

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

1. File Number: 33705	2. Status Change Date: 7-15-2024	3. Change Num: C1	4. Field Office: 4	5. GMD: 3
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: 6/27/2024
8a. Applicant(s) New to system <input type="checkbox"/> IVAN H & NORMA J JANTZ TRUST 203 BETHEL ST MONTEZUMA, KS 67867		8c. Landowner(s) New to system <input type="checkbox"/> MICHAEL S & JANA E ESAU 4706 CC RD COPELAND, KS 67837		
8b. Landowner(s) New to system <input type="checkbox"/>		8d. WUC New to system <input type="checkbox"/>		
9. Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: 12/31/2024 <input checked="" type="checkbox"/> N & P Date to Comply: 3/1/2025				
<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 type="checkbox"/> H & E Letter <input type="checkbox"/> Conservation Plan Date Required: _____ Date Approved: _____ Date to Comply: _____				
10. Use Made of Water From: _____ To: _____				
<div style="display: flex; justify-content: space-between;"> DEED ATTACHED Date Prepared: 7/15/2024 By: MAM </div> <div style="display: flex; justify-content: space-between;"> Date Entered: _____ By: _____ </div>				

File No. **33705** 11. County: **GY** 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 9150
ENT SESESW 28 28S 30W 75 3150 820 256 820 256 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				
CHK 118																									

Base Acres: **128** 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

July 15, 2024

IVAN H & NORMA J JANTZ TRUST
203 BETHEL ST
MONTEZUMA, KS 67867

RE: Field Office Application for Change
Water Right, File No. 33705

Dear Sir:

Enclosed is an 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 these approvals 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 note the additional condition of the limit of depth of well.

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 "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM:
Enclosures

pc: Michael S. & Janae Esau

CERTIFICATE OF SERVICE

On this 15th day of July 2024, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File Nos. 33,705 dated 15th day of July 2024 was mailed postage prepaid, first class, US mail to the following:

IVAN H & NORMA J JANTZ TRUST
203 BETHEL ST
MONTEZUMA, KS 67867

pc:

MICHAEL S & JANA E ESAU
4706 CC RD
COPELAND, KS 67837

GMD3

A handwritten signature in blue ink that reads "Julie Jones". The signature is written in a cursive style and is positioned above a horizontal line.

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. 33705

RECEIVED
 1:40 pm
 JUN 27 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: Ivan & Norma Jantz

203 Bethel St Montezuma KS 67867

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: Michael S & Janae Esau

4706 CC Rd Copeland KS 67837

Phone Number: (620) 846-0625 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 CGT Fee \$ 200.00 TR # _____ Receipt Date 6-27-24 Check # 1204

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ NC _____ Quarter of the _____ SW _____ Quarter
 of Section _____ 28 _____, Township _____ 28 _____ South, Range _____ 30 _____ W,
 in Gray _____ County, Kansas, _____ 1335 _____ feet North _____ 3970 _____ feet West of Southeast corner of section.
 Authorized Rate _____ 820 GPM _____ Authorized Quantity _____ 256 AF _____ Depth of well _____ 315 _____ (feet)
(DWR use only: Computer ID No. 1 _____ 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 _____ SE _____ Quarter of the _____ SE _____ Quarter of the _____ SW _____ Quarter
 of Section _____ 28 _____, Township _____ 28 _____ South, Range _____ 30 _____ W,
 in Gray _____ County, Kansas, _____ 75 _____ feet North _____ 3150 _____ feet West of Southeast corner of section.
 Proposed Rate _____ No change _____ Proposed Quantity _____ No change _____ Proposed well depth (feet) _____ 520 _____
 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 _____ (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?

 As soon as possible

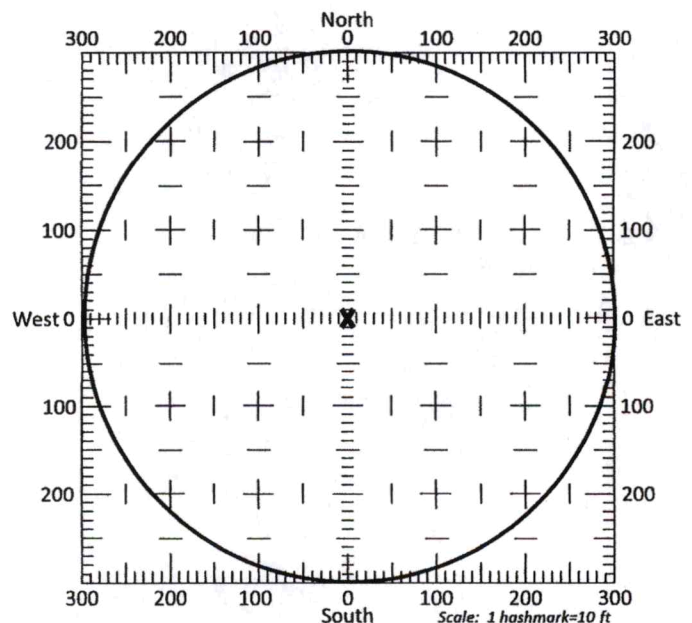
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 Plug/cap
 (b) When will this be done? As soon as possible

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by PE-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 6-27-24, Kansas, this 27th day of June, 2024.

Ronnie Jantz POA

(Owner)

(Spouse)

Ronnie Jantz POA

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas }
County of Linn } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 27th day of June, 2024.



Aaron Holsted

Notary Public

My Commission Expires

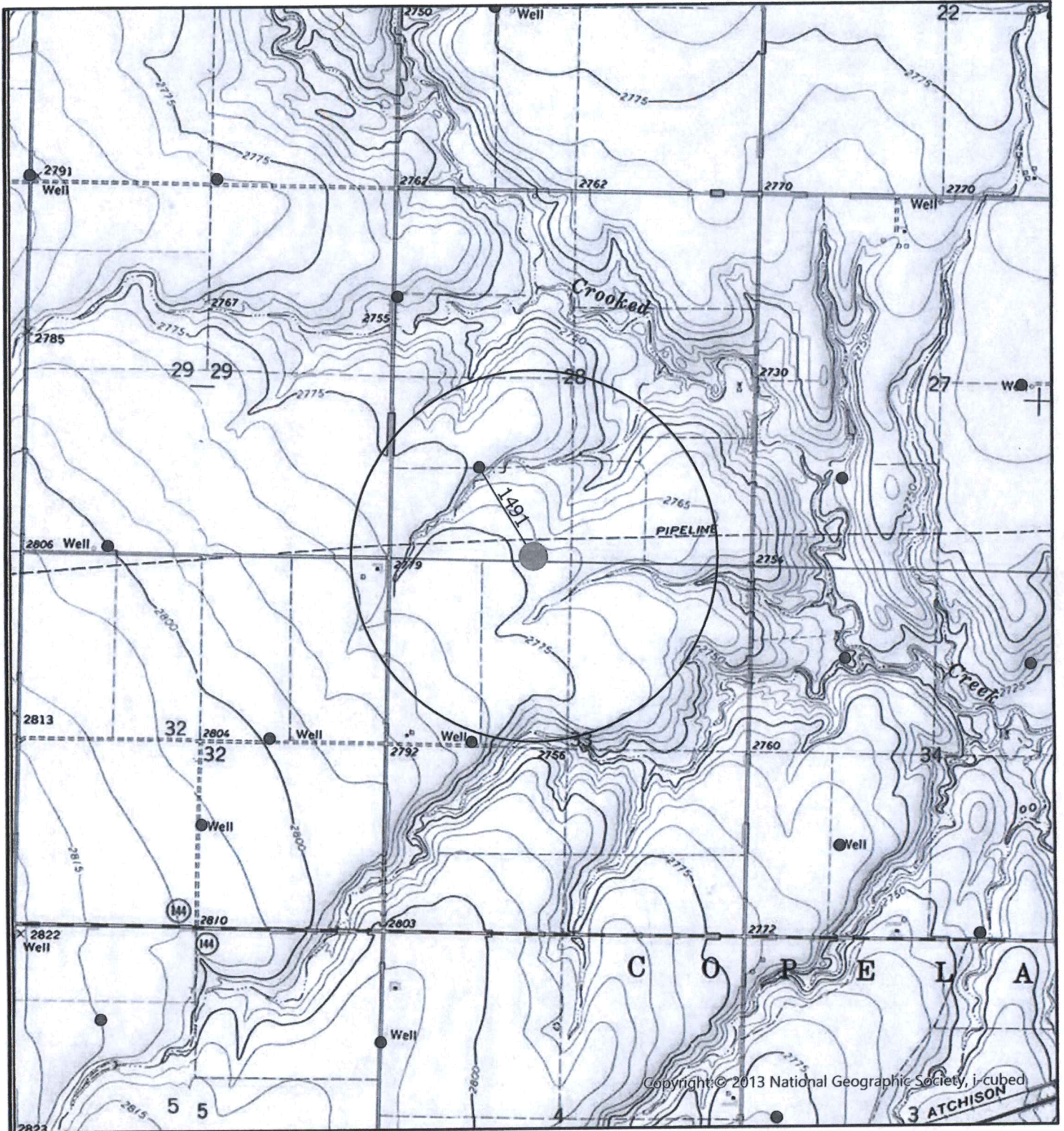
ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, all of the applicable portions of the application form must be completed with accurate information; maps, if necessary, must be included; signatures of all the appropriate owners' must be affixed to the application and notarized; and the appropriate 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

WR #33705
Change in Point of Diversion



1/2 Mile from Proposed Well



Existing Well

All wells within 1/2 mile are shown.



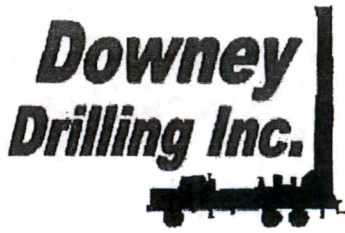
Proposed Well

X _____



WELL LOG

DATE: 6/24/2024



CUSTOMER NAME: IVAN & NORMA JANTZ

TH#2-24

LEGAL: SW 28-28S-30W

COUNTY: GRAY CO, KS

GPS: 37.576874

-100.608668

DRILLER: DIEGO

WO: 23-988

V	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
0	3		TOP SOIL	SOFT	DARK BROWN	FAST		SMOOTH
3	10		BROWN SILTY CLAY	SOFT	BROWN	FAST		SMOOTH
10	16		CALICHE	FIRM	WHITE	FAST		CHOPPY
16	61		SANDY CLAY	SOFT	BROWN	FAST		SMOOTH
61	74		SANDY CLAY W/ FINE SAND	SOFT	BROWN	FAST		SMOOTH & VIBRATION
74	79		FINE-MED SAND	SOFT		FAST		CHOPPY
79	84		SANDY CLAY	SOFT	BROWN	FAST		SMOOTH
84	97		FINE-MED SAND W/ SANDY CLAY	SOFT	TAN	FAST		CHOPPY & SMOOTH
97	111		SANDY CLAY	SOFT		FAST		SMOOTH
111	119		FINE SAND W/ SANDY CLAY	SOFT	TAN	FAST		VIBRATION & SMOOTH
119	129		FINE-MED-COARSE SAND	SOFT		FAST		FAST CHATTER
129	151		FINE-MED-COARSE SAND W/ FINE GRAVEL	FIRM		FAST		CHATTER
151	159		SANDY CLAY	SOFT	BROWN	FAST		SMOOTH
159	170		FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
170	180		FINE GRAVEL W/ FINE-MED-COARSE SAND	STIFF		FAST		CHATTER
180	185		BROWN CLAY	SOFT	BROWN	FAST		SMOOTH
185	196		FINE-MED-COARSE SAND W/ FINE GRAVEL	FIRM		FAST		FAST CHATTER
196	201		BROWN CLAY	SOFT	BROWN	FAST		SMOOTH
201	299		FINE-MED-COARSE SAND W/ FINE GRAVEL	FIRM		FAST		FAST CHATTER
299	305		SANDY CLAY	SOFT	BROWN	FAST		SMOOTH
305	316		FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
316	324		SANDY CLAY	SOFT	TAN	FAST		SMOOTH
324	329		FINE-MED-COARSE SAND	FIRM		FAST		FAST CHATTER
329	352		SANDY CLAY W/ FINE SAND	SOFT	TAN	FAST		SMOOTH & VIBRATION
352	357		WHITE SANDY CLAY W/ FINE SAND	SOFT	WHITE	FAST		SMOOTH & VIBRATION
357	365		LIME ROCK	STIFF	WHITE	SLOW		CHATTER
365	372		FINE SAND	SOFT		FAST		VIBRATION
372	390		FINE-MED-COARSE SAND W/ LIME ROCK		WHITE	FAST		FAST CHATTER
390	410		FINE-MED SAND W/ BROWN ROCK (BIG DRINK)		BROWN	FAST		FAST CHATTER
410	420		BROWN ROCK W/ FINE-MED-COARSE SAND	STIFF	BROWN	FAST		CHATTER
420	426		BROWN SILTY CLAY W/ FINE SAND	SOFT	BROWN	FAST		SMOOTH & VIBRATION
426	429		BROWN ROCK W/ FINE SAND	FIRM	BROWN	FAST		FAST CHATTER
429	449		BLUE CLAY W/ BROWN SILTY CLAY & FINE SAND TRACE	SOFT	BLUE & BROWN	FAST		SMOOTH
449	481		BLUE CLAY	SOFT	BLUE	SLOW		SMOOTH
481	495		SANDSTONE W/ FINE SAND & IRON PYRITE	HARD		SLOW	X	CHATTER



Century GEOPHYSICAL CORP.

IVAN & NORMA JANTZ

COMPANY : DOWNEY DRILLING INC
WELL : IVAN & NORMA JANT
LOCATION/FIELD : TH#2-24
COUNTY : GRAY
LOCATION : SWSAS
SECTION : 28

OTHER SERVICES:

TOWNSHIP : 28 RANGE : 30W

DATE : 06/24/24
DEPTH DRILLER : 520
LOG BOTTOM : 518.80
LOG TOP : 0.90

PERMANENT DATUM : GL

KB :

LOG MEASURED FROM: GL

DF :

DRL MEASURED FROM: GL

GL : 2820

CASING DIAMETER : 10.
CASING TYPE : SURFACE
CASING THICKNESS:

LOGGING UNIT : 2310
FIELD OFFICE : O'DRISCOL
RECORDED BY : DIEGO

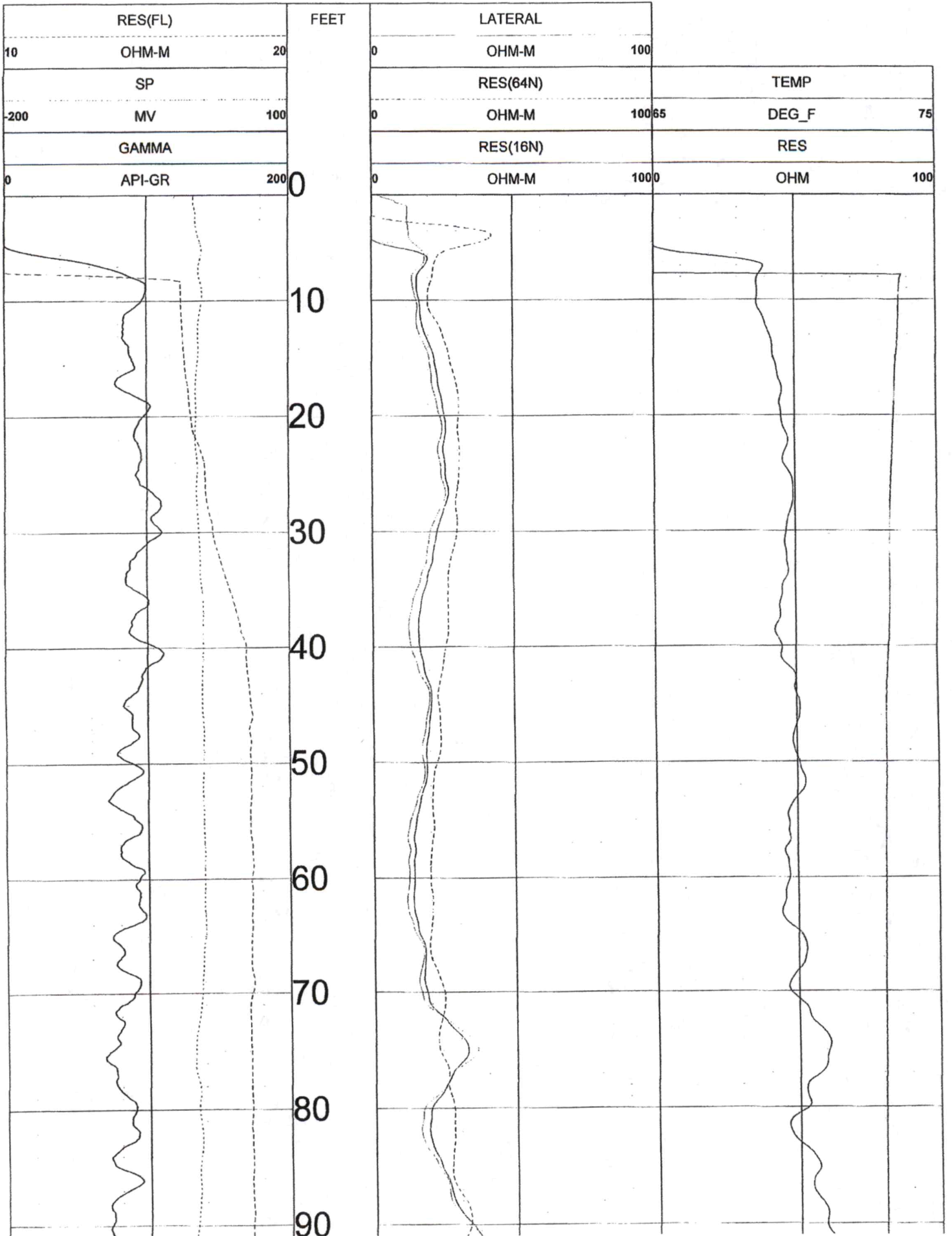
BIT SIZE : 6.25
MAGNETIC DECL. : 0
MATRIX DENSITY : 2.71
NEUTRON MATRIX : LIMESTON

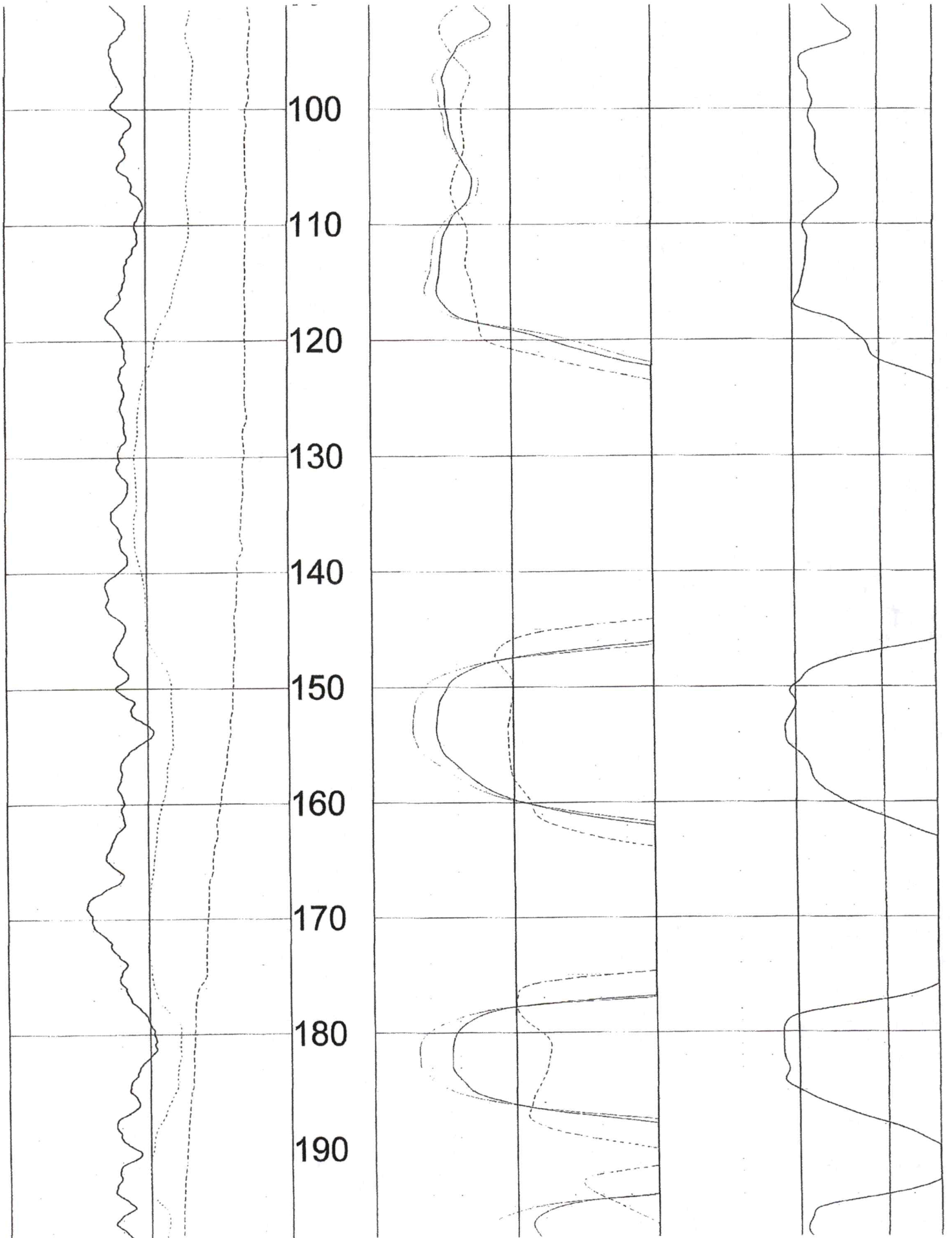
BOREHOLE FLUID : MUD
RM : .179
RM TEMPERATURE : 68.5
MATRIX DELTA T : 49

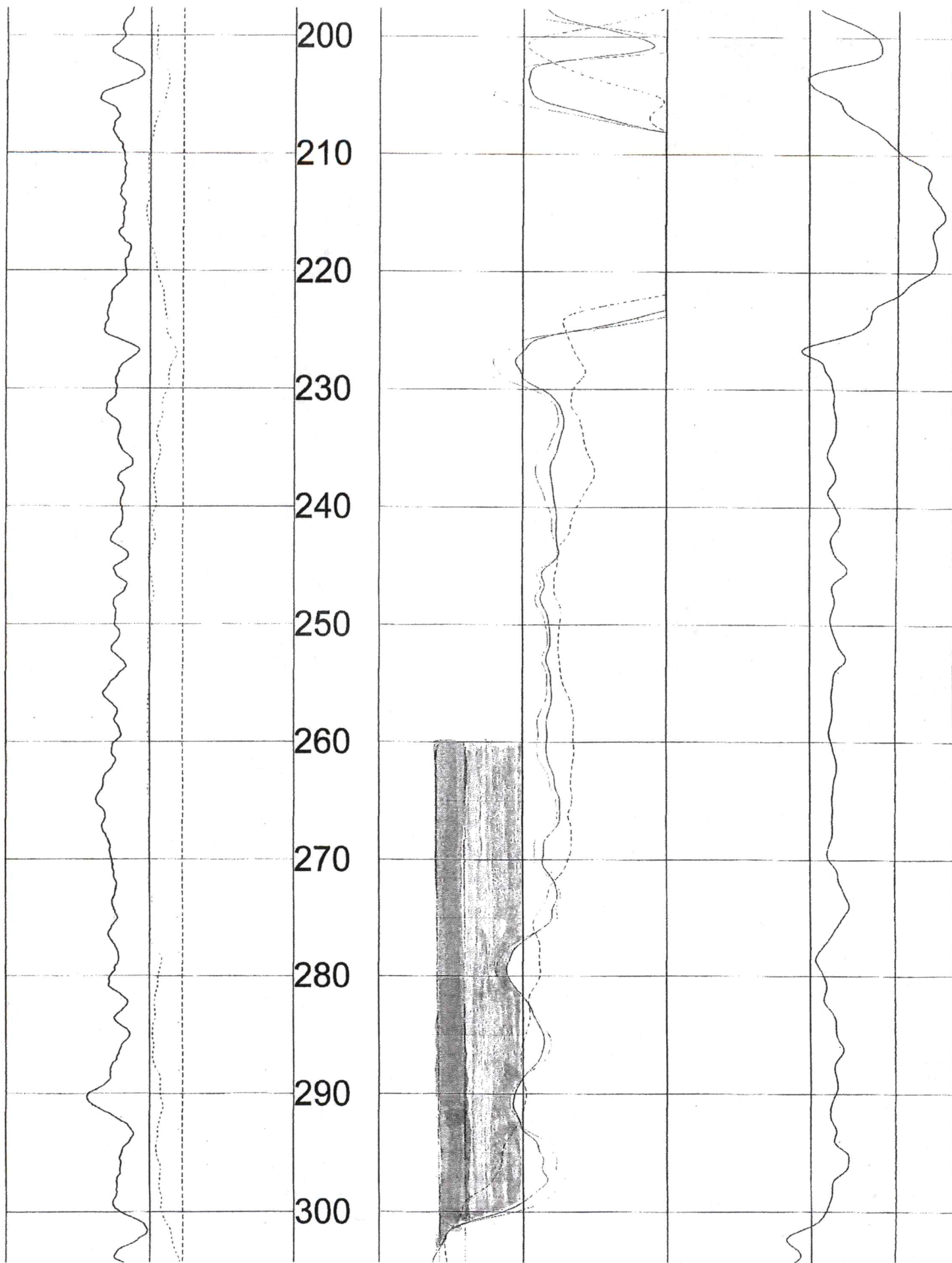
FILE : ORIGINAL
TYPE : 8144A
LGDATE: 06/24/24
LGTIME : 16:01:
THRESH: 99999

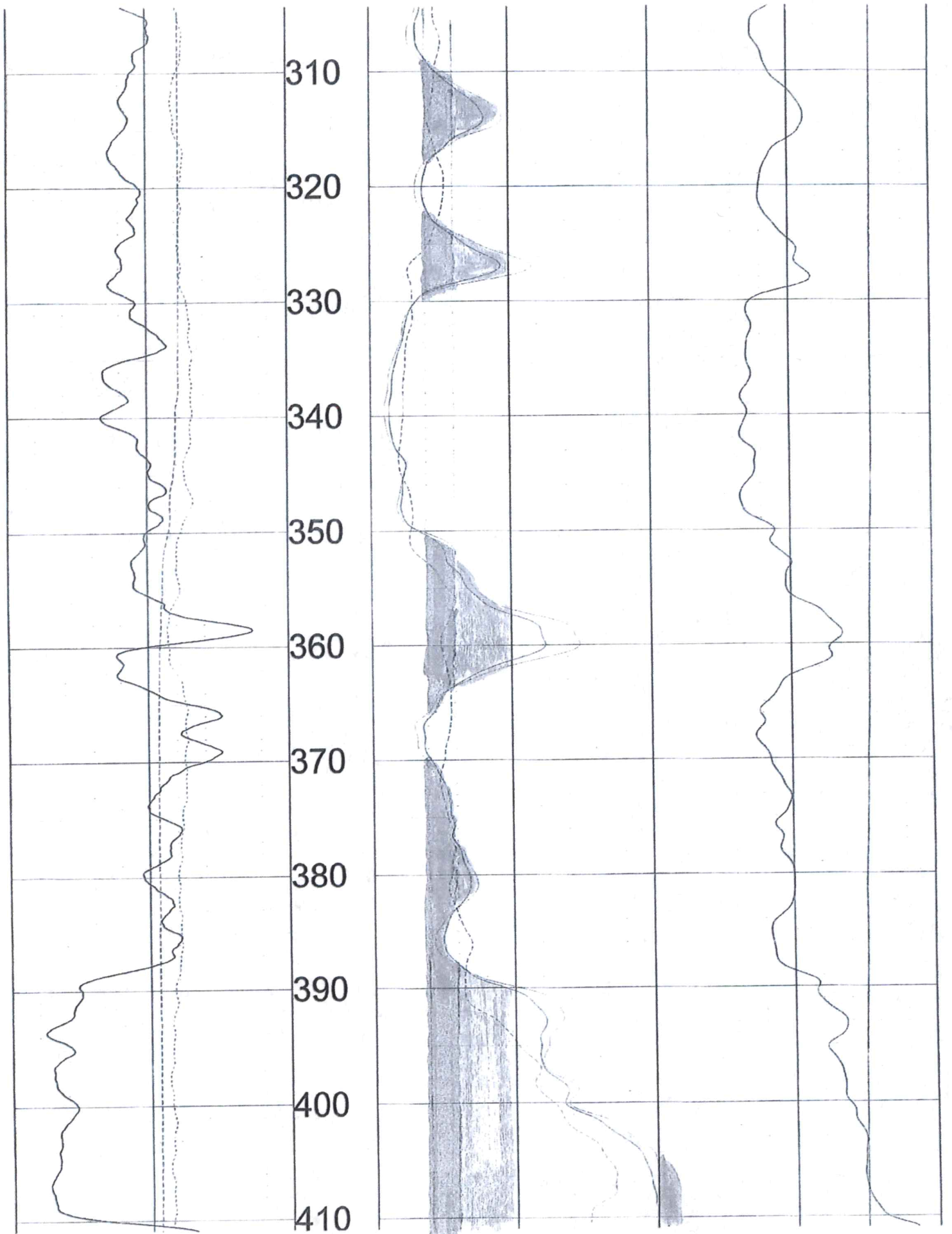
GPS 37.576874 -100.60866

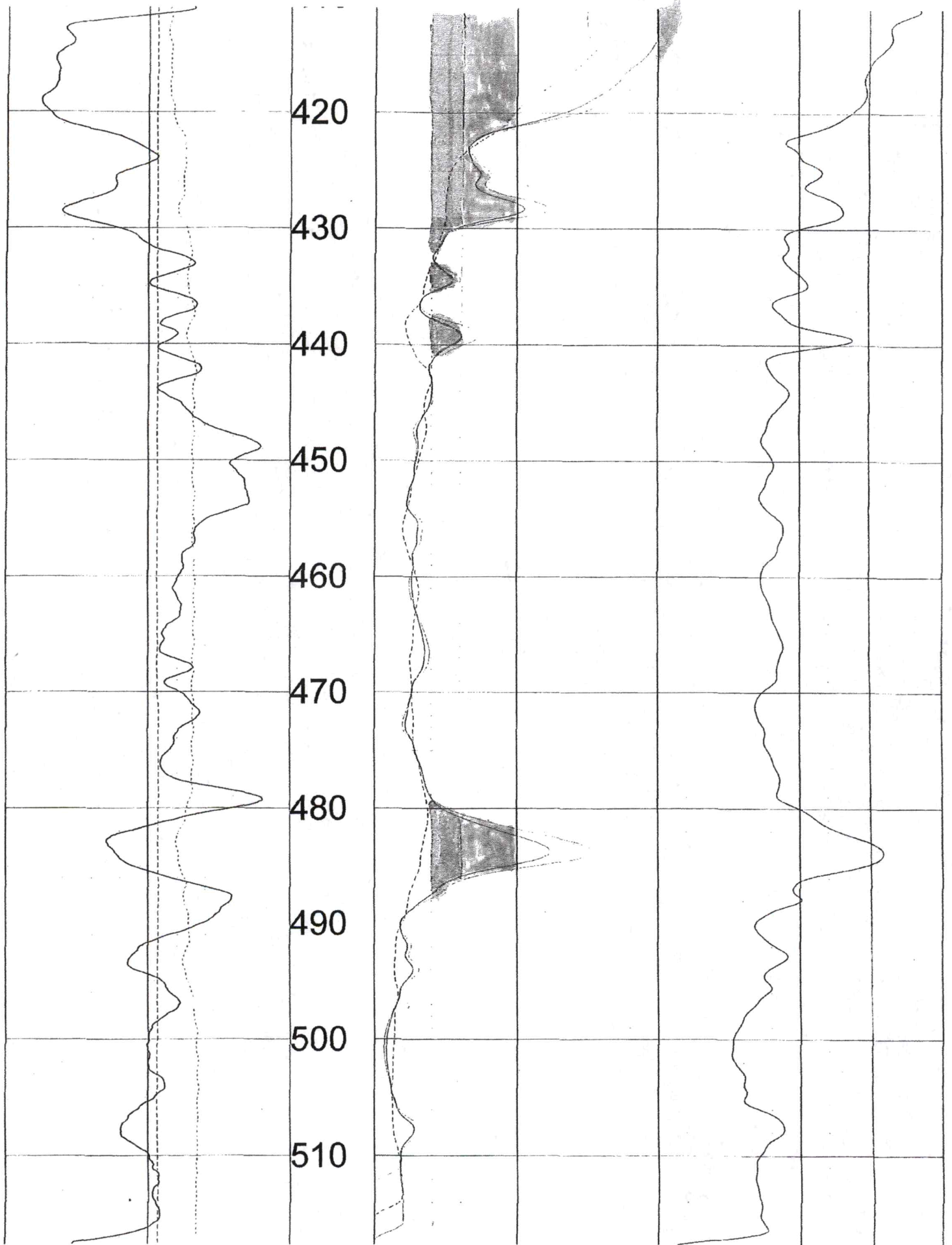
ALL SERVICES PROVIDED SUBJECT TO STANDARD TERMS AND CONDITIONS











0	API-GR	200
	GAMMA	
-200	MV	100
	SP	
10	OHM-M	20
	RES(FL)	

520

FEET

0	OHM-M	1000
	RES(16N)	
0	OHM-M	10065
	RES(64N)	
0	OHM-M	100
	LATERAL	

	OHM	100
	RES	
	DEG_F	75
	TEMP	

TOOL CALIBRATION IVAN & NORMA JANTZ 06/24/24 16:01
 TOOL 8144A TM VERSION 3002
 SERIAL NUMBER 365

	DATE	TIME	SENSOR	STANDARD	RESPONSE		
1	Feb08,18	07:51:35	GAMMA	1.000	[API-GR]	4.000	[CPS]
	Feb08,18	07:51:35	GAMMA	340.000	[API-GR]	290.000	[CPS]
2	Jul12,17	13:24:17	RES(FL)	1.330	[OHM-M]	7595.000	[CPS]
	Jul12,17	13:24:17	RES(FL)	42.700	[OHM-M]	64820.000	[CPS]
3	Jan14,22	08:32:51	SP	0.000	[MV]	327788.000	[CPS]
	Jan14,22	08:32:51	SP	381.500	[MV]	164650.000	[CPS]
4	Jan14,22	08:33:01	RES(16N)	0.000	[OHM-M]	3453.000	[CPS]
	Jan14,22	08:33:01	RES(16N)	1951.500	[OHM-M]	448089.000	[CPS]
5	Jan14,22	08:33:10	RES(64N)	0.000	[OHM-M]	3163.000	[CPS]
	Jan14,22	08:33:10	RES(64N)	1994.000	[OHM-M]	449170.000	[CPS]
6	Jul12,17	13:17:49	TEMP	33.400	[DEG_F]	66910.000	[CPS]
	Jul12,17	13:17:49	TEMP	102.200	[DEG_F]	270930.000	[CPS]
7	Jan14,22	08:33:36	RES	0.000	[OHM]	21285.000	[CPS]
	Jan14,22	08:33:36	RES	944.000	[OHM]	190148.000	[CPS]

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JUN 27 2024

Garden City Field Office
Division of Water Resources

GENERAL DURABLE POWER OF ATTORNEY

**FOR BUSINESS AND FINANCIAL MATTERS
AND HEALTH CARE DECISIONS**

I, **NORMA J. JANTZ**, a resident of Gray County, Kansas, do hereby revoke any and all prior powers of attorney which I may have executed, and I do hereby appoint my son, **RONNIE JANTZ**, and my son-in-law, **STANLEY J. KOEHN**, with **either one alone to be able to sign for me on my behalf**, as my attorneys in fact to act and sign for me in my name and stead in all matters, including but not limited to the powers specially designated herein:

BUSINESS AND FINANCIAL MATTERS

1. To transact all of my business at any bank or other financial institution in which I may have deposited or may hereafter deposit or have deposited for me, any funds; to have access to my safety deposit box; to draw checks on my account in said bank or other financial institution; to endorse all checks, drafts and bills of exchange, securities, bonds, or other documents which may require my endorsement for collection or deposit; to waive demand, notice, and notice of protest thereon; and to open, remove from, and add to, items in a bank safety deposit box on my behalf.

2. To prepare, execute, and file both federal and state income tax returns, or amendments thereto, and any claims for refund, or to make any report required by governmental agencies; to contract with and make claims to any governmental organization or private company with regard to medical or retirement related matters; to pay insurance premiums, purchase new insurance policies, cancel insurance policies and collect any refunds therefrom.

3. To open or maintain accounts with stockbrokers; to purchase and sell stocks, bonds, certificates, and all securities of whatever nature or kind; to act as my proxy in connection with any shares of corporate stock or other securities, including any government bonds and partnership interests belonging to me; and to buy, sell, endorse, or transfer shares of stock, bonds, or other securities.

4. To carry on any business transaction of any kind in which I am now or hereafter may become interested, including acting in any capacity I may have as sole proprietor, partner, shareholder, officer, director, LLC member, joint venture LLC member, or joint venturer.

5. To execute any instruments of any kind and involving any property or transactions or rights in which I am now or may hereafter become involved or in which I may have any rights or interests of any kind.

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JUN 27 2024

Garden City Field Office
Division of Water Resources

6. To purchase, rent, lease, manage, or otherwise acquire any interest in real or personal property in my name; to sell, assign, and convey property standing in my name or which I may now or hereafter own, at market value; and to invest and reinvest the proceeds from such sales or deposit such proceeds in my account in any bank or financial institution in which I may have or may deposit funds.

7. To sell, convey, exchange, lease, rent, mortgage or encumber any and all personal and real property, including any and all securities, now or hereafter owned by me or any interest in any such property as I may have, and including any real estate which is my homestead; and in my name to make, execute, acknowledge and deliver good and sufficient deeds, leases, mortgages, bills of sale and other conveyances of the same.

8. To operate my farm property with hired labor, tenants, or a farm management service; to supervise the farming operations; to lease or rent my land for cash or on shares; to sell, purchase, exchange, or otherwise acquire or dispose of all farm products, or other proceeds from the land; and to pay on my behalf or charge to me fertilizer, chemicals, or other farm related expenses.

9. To execute contracts, notes, chattel mortgages, and other agreements relating to agriculture with the Commodity Credit Corporation, the Secretary of Agriculture, the Consolidated Farm Services Agency, or any other officer or agency of the federal or state government, or of any corporation organized under them; to enter into acreage reduction agreements; to make soil conservation commitments; and in general, to do all acts necessary to cooperate with any governmental agricultural program and to participate in and receive all payments and other benefits and proceeds under any such programs.

10. To lease my property for oil, gas, or other minerals upon such conditions as may be customary in the community, regardless of whether the term of such lease may extend beyond the termination of this power of attorney.

11. To transfer any interests in property I may own to a revocable or living trust created by me, which trust benefits me during my life, but not to revoke or withdraw property from such trust.

HEALTH CARE DECISIONS

12. To consent, refuse consent, or withdraw consent to any care, treatment, service or procedure to maintain, diagnose, or treat a physical or mental condition, and to make decisions about organ donations, autopsy, and disposition of the body.

13. To make all necessary arrangements at any hospital, psychiatric hospital or psychiatric treatment facility, hospice, nursing home or similar institution; to employ or discharge health care personnel to include physicians, psychiatrists, psychologists, dentists, nurses, therapists or any other person who is licensed, certified or otherwise authorized or

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JUN 27 2024

Garden City Field Office
Division of Water Resources

permitted by the laws of this state to administer health care as the agent shall deem necessary for my physical, mental, and emotional well being.

14. To request, receive, and review any information, verbal or written, regarding my personal affairs or physical or mental health including medical and hospital records and to execute any releases of other documents that may be required in order to obtain such information.

I HEREBY GIVE AND GRANT unto my said attorney in fact herein named full power and authority to do and perform all and every lawful act and thing whatsoever that may be necessary to be done, as fully and to all intents and purposes as I might or could do if personally present, and hereby ratify and confirm all that my attorney shall lawfully do, or cause to be done hereunder.

THIS IS A DURABLE POWER OF ATTORNEY and the authority of my attorney in fact shall not terminate if I become disabled or incapacitated or in the event of later uncertainty as to whether I am dead or alive.

IN WITNESS WHEREOF, I have hereunto set my hand this 19 day of July, 2018.

Norma J. Jantz
Norma J. Jantz

STATE OF KANSAS)

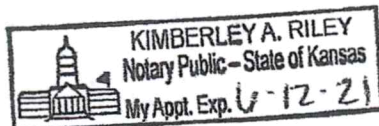
COUNTY OF Gray)

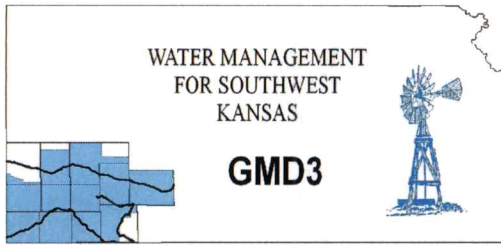
BE IT REMEMBERED, that on this 19th day of July, 2018, before me, the undersigned, a notary public in and for the county and state aforesaid, came **Norma J. Jantz** who is known to me to be the same person who executed the within instrument of writing, and such person duly acknowledged the execution of the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal, the day and year last above written.

Kimberly A. Riley
Notary Public

My Term Expires:





Southwest Kansas
Groundwater Management District No. 3
2009 E. Spruce Street
Garden City, Kansas 67846
(620) 275-7147 phone
www.gmd3.org

July 15, 2024

Michael A. Meyer
Division of Water Resources
4532 W Jones Ave., Suite B
Garden City, Kansas 67846

RE: Application for Change in Point of Diversion
Water Right, File No. 33705

Dear Mike:

RECEIVED

JUL 15 2024

Garden City Field Office
Division of Water Resources

We have completed a review of the application for the above referenced water right. The proposed change in point of diversion is in accordance with current area rules, K.A.R. 5-23-3, as it pertains to minimum spacing to neighboring wells and distance moved.

Well evaluations were conducted to estimate possible effects of the proposal on the supply of other wells with water rights prior to the proposal per K.S.A. 82a-708b, and the management program. Under K.S.A. 82a-708b, an applicant requesting a change in point of diversion must demonstrate to the chief engineer that any proposed change is reasonable and will not impair. The enclosed report is an analysis performed by the GMD on behalf of our membership. Under this analysis, the proposed change is considered to be reasonable and unlikely to impair if either the net in-season well-to-well effect of the proposed change is less than a strict maximum allowable threshold (3.5 ft with saturated thickness is between 150-200ft), or if no well with a net well-to-well effect exceeding the threshold is identified as critical. Critical wells are identified as wells that are expected to either lose or greatly diminish water supply over the next 25 years. The attached review information is based on a Theis analysis using inputs from the GMD3 aquifer model, which is considered to be the best information on well and aquifer data readily and easily available to the public. If either the applicant or the neighbors believe they have better data that might change the result of the analysis, they should contact GMD3. Conclusions of the well analysis may change if better information on well and aquifer data can be made available.

Every neighboring well within 1 mile of the proposed move was evaluated. Evaluations showed that none of the neighboring wells exceeded the net effect above the maximum allowable threshold and needed no further evaluation. No critical wells were determined. Therefore, GMD3 sees these moves as meeting current rules and would recommend approval with better information given to ensure that neighboring wells are not adversely affected. If aquifer conditions change or there is a change to the water right in the future, we would be happy to evaluate the effects at that time.

Thank you for the opportunity to review the applications and to provide a recommendation. If you have any questions, please don't hesitate to contact us.

Sincerely,

Jason L. Norquest
Assistant Manager

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 28, 2024

SOUTHWEST KANSAS GROUNDWATER
MANAGEMENT DISTRICT NO. 3
2009 E SPRUCE ST
GARDEN CITY KS 67846

Re: Request for Recommendation
Water Right, File No. 33705

Dear Mr. Norquest:

This is to advise you that Ronnie Jantz has filed applications for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the point of diversion.

We are delaying action on the change applications to allow you time to review and provide a recommendation. Please submit a recommendation within 15 days from the date of this letter.

Thank you and as always feel free to contact this office at any time.

Sincerely,

A handwritten signature in blue ink that reads "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM
Enclosures