00 TR # _____ Receipt Date 11-10-22 Check # Discover Card

5. **Presently authorized point of diversion:**
 One in the NW Quarter of the NW Quarter of the SW Quarter of Section 02, Township 30 South, Range 32 W, in HS County, Kansas, 2439 feet North 5218 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: 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 NW Quarter of the NW Quarter of the NW Quarter of Section 02, Township 30 South, Range 32 W, in HS County, Kansas, 4701 feet North 5151 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: 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) _____

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

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

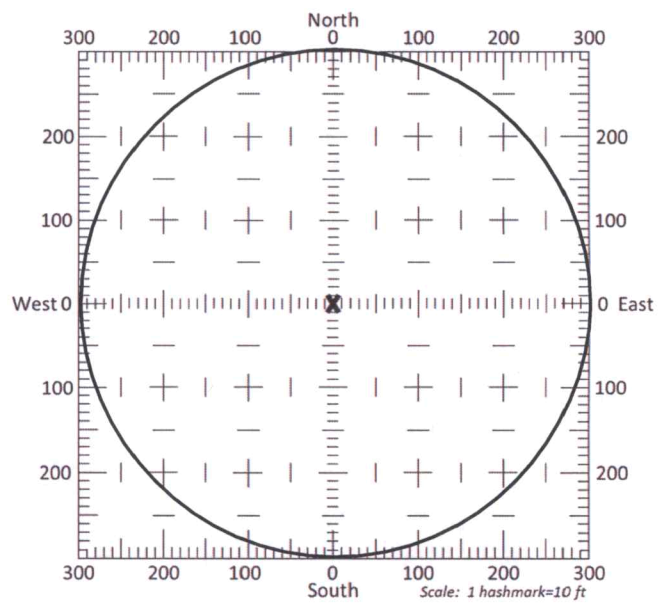
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (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.)**

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 10th day of November, 2022.

Thomas R. Stoppel
(Owner)

(Spouse)

Thomas R. Stoppel
(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas }
County of Atterney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 10th day of November, 2022.



Julie Jones
Notary Public

My Commission Expires _____

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.

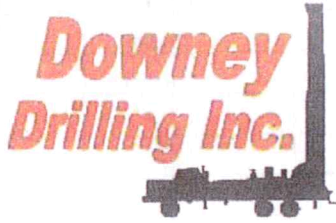
FEE SCHEDULE

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

WELL LOG

DATE: 10/27/2022



CUSTOMER NAME: TOM STOPPEL

TH#1

LEGAL: NWNW 2-30S-32W

COUNTY: HASKELL CO. KS

GPS: 37.473261

-100.797757

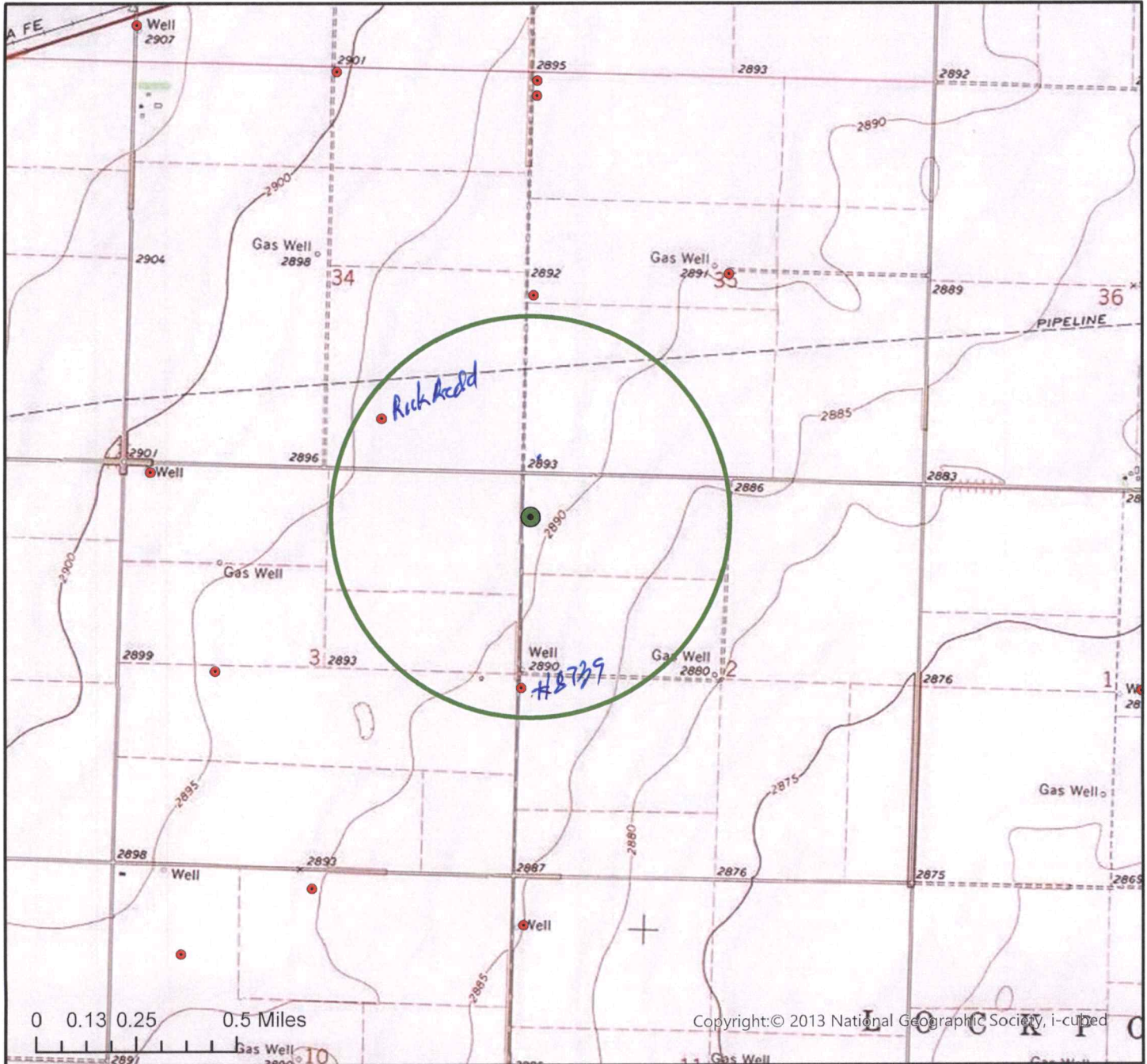
DRILLER: DIEGO





WO: 22-1597

V	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
	0	3	TOP SOIL	SOFT	DRK BROWN	FAST		SMOOTH
	3	15	BROWN SILTY CLAY	SOFT	BROWN	FAST		SMOOTH
	15	33	BROWN CLAY	SOFT	BROWN	FAST		SMOOTH
	33	47	SANDY CLAY W/ CALICHE	SOFT	WHITE	FAST		SMOOTH & CHOPPY
	47	58	ORANGE SANDY CLAY	SOFT	ORANGE	FAST		SMOOTH
	58	86	FINE-MED-COARSE SAND W/ FINE-MED-COARSE GRAVEL	STIFF		FAST		CHATTER
	86	102	BROWN CLAY	SOFT	BROWN	FAST		SMOOTH
	102	123	FINE-MED-COARSE GRAVEL W/ BIG ROCKS	HARD		FAST		CHATTER
	123	139	BROWN CLAY	SOFT	BROWN	FAST		SMOOTH
	139	165	FINE-MED-COARSE GRAVEL	STIFF		FAST		CHATTER
	165	190	FINE-MED-COARSE SAND W/ FINE GRAVEL	FIRM		FAST		FAST CHATTER
	190	270	FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
	270	308	FINE SAND	SOFT		FAST		VIBRATION
	308	313	GRAY & YELLOW CLAY	SOFT	YELLOW & GRAY	SLOW		SMOOTH
	313	318	BLUE CLAY	SOFT	BLUE	SLOW		SMOOTH
	318	333	SOAPSTONE	SOFT	BLUE	FAST		VIBRATION
	333	354	FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
	354	358	WHITE CLAY	SOFT	WHITE	FAST		SMOOTH
	358	364	FINE-MED SAND	FIRM		FAST		CHOPPY
	364	369	CEMENTED SAND W/ FINE-MED-COARSE SAND	STIFF	WHITE	SEMI SLOW		CHATTER
	369	373	BROWN CLAY	SOFT	BROWN	FAST		SMOOTH
	373	394	SANDY CLAY	SOFT	BROWN	FAST		SMOOTH
	394	405	LIME ROCK W/ FINE SAND	STIFF	WHITE	FAST		FAST CHATTER
	405	425	SANDY CLAY	SOFT		FAST		SMOOTH VIBRATION & SMOOTH
	425	437	FINE SAND W/ SANDY CLAY	SOFT	TAN	FAST		SMOOTH
	437	443	FINE SAND W/ BROWN ROCK & SANDY CLAY	FIRM	BROWN & TAN	FAST		FAST CHATTER
	443	450	YELLOW SOAPSTONE	SOFT	YELLOW	SEMI SLOW		VIBRATION
	450	470	WEATHERED SHALE	SOFT	YELLOW & GRAY	SLOW		SMOOTH
	470	490	SHALE	SOFT	BLUE	SLOW		SMOOTH
	490	498	SOAPSTONE W/ SANDSTONE & FINE SAND	FIRM	BLUE	FAST		CHOPPY
	498	503	SANDSTONE	FIRM	BLUE	FAST		CHATTER
	503	548	SHALE	SOFT	BLUE	SLOW		SMOOTH
	548	563	SOAPSTONE	SOFT	BLUE	FASTER		VIBRATION
	563	589	SHALE	SOFT	BLUE	SLOW		SMOOTH
	589	596	GREEN CLAY	SOFT	GREEN	SLOW		CHOPPY

CHANGE IN PLACE OF DIVERSION WATER RIGHT, FILE NO. 8739

NW 1/4 of Section 02 Township 30 South Range 32 West Haskell County



	Authorized Point of Diversion
	Proposed Point of Diversion
	Domestic Well within 1/2 mile
	1/2 mile buffer

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.

(Signature)

Date

Date JG/GCFO
1:24,000 Scale

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

November 14, 2022

RICK & KATHRYN REDD
PO BOX 296
SUBLETTE, KS 67877

Re: Water Right, File No. 8739

Dear Sir:

This is to advise you that Tom Stoppel has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, for change in point of diversion under the above referenced application.

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 of 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,

Sincerely,

A handwritten signature in blue ink, appearing to read "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM