

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

1. File Number: <b>12088</b>	2. Status Change Date: <b>6-15-2023</b>	3. Change Num: <b>C1</b>	4. Field Office: <b>4</b>	5. GMD: <b>3</b>
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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: <b>6/14/2023</b>
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a. Landowner, applicant(s) New to system <input type="checkbox"/> Person ID <b>67953</b> Add Seq# _____  <b>CLAYTON &amp; KYLE MADDUX</b> <b>3314 PRIMROSE</b> <b>GARDEN CITY, KS 67846-6990</b>	8c. Landowner(s) New to system <input type="checkbox"/> Person ID _____ Add Seq# _____
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b. Landowner(s) New to system <input type="checkbox"/> Person ID _____ Add Seq# _____	8d. WUC New to system <input type="checkbox"/> Person ID _____ Add Seq# _____
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Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: <b>12/31/2023</b> <input checked="" type="checkbox"/> N & P Date to Comply: <b>3/1/2024</b>	
<input type="checkbox"/> Anti-Reverse Meter <input type="checkbox"/> Meter Seal <input checked="" type="checkbox"/> Check Valve <input checked="" type="checkbox"/> N & P Form <input checked="" type="checkbox"/> Water Tube <input checked="" type="checkbox"/> Driller Copy <input checked="" type="checkbox"/> H & E Letter	
<input type="checkbox"/> Conservation Plan            Date Required: _____            Date Approved: _____            Date to Comply: _____	

9. Use Made of Water            From: _____            To: _____
------------------------------------------------------------------

Date Prepared: <b>6/15/2023</b> By: <b>MAM</b>
Date Entered: _____            By: _____

File No. **12088**

11. County: FI

Basin: **ARKANSAS RIVER**

Stream:

Formation Code: **211**

Special Use:

12. Points of Diversion

Rate and Quantity

CHK	MOD	DEL	PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Rate gpm	Quantity af	Rate gpm	Quantity af	Overlap PD Files
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**DEL 40468**

<b>ENT</b>	<b>NWSWSW</b>	<b>32</b>	<b>22</b>	<b>34W</b>					<b>1266</b>	<b>4983</b>		<b>1380</b>	<b>440</b>	<b>1380</b>	<b>440</b>	<b>NONE</b>
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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
									NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼				
<b>CHK 16823</b>																												

Base Acres: \_\_\_\_\_ Year: \_\_\_\_\_ Minimum Reasonable Quantity: \_\_\_\_\_

Comments:

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

June 15, 2023

CLAYTON & KYLE MADDUX  
3314 PRIMROSE  
GARDEN CITY, KS 67846-6990

RE: Water Right, File No. 12088

Dear Sir:

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 number.

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 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 "Michael A. Meyer".

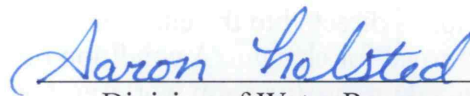
Michael A. Meyer  
Water Commissioner

MAM:  
enclosures

### CERTIFICATE OF SERVICE

On this 15<sup>th</sup> day of June 2023, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 12,088 dated 15<sup>th</sup> day of June 2023 was mailed postage prepaid, first class, US mail to the following:

CLAYTON & KYLE MADDUX  
3314 PRIMROSE  
GARDEN CITY, KS 67846-6990



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.

File No. 12088

**RECEIVED**  
 9:15 AM  
 JUN 14 2023

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: CLAYTON & KYLE MADDUX MADDUX FARMS  
3314 PRIMROSE GARDEN CITY KS 67846-6990 2245 ROAD 190, DEERFIELD, KS 67838  
 Phone Number: (620) 355-9434      Email address: \_\_\_\_\_  
 Name and address of Water Use Correspondent: SAME AS ABOVE

Phone Number: (      ) \_\_\_\_\_      Email address: \_\_\_\_\_

3. The presently authorized place of use is:

Owner of Land ---- NAME: SAME AS ABOVE -- 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: \_\_\_\_\_

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 \$ 100.00 TR # \_\_\_\_\_ Receipt Date 6-14-23 Check # 8127

5. **Presently authorized point of diversion:**  
 One in the \_\_\_\_\_ Quarter of the \_\_\_\_\_ CW Quarter of the \_\_\_\_\_ SW Quarter  
 of Section \_\_\_\_\_ 32 \_\_\_\_\_, Township \_\_\_\_\_ 22 \_\_\_\_\_ South, Range \_\_\_\_\_ 34 \_\_\_\_\_ (W),  
 in FINNEY \_\_\_\_\_ 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. 02 GPS 1311 feet North 5270 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 \_\_\_\_\_ SW Quarter of the \_\_\_\_\_ SW Quarter  
 of Section \_\_\_\_\_ 32 \_\_\_\_\_, Township \_\_\_\_\_ 22 \_\_\_\_\_ South, Range \_\_\_\_\_ 34 \_\_\_\_\_ (W),  
 in FINNEY \_\_\_\_\_ County, Kansas, \_\_\_\_\_ 1266 feet North \_\_\_\_\_ 4983 feet West of Southeast corner of section.  
 Proposed Rate \_\_\_\_\_ Proposed Quantity \_\_\_\_\_ Proposed well depth (feet) \_\_\_\_\_ 320'  
 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) LOSS OF PRODUCTION

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

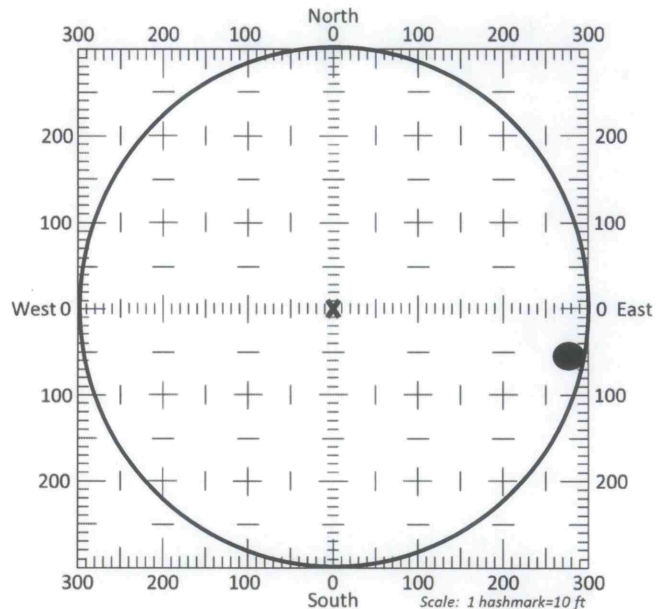
9. The change(s) (was)(will be) completed by?  
UPON APPROVAL

10. If the point of diversion is a well:  
 (a) What are you going to do with the old well?  
PLUG / CAP  
 (b) When will this be done? \_\_\_\_\_

11. Groundwater Management District recommendation attached?  
 Yes  No

12. Assisted by AM / 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 14TH day of JUNE, 2023.

<p><u>Kent A maddy</u>          (Owner)</p> <p><u>Kent A maddy</u>          (Please Print)</p> <p>_____ (Owner)          _____ (Please Print)</p> <p>_____ (Owner)          _____ (Please Print)</p> <p>_____ (Owner)          _____ (Please Print)</p>	<p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p>
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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 14TH day of JUNE, 2023.

My Commission Expires 9-14-26  Catherine Reinert  
 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.

**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






# Maddux Farms

KS Water Well Test hole # 4 of 5-25-23.  
REPLACEMENT WELL LOCATION  
SW 32-22-34 FI  
284' East & 7'South of existing well  
FILE # 12088

## Legend

 38.09400 N 101.08343 W

 38.09400 N 101.08343 W

Google Earth

3000 ft





KIRK MADDOX 620-355-9432  
 KENT MADDOX 620-355-9434

HYDRO RESOURCES

KEN RAHNIT  
 620-260-7356

**Kansas Water Wells inc.**

Test# 4

Customer	Maddux FARMS	Date	5/25/23
Address	2245 ROAD 190	City/State	DEERFIELD, KS 67838
County	Finney	Quarter	SW
		Sec.	32
		Township	22
		Range	34
GPS Format	NAD 83	Lat.	38.09400
		Long.	101.08343
Static Water Level	217'	Proposed Well Depth	319'

From	Pay	To	Description of Strata
			WELL LOCATION
0		4	Top soil
4		17	Brown sandy clay
17		27	Fine-coarse sand/small gravel
27		132	Brown sandy clay
132		144	Fine sand
144		170	Fine-coarse sand/small gravel (loose)
170		180	Fine-coarse sand/couple small clay streaks (loose)
180		193	Fine-coarse sand/some small gravel (loose)
193		202	Red & white sandy clay/small gravel (mix)
202		215	White-red-yellow clay
215		220	Fine sand
220	7	227	Fine-med sand/sandy clay 50/50
227		255	Red & white sandy clay/Gyp (mix)
255	9	264	Fine-coarse sand w/ clay streaks 40/60 (tight)
264	9	273	40% fine-60% med-coarse sand (loose)
273	4	277	40% fine-60% med-coarse sand (little tight)
277	4	281	Fine sandy clay/small gravel streaks 50/50
281	11	292	20% fine-40% med-coarse sand/40% broken
			Small brown & white rock (loose)
292	4	296	10% fine-30% med-coarse sand/60% broken small-med
			Brown & white rock (tighter due to bigger material)
296	3	299	20% fine-coarse sand/40% yellow clay/ 40% broken small-med
			Brown & white rock (mostly white)
299		301	Yellow clay turning to black shale
301		302	Black shale
Location From Old Hole			284 FEET EAST & 7 FEET SOUTH OF EXISTING WELL
Bags Of High Yield	2	Bags Of Hole Plug	1

including 20' slump