

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

1. File Number: 7,824	2. Status Change Date:	3. Change Num:	4. Field Office: 03	5. GMD:
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: 7/18/18
8a. Applicant(s) New to system <input type="checkbox"/> LELAND F & JANICE WERTH RT 2 BOX 104 ELLIS, KS 67637		Person ID 35824 Add Seq# _____		
8b. Landowner(s) New to system <input type="checkbox"/> LELAND F & JANICE WERTH RT 2 BOX 104 ELLIS, KS 67637		Person ID 35824 Add Seq# _____		
8c. Landowner(s) New to system <input type="checkbox"/>		Person ID _____ Add Seq# _____		
8d. WUC New to system <input type="checkbox"/>		Person ID _____ Add Seq# _____		
9. Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: 12/31/18 <input checked="" type="checkbox"/> N & P Date to Comply: 12/31/18				
<input type="checkbox"/> Anti-Reverse Meter <input type="checkbox"/> Meter Seal <input type="checkbox"/> Check Valve <input type="checkbox"/> N & P Form <input type="checkbox"/> Water Tube <input 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: _____				
Date Prepared: 7/18/18				By: BILLINGER
Date Entered: _____				By: _____

File No. **7,824** 11. County: **TR** Basin: **BIG CREEK** Stream: Formation Code: **113** Special Use:

12. Points of Diversion											Rate and Quantity					
CHK	MOD	DEL	PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Authorized		Additional		Overlap PD Files
ENT												Rate gpm	Quantity af	Rate gpm	Quantity af	
DEL	53158	NW	NW NE		18	13S	21W	1				200	61	200	61	
ENT	NEW	NW	NW NE		18	13S	21W	NW	5204	2512		200	61	200	61	

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				NE¼				NW¼				SW¼				SE¼				Total	Owner	Chg?	Overlap Files				
CHK	MOD	DEL	ENT	PUSE	S	T	R	ID	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	35572	18	13S	21W	1				30	40	21	7	32	24	13	13	9	6					195	8b.	N	7825, 25618	

Base Acres: Year: Minimum Reasonable Quantity:

Comments:

DEPARTMENT OF AGRICULTURE
DIVISION OF WATER RESOURCES
STOCKTON FIELD OFFICE
820 S. WALNUT
STOCKTON, KS 67669-0192

STATE OF KANSAS



PHONE: (785) 425-6787
FAX: (785) 425-6842
www.agriculture.ks.gov

GOVERNOR JEFF COLYER, M.D.
JACKIE McCLASKEY, SECRETARY OF AGRICULTURE

July 18, 2018

LELAND F WERTH
24023 360 AVE
ELLIS KS 67637-1943

Re: Water Right, File No. 7,824

Dear Mr. & Mrs. Werth:

Enclosed is the order executed by David W. Barfield, 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 terms, conditions, and limitations specified in this approval for change. Also, the approval of the order requires the installation of a water flow meter(s) on the point(s) of diversion authorized under the above referenced file number by **December 31, 2018**. Please complete and return the enclosed Notice of Completion of Diversion Works when a water flow meter has been installed. A copy of the Chief Engineer's specifications for the water flow meters are found in K.A.R. 5-1-4 through K.A.R. 5-1-12 along with a partial list of those flow meters found to be acceptable for installation in Kansas can be found on our website at the following web address:

<http://agriculture.ks.gov/meters>

Please note that all meters must be installed and maintained in accordance with the specifications for water flow meters referenced above.

The abandoned water 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 (KDHE). If the well is to be retained by the landowner for other purposes, a copy of the legal transfer of responsibility for maintenance of the well must be forwarded to KDHE Geology Section, 1000 SW Jackson, Suite 420, Topeka, Kansas 66612, telephone number (785) 296-5524. More information is available online at: <http://kdheks.gov/waterwell>

Since this order modifies the original certificate, it should be recorded with the Register of Deeds just as other legal documents affecting real estate. Such records are maintained at the Register of Deeds Office in the county wherein the place of use is located.

This document is a summary order by this agency regarding this matter. This order shall become final if a request for a hearing is not filed with the Chief Engineer within 15 days of the date of service of this order.

(over)

If you have any questions, please feel free to contact this office at (785)425-6787. If you wish to refer to a specific file, please reference it when you contact us.

Sincerely,



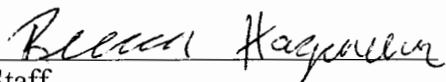
Mark Billinger
Assistant Water Commissioner

MB:rfh
Enclosures

CERTIFICATE OF SERVICE

On this 18th day of July, 2018, I hereby certify that the attached **SUMMARY ORDER APPROVING APPLICATION FOR CHANGE in POINT OF DIVERSION** for water right, File No. 7,824, dated on the 18th day of July, 2018, was mailed postage prepaid, first class, U.S. mail, to the following:

LELAND F WERTH
24023 360 AVE
ELLIS KS 67637-1943


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

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.

APPLICATION NO. _____
 7 18 18
 Reviewer MB

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.

RECEIVED

File No. 7,824

JUL 18 2018
 11:30 am
 Stockton 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: Leland F & Janice Werth

24023 360 Ave, Ellis, KS 67637-1943

Phone Number: (785)726-3466 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: Leland F & Janice Werth

ADDRESS: 24023 360 Ave, Ellis, KS 67637-1943

(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	
18	13	21w	30	40	21	7	32	24	13	13	9	6							195

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 in place of use

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 \$ _____ TR # _____ Receipt Date _____ Check # _____

5. **Presently authorized point of diversion:**
 One in the NW Quarter of the NW Quarter of the NE Quarter of Section 18, Township 13 South, Range 21 W, in Trego 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. 1 GPS 5216 feet North 2512 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 NW Quarter of the NE Quarter of Section 18, Township 13 South, Range 21 W, in Trego County, Kansas, 5204 feet North 2512 feet West of Southeast corner of section.
 Proposed Rate 200 gpm Proposed Quantity 61 AF 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 _____ (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) Redrill due to casing deterioration

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

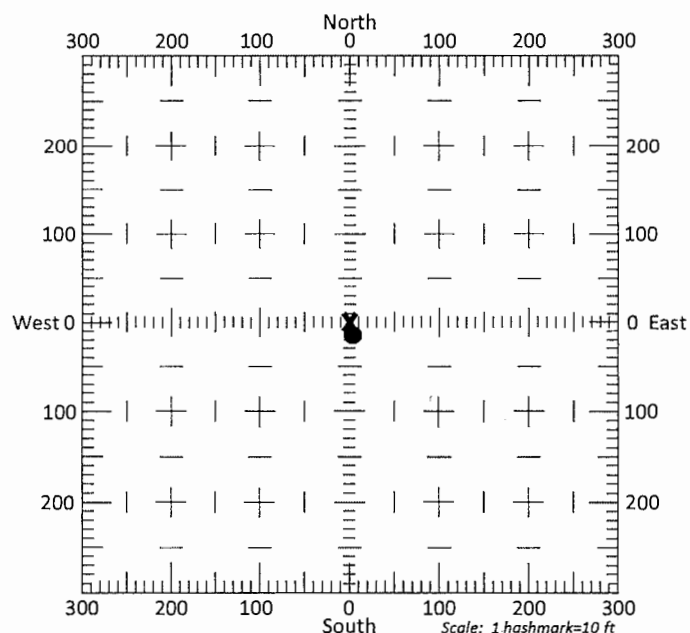
9. The change(s) (was)(will be) completed by?
On approval

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

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by jkb - Stock FO

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 Stockton DWR F.C., Kansas, this 18th day of July, 2018.

Leibel Werth
 (Owner)
Leibel Werth
 (Please Print)

 (Owner)

 (Please Print)

 (Owner)

 (Please Print)

Janice Werth
 (Spouse)
JANICE WERTH
 (Please Print)

 (Spouse)

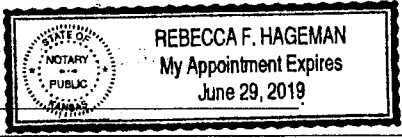
 (Please Print)

 (Spouse)

 (Please Print)

State of Kansas }
 County of ROOKS } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 18th day of July, 2018.



Rebecca F Hageman
 Notary Public

My Commission Expires 6-29-19

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

JUL 18 2018



WATER WELL RECORD

203 Broad St.Suite 2
 P.O. Box 38
 Gove, KS 67736

DATE	INVOICE #
7/9/2018	18992

Job Name:
LELAND WERTH 24023 360 AVE. ELLIS, KS 67637

JOB LOCATION
TEST HOLES

S/N	TERMS	WATER LEVEL	WELL DEPTH
	Due on receipt		

DESCRIPTION	QTY	RATE	AMOUNT
TEST HOLES FOR IRRIGATION			
TEST HOLE #1 SWL-33' TD-51' *** WE WILL DRILL THIS ONE OUT*** 0-4 TOP SOIL 4-8 BROWN CLAY 8-18 MEDIUM SAND 18-34 GRAVEL / CLAY 34-51 GRAVEL / BIG ROCKS 51 SHALE		300.00	300.00
TEST HOLE #2 SWL-24' TD - 38' 0-4 TOPSOIL 4-26 SANDY CLAY 26-34 GRAVEL W/ CLAY 34-38 GRAVEL 38 SHALE		300.00	300.00
TEST HOLE #3 SWL-30 TD-47 0-3 TOPSOIL 3-37 BROWN CLAY 37-42 SANDY CLAY 42 - 47 GRAVEL 47 SHALE		300.00	300.00

THANK YOU FOR THE BUSINESS 2% FINANCE CHARGE ON OVERDUE ACCOUNTS 30 DAYS	Sales Tax (8.0%)
	Total

Phone #
785-938-4434

E-mail
aquapump@gmail.com

RECEIVED

JUL 18 2018

Stockton Field Office
 Division of Water Resources



WATER WELL RECORD

203 Broad St. Suite 2
 P.O. Box 38
 Gove, KS 67736

DATE	INVOICE #
7/9/2018	18992

Job Name:
LELAND WERTH 24023 360 AVE. ELLIS, KS 67637

JOB LOCATION
TEST HOLES

S/N	TERMS	WATER LEVEL	WELL DEPTH
	Due on receipt		

DESCRIPTION	QTY	RATE	AMOUNT
TEST HOLE #4 SWL-42' TD-58' 0-4 TOPSOIL 4-22 FINE SAND 22 - 34 MEDIUM SAND 34-45 SANDY CLAY 45-53 CLAY / CLUE MUD / SAND 53-58 GRAVEL 58 SHALE		300.00	300.00
VIDEO CAMERA OLD WELL		500.00	500.00

THANK YOU FOR THE BUSINESS 2% FINANCE CHARGE ON OVERDUE ACCOUNTS 30 DAYS	Sales Tax (8.0%)	50.00
	Total	\$1,700.00

Phone #
785-938-4434

E-mail
aquatnt@gmail.com

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.