

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

1. File Number: <b>25128</b>	2. Status Change Date:	3. Change Num: <b>C3</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>12/8/2023</b>
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8a. Applicant(s) / Landowner(s)      Person ID **53102**  
 New to system       Add Seq# \_\_\_\_\_

**STAPLETON FARMS INC**  
**Attn: RYAN STAPLETON - AGENT**  
**PO BOX 655**  
**MEADE, KS 67864-0655**

8c. Landowner(s)      Person ID **63389**  
 New to system       Add Seq# \_\_\_\_\_

**SEED SOWERS LLC**  
**Attn: DANIEL F CLAWSON**  
**PO BOX 279**  
**PLAINS, KS 67869**

8b. Landowner(s)      Person ID **24959**  
 New to system       Add Seq# \_\_\_\_\_

**MARIE ROSSON FARMS INC**  
**2553 CS 2910**  
**BLANCHARD, OK 73010**

8d. WUC      Person ID \_\_\_\_\_  
 New to system       Add Seq# \_\_\_\_\_

**8A**

9. Documents and Enclosure(s):  DWR Meter(s) Date to Comply: **12/31/2024**     N & P Date to Comply: **3/1/2025**

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: **1/17/2024**    By: **AM**  
 Date Entered: \_\_\_\_\_    By: \_\_\_\_\_

File No. **25128**      11. County: **SW**      Basin: **CROOKED CREEK**      Stream:      Formation Code: **211/331**      Special Use:

12. Points of Diversion  
 Rate and Quantity  
 Authorized      Additional  
 Rate      Quantity      Rate      Quantity  
 gpm      af      gpm      af      Overlap PD Files

**DEL 87328**  
**ENT 27872 NC N2 SW SW 29 31S 31W 1 1075 4500 1825 700 1825 700 NONE**

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 3013</b>																				
<b>CHK 13999</b>																				
<b>CHK 25809</b>																				

Base Acres:      Year:      Minimum Reasonable Quantity:

Comments: **NEVER COMPLETED C2 CHANGE – REMOVE COMPLETION DATE – REVERTING BACK TO ORIGINAL WELL**

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](http://www.agriculture.ks.gov)

Mike Beam, Secretary

Laura Kelly, Governor

January 18, 2024

STAPLETON FARMS INC  
Attn: RYAN STAPLETON - AGENT  
PO BOX 655  
MEADE, KS 67864-0655

RE: Filed Office Application for Change  
Water Right, File No. 25128

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 that reads "Austin J. McColloch".

Austin J. McColloch  
Assistant Water Commissioner

AM:  
enclosures

pc: Marie Rosson Farms Inc  
Seed Sowers LLC

## CERTIFICATE OF SERVICE

On this 18<sup>th</sup> day of January, 2024, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 25,128 dated 18<sup>th</sup> day of January, 2024 was mailed postage prepaid, first class, US mail to the following:

STAPLETON FARMS INC  
Attn: RYAN STAPLETON - AGENT  
PO BOX 655  
MEADE, KS 67864-0655

Pc:

MARIE ROSSON FARMS INC  
2553 CS 2910  
BLANCHARD, OK 73010

SEED SOWERS LLC  
Attn: DANIEL F CLAWSON  
PO BOX 279  
PLAINS, KS 67869

  
\_\_\_\_\_  
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. 25128

**RECEIVED**  
 1:00 pm  
 DEC 08 2023

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: Stapleton Farms Inc., attn Ryan Stapleton  
PO Box 655, Meade, KS 67869

Phone Number: (     )                      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: \_\_\_\_\_

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.)

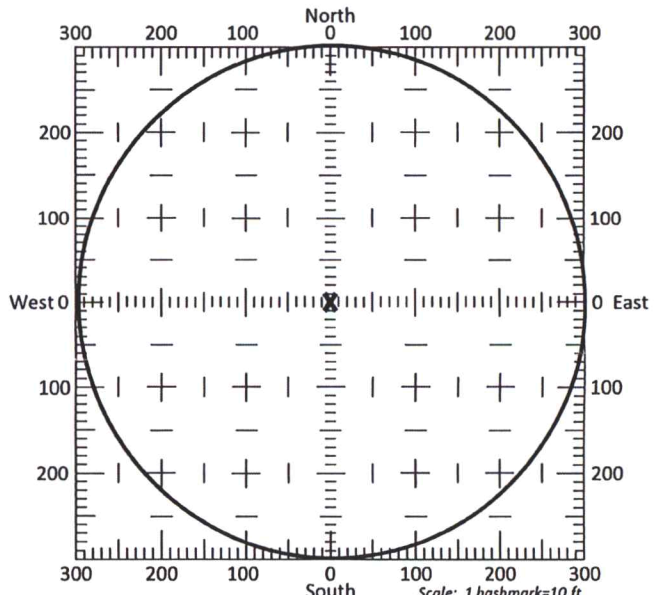
Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES	
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼		

For Office Use Only: Code \_\_\_\_\_ Fee \$ 200.00 TR # \_\_\_\_\_ Receipt Date 12-8-23 Check # 185

5. **Presently authorized point of diversion:**  
 One in the SW Quarter of the SW Quarter of the SW Quarter of Section 29, Township 31 South, Range 31 West, in Seward County, Kansas, 90 feet North 5211 feet West of Southeast corner of section.  
 Authorized Rate 1825 GPM Authorized Quantity 700 AF Depth of well \_\_\_\_\_ (feet)  
**(DWR use only: Computer ID No. 2 GPS 90 feet North 5211 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 North Half of the SW Quarter of the SW Quarter of Section 29, Township 31 South, Range 31 West, in Seward County, Kansas, 1075 feet North 4500 feet West of Southeast corner of section.  
 Proposed Rate no change Proposed Quantity no change Proposed well depth (feet) \_\_\_\_\_  
 This point is:  Additional Well  Geo Center List other water rights that will use this point N/A

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) currently authorized well was never drilled
8. If a well, is the test hole log attached?  Yes  No
9. The change(s) (was)(will be) completed by?  
As soon as possible
10. If the point of diversion is a well:  
 (a) What are you going to do with the old well?  
N/A  
 (b) When will this be done? N/A
11. Groundwater Management District recommendation attached?  
 Yes  No
12. Assisted by CI, 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 Meade County, Kansas, this 10<sup>th</sup> day of January, 20 24.

<u>David Clawson</u> (Owner)	_____	(Spouse)
<u>David Clawson Seed Sowers LLC</u> (Please Print)	_____	(Please Print)
_____	_____	(Spouse)
_____	_____	(Please Print)
_____	_____	(Spouse)
_____	_____	(Please Print)

State of Kansas }  
County of Meade } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 10<sup>th</sup> day of January, 20 24.

 **RYAN REIMER**  
Notary Public - State of Kansas  
My Appt. Expires 5-19-2024

Ryan Reimer  
Notary Public

My Commission Expires 5-19-2024

**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 ..... \$200
- (3) Application to change the place of use ..... \$200

**RECEIVED**  
**JAN 17 2024**


14. If the proposed groundwater point of diversion is 300 or fewer feet from the existing point of diversion, complete the following:

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Dated at Plains, Kansas, this 15<sup>th</sup> day of December, 2023.

 (Owner)	(Spouse)
<u>Ryan Stapleton</u> (Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)
(Owner)	(Spouse)
(Please Print)	(Please Print)

State of Kansas }  
County of Meade } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 15<sup>th</sup> day of December, 2023.



**RYAN REIMER**  
 Notary Public - State of Kansas  
 My Appt. Expires 5-19-2024

  
Notary Public

My Commission Expires 5-19-2024

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(3) Application to change the place of use .....	\$200

RECEIVED  
 JAN 17 2024



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.)
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 Yes     No    (If yes, all owners must sign this application.)
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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 Oklahoma City, <sup>Oklahoma</sup> Kansas, this 15 day of November, 2023.

<p><u>Kari Kaye Howard</u> (Owner)</p> <p>_____ (Spouse)</p> <p><u>Kari Kaye Howard</u> (Please Print)</p> <p>_____ (Please Print)</p> <p>_____ (Owner)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Please Print)</p> <p>_____ (Owner)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Please Print)</p>	<p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p> <p>_____ (Spouse)</p> <p>_____ (Please Print)</p>
--	---

State of ~~Kansas~~ <sup>Oklahoma</sup> } SS  
 County of Oklahoma

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 15<sup>th</sup> day of November, 2023.



José Fuentes  
Notary Public

My Commission Expires 02/10/2026

**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**

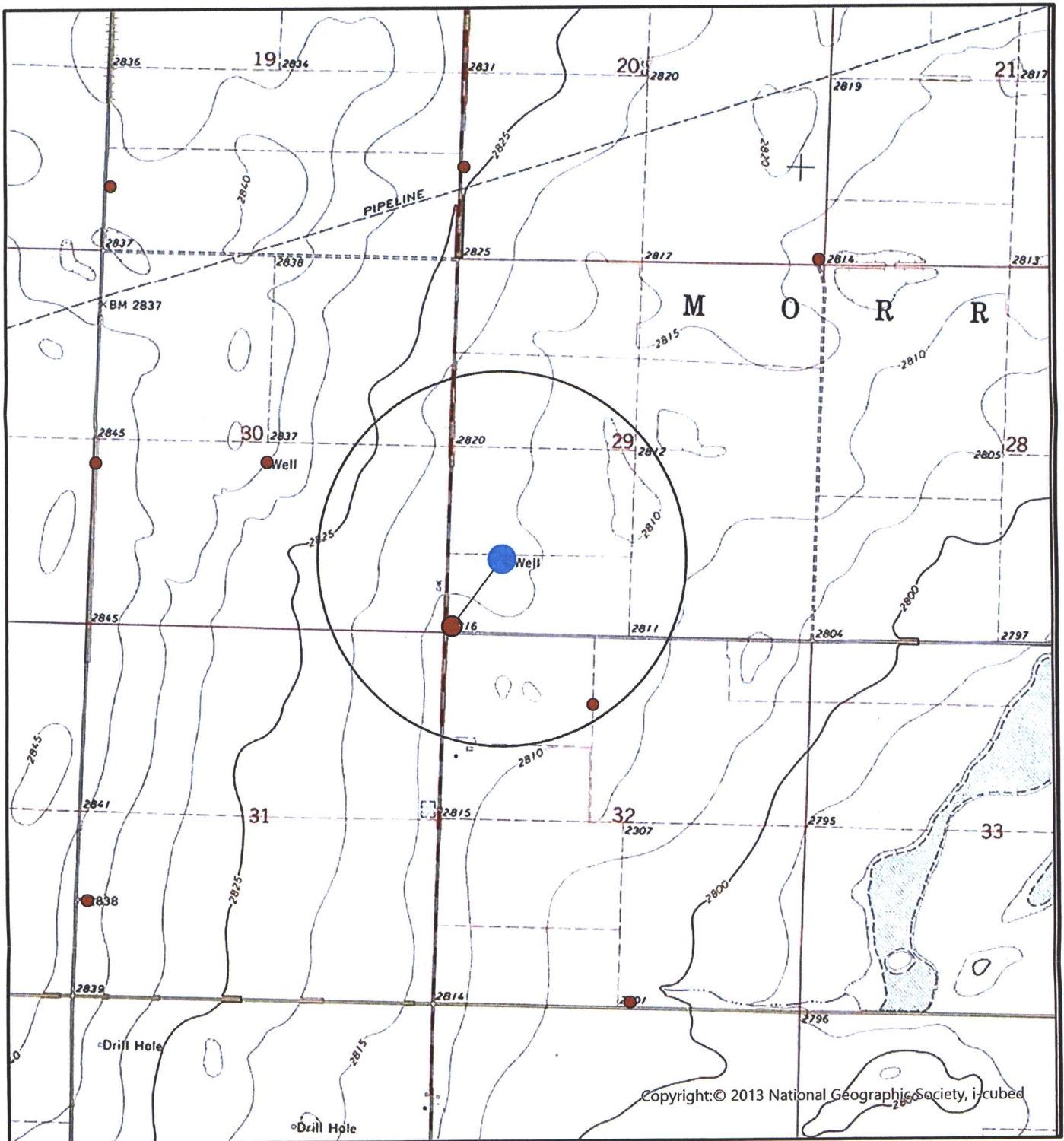
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- (2) Application to change a point of diversion more than 300 feet ..... \$200
- (3) Application to change the place of use ..... \$200





# WR 25128 Change in Point of Diversion



-  1/2 Mile from Proposed Well
-  Existing Well
-  Proposed Well



All wells within 1/2 mile are shown.

X \_\_\_\_\_

