

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
 WATER METER REQUIRED**



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. 20237

RECEIVED

JAN 09 2017
 10:23am

Stafford 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: Terry Ryan

PO BOX 127, Rozel KS 67574-127

Phone Number: (620)357-5130

Email address: tctfarms@gbta.net

Name and address of Water Use Correspondent: Terry Ryan

PO BOX 127, Rozel KS 67574-127

Phone Number: (620)357-5130

Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: EUGENE W & BETTY JO HALEY // JO LYNN HALEY REV TRUST // MICHAEL W HALEY TRUST **Haley Family Trust*

ADDRESS: PO BOX 904, LAWRENCE KS 66044-0904

(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					
7	22S	19W												30				30	31.25	38	38	31.25	198.5

4. If this application is for a change in place of use, it is proposed that the place of use be changed to: **Haley Family Trust*

Owner of Land ---- NAME: EUGENE W & BETTY JO HALEY // JO LYNN HALEY REV TRUST // MICHAEL W HALEY TRUST

ADDRESS: PO BOX 904, LAWRENCE KS 66044-0904

(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					
7	22S	19W																40	40	40	40	160	

For Office Use Only: Code _____ Fee \$ 200.00 TR # _____ Receipt Date _____ Check # 1610, 2373
3395, 29007

**TJS-SFFO*

5. **Presently authorized point of diversion:**
 One in the NE Quarter of the SE Quarter of the SE Quarter of Section 7, Township 22 South, Range 19 W, in Pawnee County, Kansas, 1130 feet North 75 feet West of Southeast corner of section.
 Authorized Rate 720 GPM Authorized Quantity 150 AF Depth of well --- (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:
Proposed point of diversion: (Complete only if change is requested)
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter of Section _____, Township _____ South, Range _____ (EW), 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 _____

6. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter of Section _____, Township _____ South, Range _____ (EW), 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:
Proposed point of diversion: (Complete only if change is requested)
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter of Section _____, Township _____ South, Range _____ (EW), 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. Why do you need a new point of diversion? N/A

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

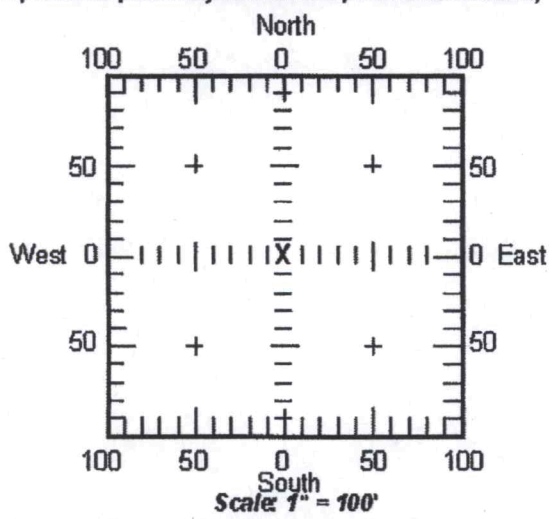
9. When do you propose to complete the new point of diversion?
N/A

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 TJS-SFFO

13a. If the proposed point of diversion will be relocated within 100 feet of the existing point of diversion, indicate its location on the diagram below in relation to the existing point of diversion. (PLEASE NOTE: The "X" in center of diagram below represents presently authorized point of diversion.)



13b. If the proposed point of diversion will be relocated more than 100 feet but within 2640 feet from 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.

14. If the proposed groundwater point of diversion is 300 or fewer feet from 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 regard 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 Lawrence, Kansas, this 5 day of January, 2017.

[Signature]
(Owner)

Michael W. Haley
(Please Print)

[Signature]
(Owner)

Jo Lynn Haley by
Michael W. Haley, POA
(Please Print)

[Signature]
(Owner)

Betty Jo Haley by
Michael W. Haley, POA
(Please Print)

[Signature]
(Spouse)

Haley Family Trust by
Michael W. Haley, co-trustee
(Please Print)

(Spouse)

(Please Print)

(Spouse)

(Please Print)

State of Kansas }
County of DOUGLAS } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 5 day of January, 2017.

LANNY B. FAULCONER
Notary Public - State of Kansas
My Appt Expires 9-30-18

[Signature]
Notary Public

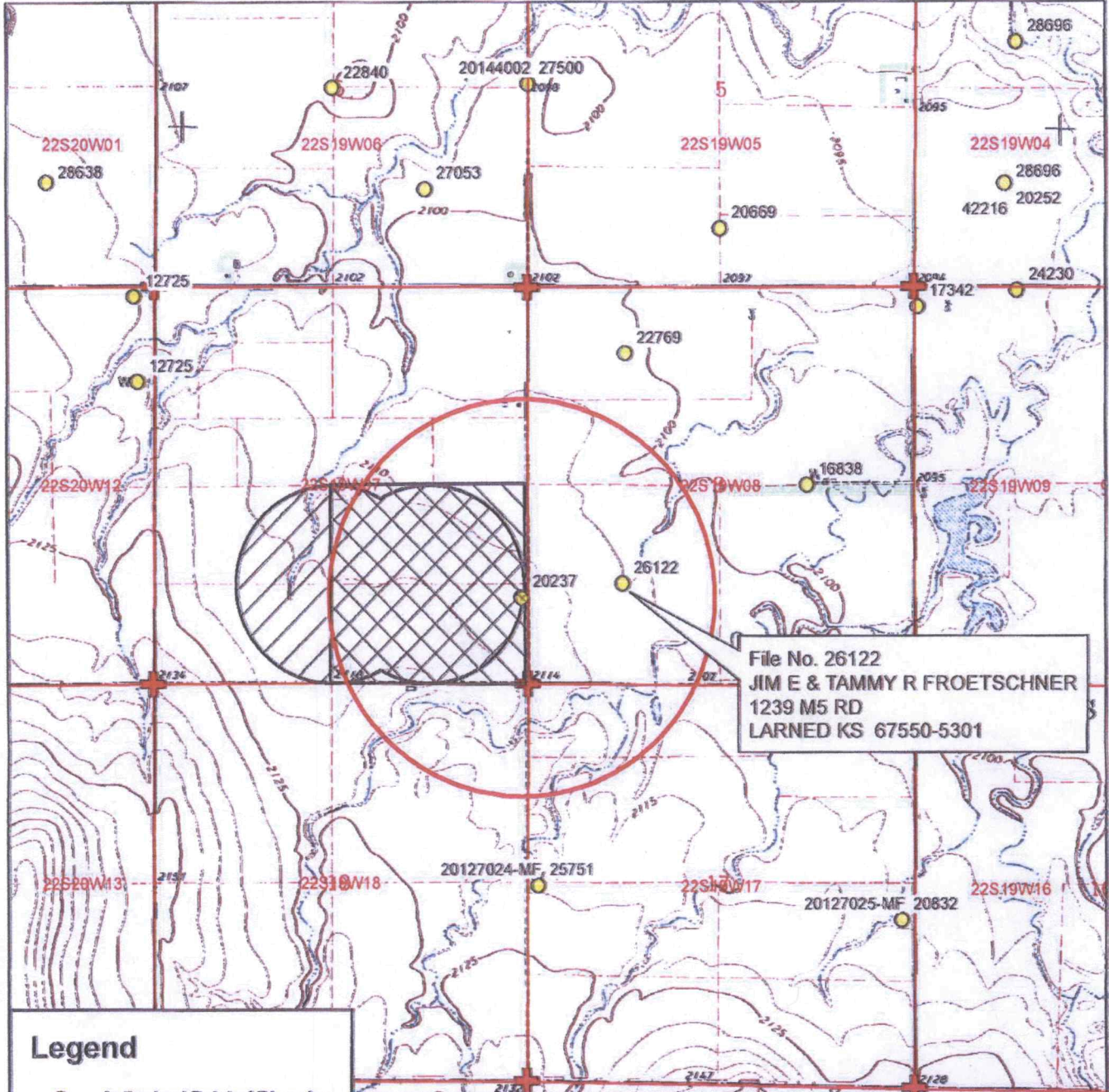
My Commission Expires 9-30-18

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



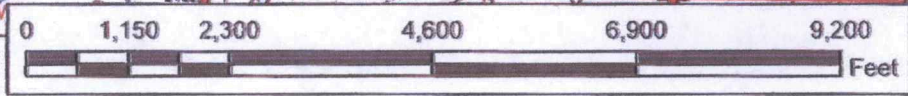
File No. 26122
 JIM E & TAMMY R FROETSCHNER
 1239 M5 RD
 LARNED KS 67550-5301

Legend

- ⊗ Authorized Point of Diversion
- Water Appropriations
- ⊕ Section Corner
- Section Line
- ★ Domestic Well
- 1/2 Mile Buffer

Place of Use

- ▨ Authorized
- ▩ Proposed

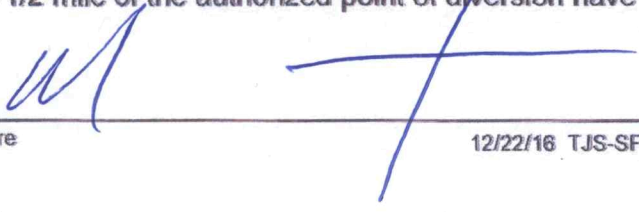


Water Right, File No. 20,237

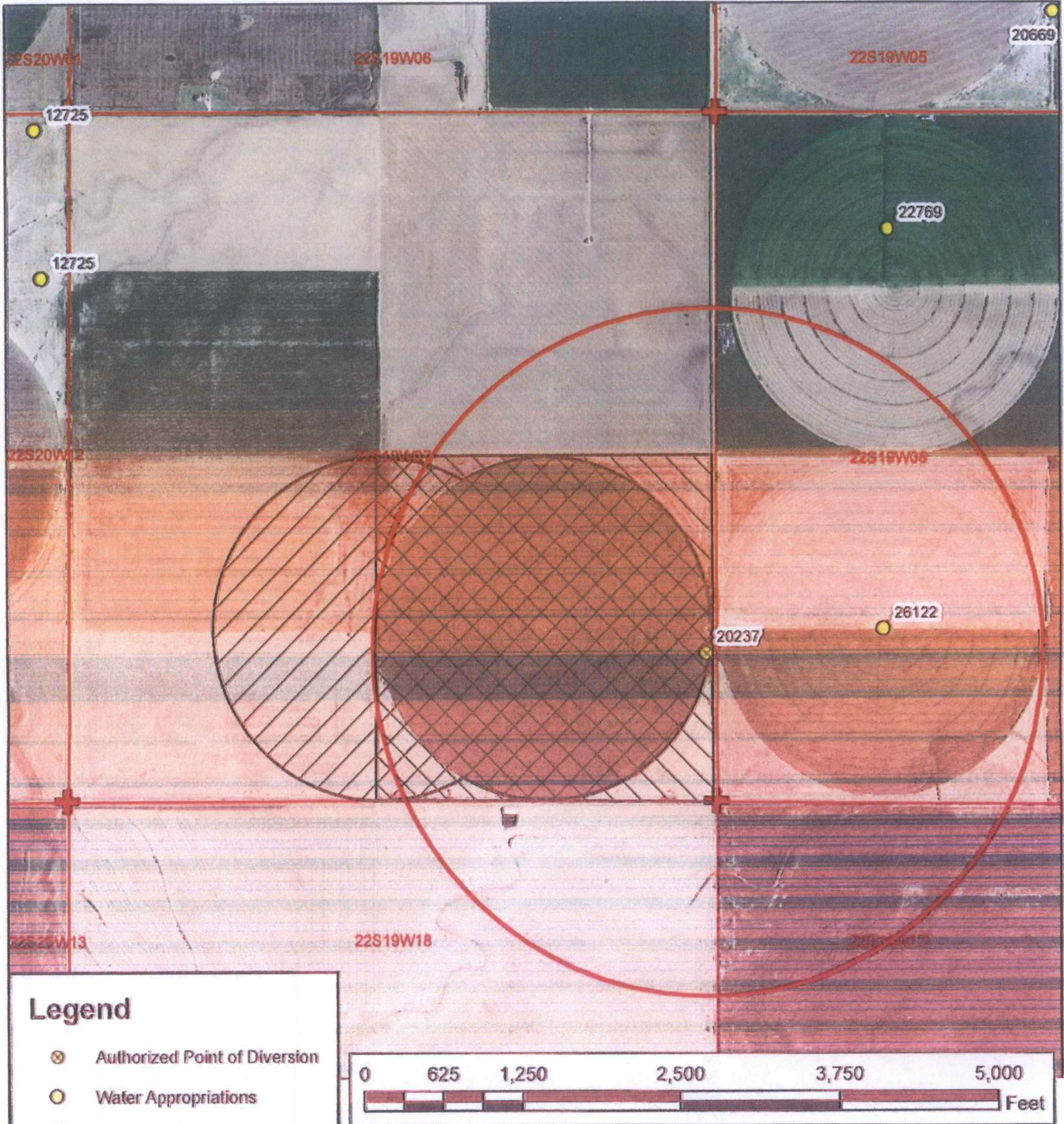
Change in Place of Use Application Map
 7-22S-19W // Pawnee County

To the best of my knowledge, all water wells including domestic, within 1/2 mile of the authorized point of diversion have been shown.



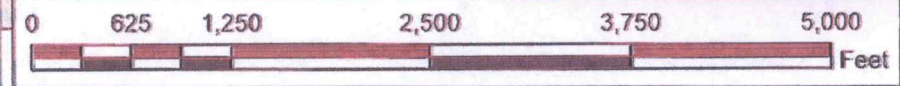
Signature 

12/22/16 TJS-SFFO 1:24,000 scale



Legend

- ⊗ Authorized Point of Diversion
- Water Appropriations
- ⊕ Section Corner
- ▭ Section Line
- ★ Domestic Well
- ▭ 1/2 Mile Buffer
- Place of Use**
- ▨ Authorized
- ▩ Proposed



Water Right, File No. 20,237
 Change in Place of Use Application Map, Aerial
 7-22S-19W // Pawnee County

