

File No. **12907** 13. County: **ME** Basin: **CROOKED CREEK** Stream:
 Structures File No: Aquifer Code: **211** Special Use Area:

14. Points of Diversion, Rates & Quantities										Qty AF		Rate gpm		Storage Qty		Storage Rate	
PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Auth	Add	Auth	Add	Auth	Add	Auth/Add	Overlaps	
CHK	20189	SW SW SE	3	30S	29W	2	56	2056	756	200	3000	1700				*	
DEL	31809																
ENT		SW SW NW	2	30S	29W		3243	5258	**	**	**	**				NONE	

15. Limitations Type: Combined Quantity and Rate Quantity: **756 AF** Rate: **3000 gpm** combined with file no(s): **6355** (NO CHANGE)
 Type: Quantity: Rate: combined with file no(s):

16. Metering Metering Required Anti-Reverse Required Seal Required Compliance Date: 12/31/2024

17. Place of Use		NE¼				NW¼				SW¼				SE¼				Total	Owner(s)	Chg?	Overlaps
PUSE	S T R ID	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE				
CHK																					<input type="checkbox"/>
CHK																					<input type="checkbox"/>
CHK																					<input type="checkbox"/>
																					<input type="checkbox"/>
																					<input type="checkbox"/>

18. Point of Diversion and Place of Use Overlaps
 * 6355 ** BLANKET Q & R BETWEEN BOTH WELLS
 + ++
 # ##
 ^ ^^

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

September 5, 2024

RILEY & RITA SCHMIDT
11007 A ROAD
MONTEZUMA, KS 67867

RE: Filed Office Application for Change
Water Right, File Nos. 12907

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 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.

The abandoned well must be plugged in accordance with the requirements of Article 30 of the Rules and Regulations as adopted by the Kansas Department of Health and Environment.

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, appearing to read "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures


pc:

CERTIFICATE OF SERVICE

On this 5th day of September, 2024, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 12,907 dated 5th day of September, 2024 was mailed postage prepaid, first class, US mail to the following:

RILEY & RITA SCHMIDT
11007 A ROAD
MONTEZUMA, KS 67867

Pc:



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. 12907

RECEIVED
 10:40 am
 AUG 30 2024

Garden City Field Office
 Division of Water Resources

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

2. Name and address of Applicant: RILEY SCMIDT

11007 ROAD A MONTEZUMA KS 67867

Phone Number: () _____ Email address: _____

Name and address of Water Use Correspondent: NO CHANGE

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 \$100.00 TR # _____ Receipt Date 8-30-24 Check # 4288

5. **Presently authorized point of diversion:**
 One in the SW Quarter of the NW SW Quarter of the NW Quarter of Section 2, Township 30 South, Range 29 W, in ME 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. 01 GPS 3036 feet North 5267 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 SW Quarter of the SW Quarter of the NW Quarter of Section 2, Township 30 South, Range 29 W, in ME County, Kansas, 3243 feet North 5258 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 SW Quarter of the SW Quarter of the SE Quarter of Section 3, Township 30 South, Range 29 W, in ME County, Kansas, 56 feet North 2056 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
 (DWR use only: Computer ID No. 02 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?

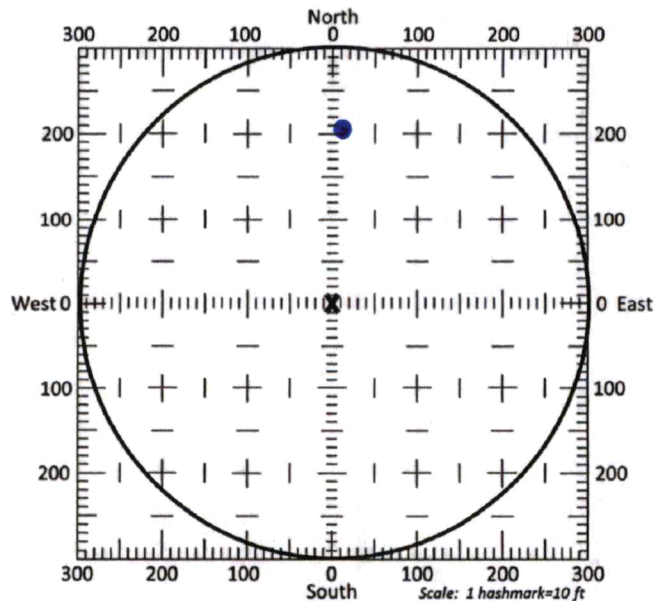
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by MM/DWR

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.)

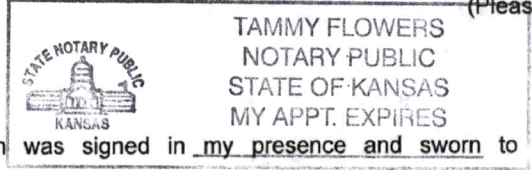
If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized 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 _____, Kansas, this _____ day of _____, 20_____.

<i>Riley Schmidt</i> (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (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 30 day of August, 2024.

Tammy Flowers
 Notary Public

My Commission Expires 5-28-25

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	<u>\$100</u>
(2) Application to change a point of diversion more than 300 feet	\$200
(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

RILEY SCHMIDT 620-846-0150

Customer Name: Riley Schmidt WO#: 27429 Date: 8-8-24
 Street Address: 11007 ROAD A Test #: 1 E LOG: _____
 City, State: MONTEZUMA, KS 67867 Driller: Dale Guinn
 County: Meade Quarter: NW Section: 2 Township: 30 Range: 29
 Location: 204FT North of Existing Well GPS: N37.46909 W100.47002
 Rig #: 10004 Elevation: 2728' Static WL: 200FT Estimated? Yes
 Proposed Well Depth 445
 REPLACEMENT WELL LOCATION: 20'Sump

%	Footage			Description of Strata
	From	Pay	To	
	0		2	Top Soil
	2		6	Brown Sandy Clay
	6		15	Brown Sandy Clay & Fine Sand Mixed
	15		25	Brown Sandy Clay w/ Few Caliche Strips
	25		53	Sand Fine w/ Few clay & Caliche Strips
	53		74	Sand Fine Med
	74		146	Sand Fine Med Course Small Gravel
	146		158	Brown Clay
	158		185	Sand Fine Med Course Small Gravel
35	185	45	245	Sand Fine Med Course Small Few Med Gravel
	245		250	Brown Sandy Clay
25	250	27	277	Sand Fine Med Course w/ Couple clay Layers
5	277	18	295	Brown Sandy Clay & Fine Sand Mixed
25	295	35	330	Sand Fine Med Course
15	330	9	339	Sand Fine Med Course w/ Some clay Layers
10	339	24	363	Sand Fine w/ Clay Layers
20	363	30	393	Sand Fine "Loose"
20	393	9	402	Sand Fine w/ Brown Rock
10	402	23	425	Sandstone & Soapstone "Fairly Loose In Places"
	425		510	Shale "Very Hard From 501' - 510"
				Super Coal X -3
				Grout -5
				Hole Plug -6
				Perma Plug -1
				4 3/4 Drag Blade -1

Riley Schmidt

Test Hole # 1 of 8-8-24


NW 2-30-29 ME

FILE # 12907

Legend

 37.46909 N 100.47002 W

arm And Garden

 37.46909 N 100.47002 W

Google Earth

3000 ft

