

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
RECEIVED
 2:45pm
 JAN 03 2022

WATER METER REQUIRED

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.

Stafford Field Office
 Division of Water Resources

File No. 19938

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: Carmen Schmitt

PO Box 47, Great Bend, KS 67530

Phone Number: (620)793-5100 Email address: carmen@schmittinc.net

Name and address of Water Use Correspondent: Carmen Schmitt

PO Box 47, Great Bend, KS 67530

Phone Number: (620)793-5100 Email address: carmen@schmittinc.net

3. The presently authorized place of use is:

Owner of Land ---- NAME: Carmen Schmitt

ADDRESS: PO Box 47, Great Bend, KS 67530

(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	
25	21S	14W	40	40	40	40													160

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: *Carmen Schmitt, **Debbie Schmitt

ADDRESS: PO Box 47, Great Bend, KS 67530

(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	
*25	21S	14W	0.5	31.5	35.75	0.75												1.75	70.25
**25	21S	14W					31.5	0.5	0.5	35.5	1.75								69.75
																			140

For Office Use Only: Code _____ Fee \$ _____ TR # _____ Receipt Date _____ Check # 003168

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the _____ NC NE Quarter
 of Section _____ 25 _____, Township _____ 21 _____ South, Range _____ 14 _____ W,
 in Stafford County, Kansas, 3960 feet North 1320 feet West of Southeast corner of section.
 Authorized Rate 785 gpm Authorized Quantity 195 AF Depth of well ~80 (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 _____ Quarter of the _____ Quarter of the _____ NC N2 Quarter
 of Section _____ 25 _____, Township _____ 21 _____ South, Range _____ 14 _____ W,
 in Stafford County, Kansas, 3840 feet North 2620 feet West of Southeast corner of section.
 Proposed Rate 785 gpm Proposed Quantity 195 AF Proposed well depth (feet) ~140
 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) New centralized well for the new pivot
system being installed.

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

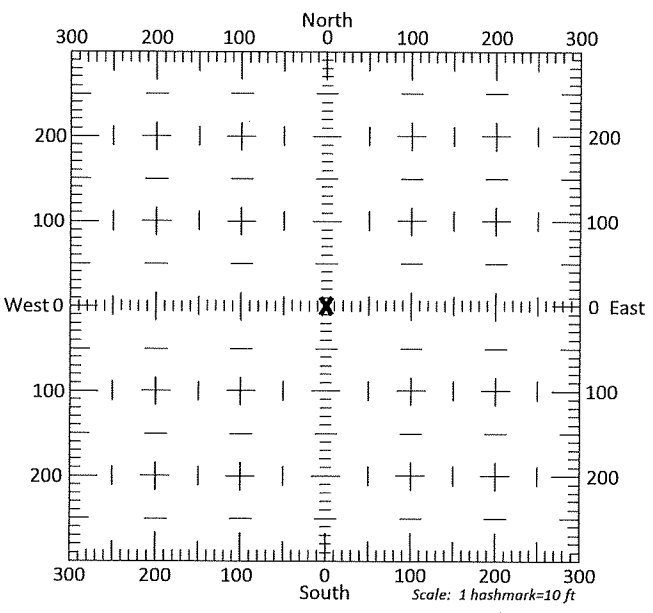
9. The change(s) (was)(will be) completed by?
As soon as possible.

10. If the point of diversion is a well:
 (a) What are you going to do with the old well?
Plug the well.
 (b) When will this be done? Upon completion of new well.

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by TMA SFFO

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 300 feet of the existing point of diversion, indicate its location on the diagram shown above in relation to the existing point of diversion. (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 Greeat Bend, Kansas, this 30 day of December, 20 21.

Carmen Schmitt
 (Owner)
Carmen Schmitt
 (Please Print)
 (Owner)
 (Please Print)
 (Owner)
 (Please Print)

Mullie Schmitt
 (Spouse)
Debbie S. Schmitt
 (Please Print)
 (Spouse)
 (Please Print)
 (Spouse)
 (Please Print)

State of Kansas }
 County of Barton } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 30 day of December, 20 21.

[Signature]
 Notary Public

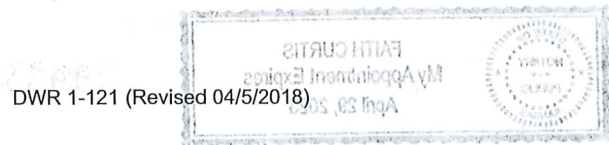
My Commission Expires 12/31/2021

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**

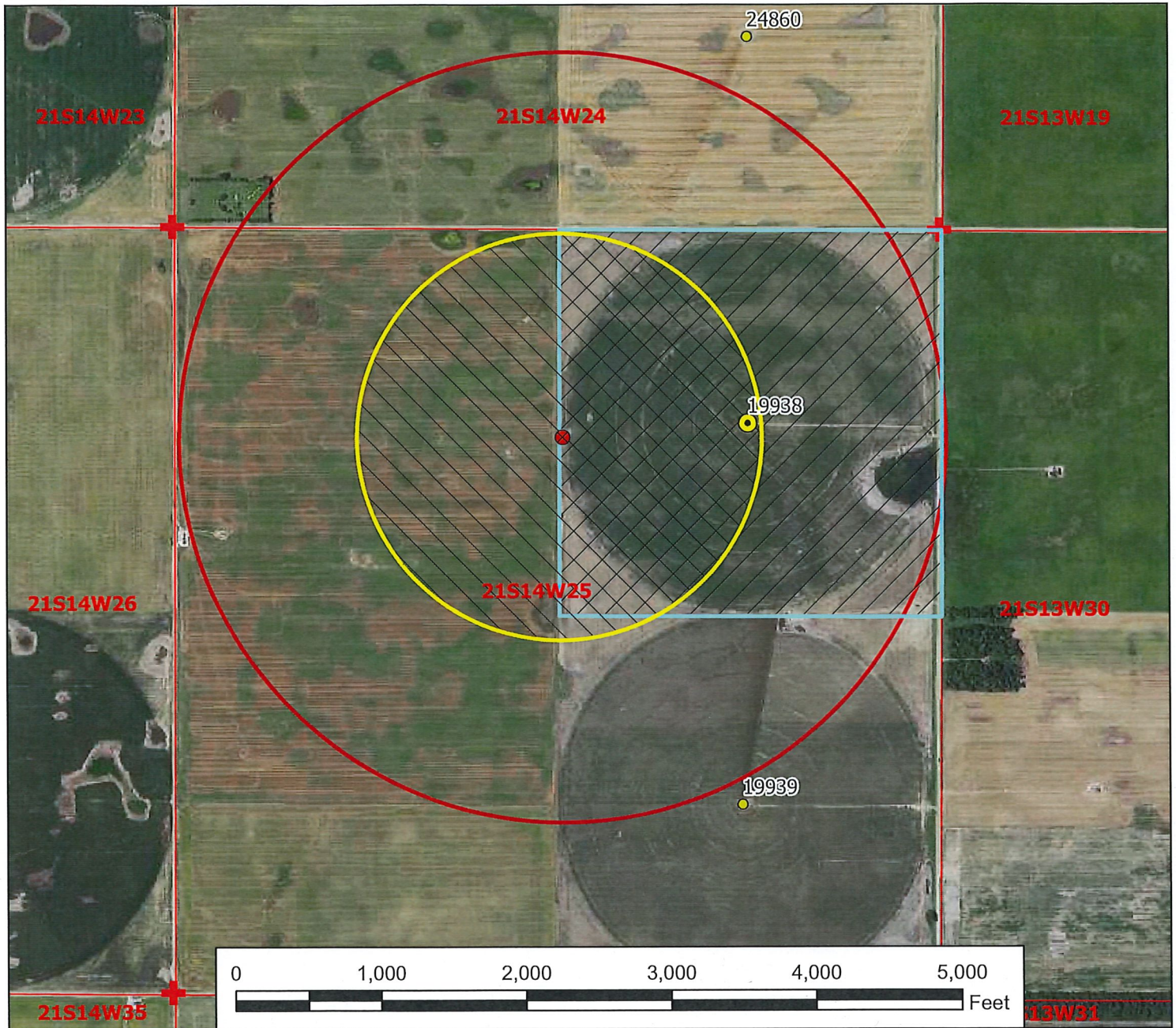
(1) Application to change a point of diversion 300 feet or less	\$100
(2) Application to change a point of diversion more than 300 feet	\$200
(3) Application to change the place of use	\$200



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JAN 03 2022

File No. 19938



Legend

- Water Appropriation
- ⊗ Proposed P/D 3840 ft N / 2620 ft W
- ⦿ Authorized P/D 3960 ft N / 1320 ft W
- ★ Domestic Well
- ⊕ Section Corner
- ▭ Section Line
- ▭ Authorized 160 Acres
- ▨ Proposed 140 Acres
- Half Mile Circle

Water Right, File No. 19938

Change in Point of Diversion and
Place of Use Map
25-21-14W // Stafford County

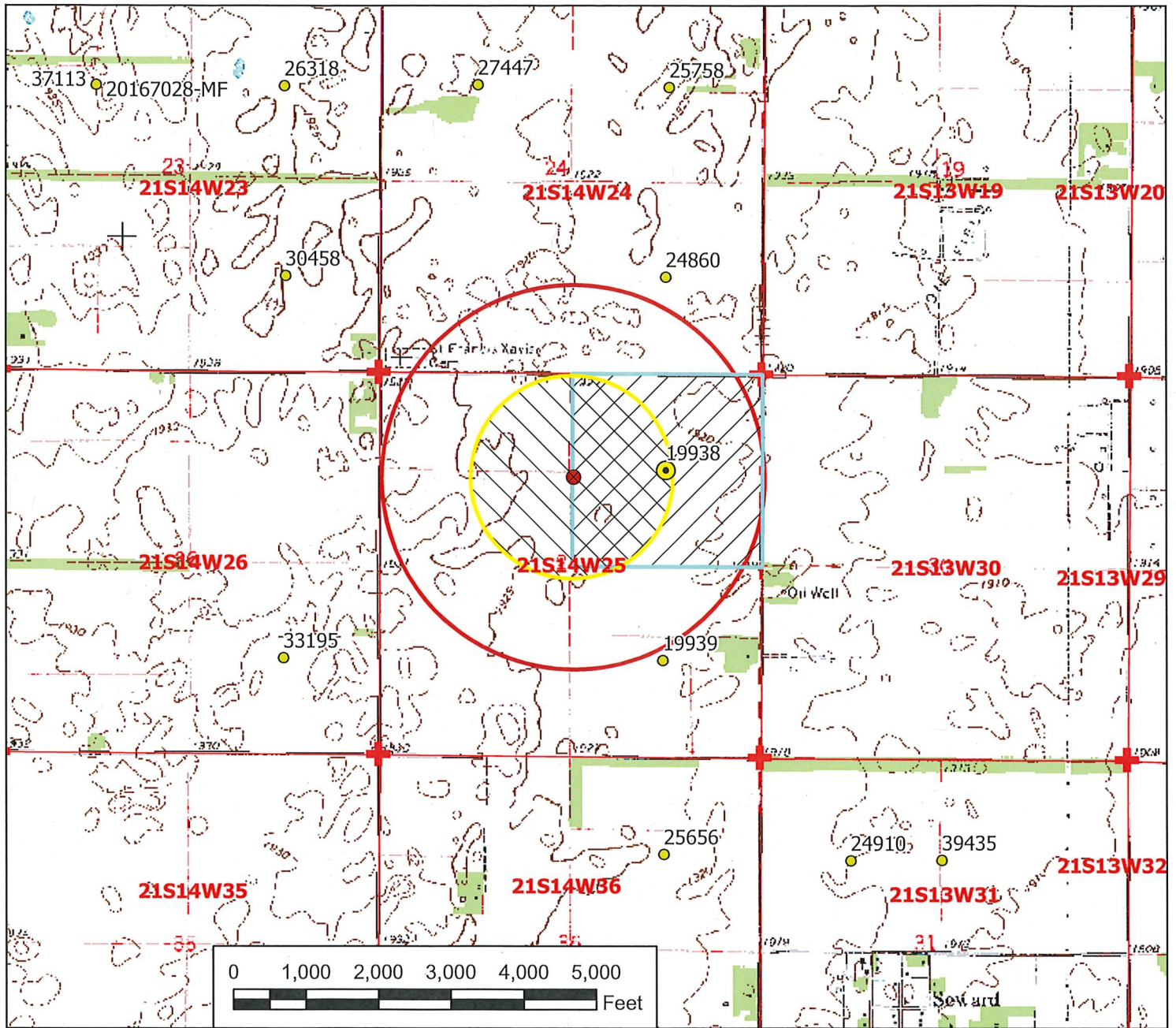


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Division of Water Resources

To the best of my knowledge, all points of diversion within one-half mile of the proposed point of diversion have been shown.

Signature / Date: *C. S. Smith* (12-20-21) 12/17/2021 TMA/SFFO 1:12,000 scale




Legend

- Water Appropriation
- Proposed P/D 3840 ft N / 2620 ft W
- Authorized P/D 3960 ft N / 1320 ft W
- ★ Domestic Well
- ⊕ Section Corner
- ▭ Section Line
- ▭ Authorized 160 Acres
- ▭ Proposed 140 Acres
- Half Mile Circle

Water Right, File No. 19938


Change in Point of Diversion and Place of Use Map

25-21-14W // Stafford County



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Division of Water Resources

To the best of my knowledge, all points of diversion within one-half mile of the proposed point of diversion have been shown.

 12-20-21
 Signature / Date 12/20/2021 TMA/SFFO 1:24,000 scale