

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. 22969

RECEIVED
 10:35 AM
 MAR 26 2025

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: NOBLE DAIRY LLC

3705 F ROAD GARDEN CITY KS 67846

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: SAME

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 \$ 200.00 TR # _____ Receipt Date 3-26-25 Check # 015206

5. **Presently authorized point of diversion:**
 One in the CW Quarter of the SW Quarter of the SE Quarter of Section 4, Township 26 South, Range 32 W, in FI County, Kansas, 650 feet North 2630 feet West of Southeast corner of section. Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
 (DWR use only: Computer ID No. 03 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 NE Quarter of the NE Quarter of Section 9, Township 26 South, Range 32 W, in FI County, Kansas, 5206 feet North 1000 feet West of Southeast corner of section. Proposed Rate _____ Proposed Quantity _____ Proposed well depth (feet) 550.
 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) LOSS PRODUCTION

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

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

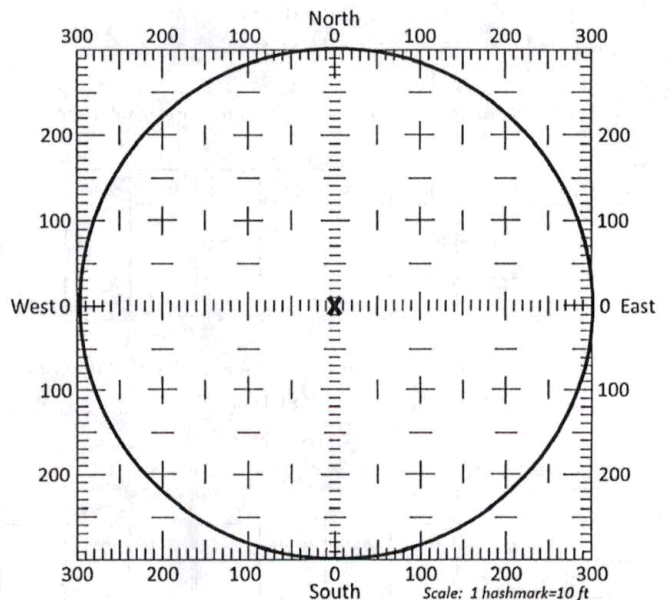
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

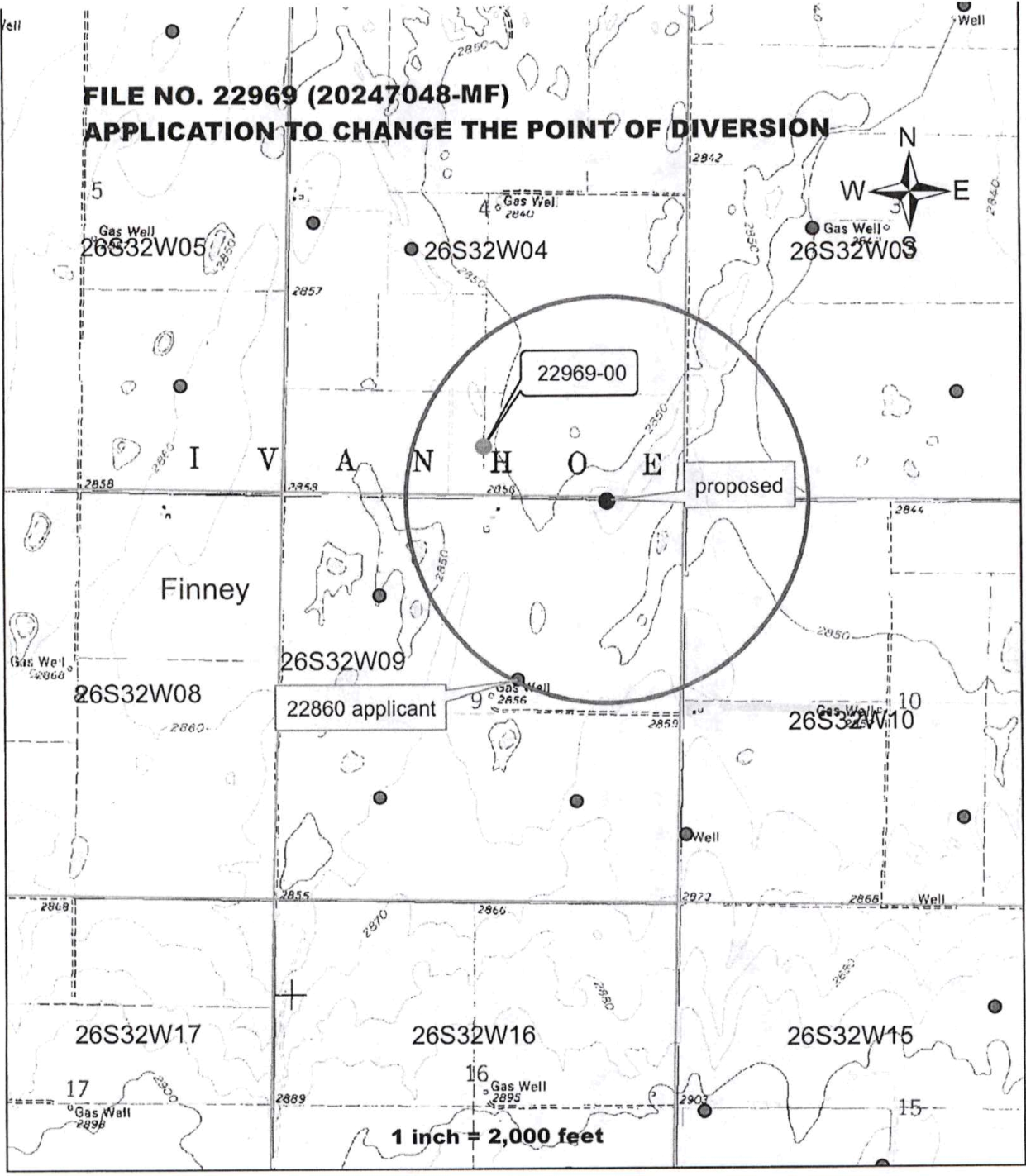
12. Assisted by MM/GCFO

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.)

FILE NO. 22969 (20247048-MF)
APPLICATION TO CHANGE THE POINT OF DIVERSION



22969-00

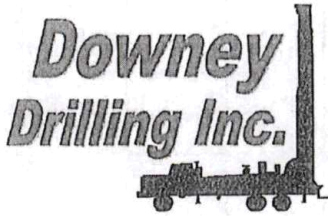
proposed

22860 applicant

1 inch = 2,000 feet

WELL LOG

DATE: 3/18/2025



TH # 2

CUSTOMER NAME: NOBLE DIARY

LEGAL: NE 9-26S-32W

COUNTY: FINNEY CO, KS

GPS: 37.809456

100.819621

DRILLER: ROCKY

WO: 24-1473

TW	FROM	TO	TYPE	HARDNESS	COLOR	SPEED	PULL DOWN	OTHER / DRILLING ACTION
0	2		TOPSOIL	SOFT	BROWN	FAST	NO	SMOOTH
2	6		BROWN SILTY CLAY	SOFT	BROWN	FAST	NO	SMOOTH
6	11		FINE SAND	SOFT	BROWN	FAST	NO	SMOOTH
11	25		BROWN SILTY CLAY	SOFT	BROWN	FAST	NO	SMOOTH
25	32		BROWN CLAY	SOFT	BROWN	FAST	NO	SMOOTH
32	53		FINE - MEDIUM - COURSE SAND / FINE GRAVEL	STIFF	BROWN	FAST	NO	VIBRATION
53	85		BROWN CLAY	SOFT	BROWN	SEMI SLOW	NO	SMOOTH
85	109		SNADY CLAY	SOFT	BROWN	FAST	NO	SMOOTH
109	128		FINE - MEDIUM - COURSE SAND / FINE GRAVEL	FIRM	BROWN	FAST	NO	FAST CHATTER
128	139		BROWN CLAY	SOFT	BROWN	FAST	NO	SMOOTH
139	146		FINE - MEDIUM - COURSE SAND	STIFF	BROWN	FAST	NO	VIBRATION
146	165		BLUE CLAY	SOFT	BLUE	FAST	NO	SMOOTH
165	172		FINE - MEDIUM - COURSE SAND	STIFF	BLUW TAN	FAST	NO	CHATTER
172	175		CEMENTED SAND	FIRM	/BROWN	SLOW	NO	CHATTER
175	181		BROWN CLAY	FIRM	BROWN	FAST	NO	SMOOTH
181	204		FINE - MEDIUM - COURSE SAND	STIFF	BROWN	FAST	NO	FAST CHATTER
204	244		BLUE CLAY	SOFT	BLUE	FAST	NO	SMOOTH
244	247		BROWN CLAY	SOFT	BROWN	FAST	NO	SMOOTH
247	253		FINE - MEDIUM - COURSE SAND	STIFF	BROWN	FAST	NO	FAST CHATTER
253	267		BROWN CLAY	SOFT	BROWN	FAST	NO	SMOOTH
267	273		FINE - MEDIUM - COURSE SAND	STIFF	BROWN	FAST	NO	CHOPPY
273	285		BLUE CLAY	SOFT	BLUE	FAST	NO	SMOOTH
285	291		FINE - MEDIUM - COURSE SAND	STIFF	BLUE BROWN/	FAST	NO	CHOPPY
291	299		SANDY CLAY / LIMESTONE	SOFTER	WHITE	FAST	NO	VIBRATION
299	315		FINE - MEDIUM - COURSE SAND / SANDY CLAY TRACES	SOFTER	BROWN/WHITE	FAST	NO	CHOPPY
315	331		FINE - MEDIUM - COURSE SAND	STIFF	WHITE	FAST	NO	CHOPPY
331	375		FINE - MEDIUM - COURSE SAND / FINE GRAVEL / LIMESTONE	FIRM	WHITE	FAST	NO	CHATTER
375	381		BROWN CLAY	SOFT	BROWN	FAST	NO	SMOOTH
381	395		FINE - MEDIUM - COURSE SAND	STIFF	BROWN	FAST	NO	VIBRATION
395	405		BROWN CLAY	SOFT	BROWN	FAST	NO	SMOOTH
405	452		FINE SAND / BROWN CLAY LAYERS	SOFT	BROWN	FAST	NO	SMOOTH
452	461		FINE - MEDIUM - COURSE SAND	STIFF	BROWN	FAST	NO	VIBRATION
461	501		BROWN CLAY	SOFT	BROWN	FAST	NO	SMOOTH
501	517		FINE - MEDIUM - COURSE SAND / FINE GRAVEL / LIMESTONE	STIFF	BROWN	FAST	NO	FAST CHATTER
517	550		SOAPSTONE / BROWN ROCK	STIFF	BROWN	FAST	YES	FAST CHATTER

Handwritten notes:
 230'
 FSI. SWL

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 24th day of March, 2025.

<u>[Signature]</u> (Owner) <u>Kyle S Awerhott, Manager</u> (Please Print)	_____ (Spouse)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)
_____ (Owner)	_____ (Spouse)
_____ (Please Print)	_____ (Please Print)

State of Kansas }
County of Gray } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 24th day of March, 2025.

[Signature]
Notary Public

My Commission Expires 07/22/2027.

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

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

March 28, 2025

KYLE J & KIMBERLY K LIGHTNER
3075 E PLYMELL RD
GARDEN CITY, KS 67846-8913

RE: Application for Change
Water Right, File Nos. 22969

Dear Sir or Madam:

This is to advise you that Noble Dairy has filed an application for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the point of diversion under the above referenced applications. An irrigation well is proposed to be relocated to the NE¼ of Section 9, Township 26 South, Range 32 West, Finney County.

You can find the complete applications posted by water right file number as referenced above at: <https://www.agriculture.ks.gov/divisions-programs/division-of-water-resources/water-appropriation/notices>

You are notified on this proposed point of diversion (well) so that you may furnish this office with any comments or other information you 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 contact this office. If you would prefer, you could arrange an appointment for additional assistance. Please refer to the file number when you contact us if you wish to discuss a specific file.

Sincerely,

A handwritten signature in blue ink that reads "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:

pc: