

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

APPLICATION COMPLETE
 1 / 17 / 24
 M.B.

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.

RECEIVED
 12:45PM
 DEC 27 2023

File No. 38,488

1. Application is hereby made for approval of the Chief Engineer to change the (check one or both):

Place of Use Point of Diversion

Stockton Field Office
 Division of Water Resources

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: CITY OF SALINA MUNICIPAL GOLF COURSE

2500 E CRAWFORD ST SALINA, KS 67401-3769

Phone Number: () 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: CITY OF SALINA MUNICIPAL GOLF COURSE

ADDRESS: 2500 E CRAWFORD ST SALINA, KS 67401-3769

(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	
20	14S	2W		9	18		36		2	36	22	10		12		16	6		167

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

5. **Presently authorized point of diversion:**
 One in the SE Quarter of the NE Quarter of the NW Quarter of Section 19, Township 14 South, Range 2 W, in SA _____ County, Kansas, 4367 feet North 3202 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
 (DWR use only: Computer ID No. 10 112 72 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 SW Quarter of the SE Quarter of the SW Quarter of Section 18, Township 14 South, Range 2 W, in SA _____ County, Kansas, 116 feet North 3519 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 38,487 BATT 1 OF 2

315248
id 5

6. **Presently authorized point of diversion:**
 One in the NE Quarter of the SE Quarter of the NW Quarter of Section 19, Township 14 South, Range 2 W, in SA _____ County, Kansas, 3872 feet North 2957 feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
 (DWR use only: Computer ID No. 9 28110 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 NE Quarter of the NE Quarter of the NW Quarter of Section 19, Township 14 South, Range 2 W, in SA _____ County, Kansas, 5128 feet North 3190 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 38,487 BATT 1 OF 2

48911
id 5

7. The changes herein are desired for the following reasons?
 (please be specific) TO FLIP FLOP WATER RIGHTS
38486 & 38488 TO BALANCE PUMPING

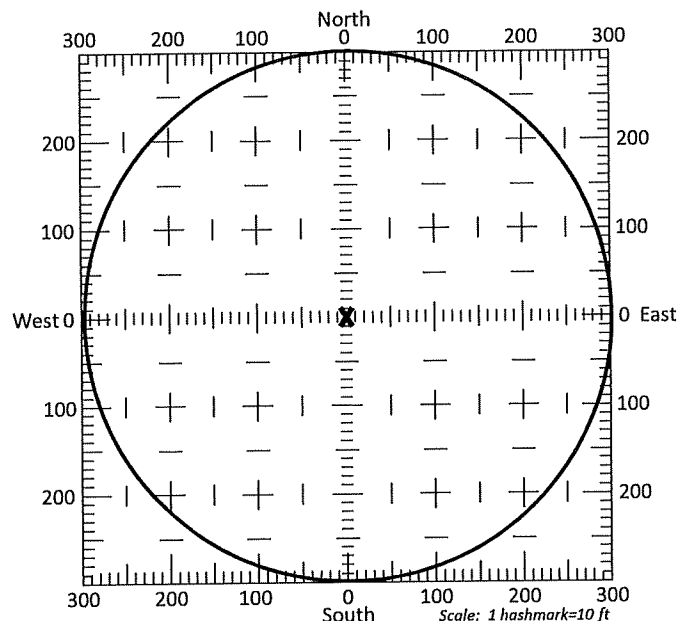
8. If a well, is the test hole log attached? Yes No

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

10. If the point of diversion is a well:
 (a) What are you going to do with the old well?
RETAIN FOR OTHER FILES
 (b) When will this be done? UPON APPROVAL

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by MB STKFO



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 Salina, Kansas, this 21 day of December, 2023.

<u>Jeff Hammond</u> (Owner)	
<u>Jeff Hammond</u> (Please Print)	

State of Kansas }
 County of: Saline } SS



I hereby certify that the foregoing application was signed in my presence and sworn to before me this 21st day of December, 2023.

My Commission Expires 4/23/2025
Lynn Moss
 Notary Public

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

APPLICATION FOR APPROVAL TO CHANGE
THE PLACE OF USE AND/OR POINT OF DIVERSION
SUPPLEMENTAL SHEET
FILE NO. 38,488

Presently authorized point of diversion:

One in the SE Quarter of the NE Quarter of the NW Quarter
of Section 19, Township 14S South, Range 2 W,
in SA County, Kansas, 4119 feet North 3079 feet West of Southeast corner of section.
Authorized Rate 285 GPM Authorized Quantity 31 AF Depth of well _____ (feet)
(DWR use only: Computer ID No. 12 89968 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 SW Quarter of the SE Quarter of the SW Quarter
of Section 18, Township 14S South, Range 2 W,
in SA County, Kansas, -20 feet North 3370 feet West of Southeast corner of section.
Proposed Rate 285 GPM Proposed Quantity 31 AF Proposed well depth (feet) _____
This point is: Additional Well Geo Center List other water rights that will use this point 38,487

89967
148

Presently authorized point of diversion:

One in the _____ Quarter of the _____ Quarter of the _____ Quarter
of Section _____, Township _____ South, Range _____ 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 _____ 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 _____

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 _____

Presently authorized point of diversion:

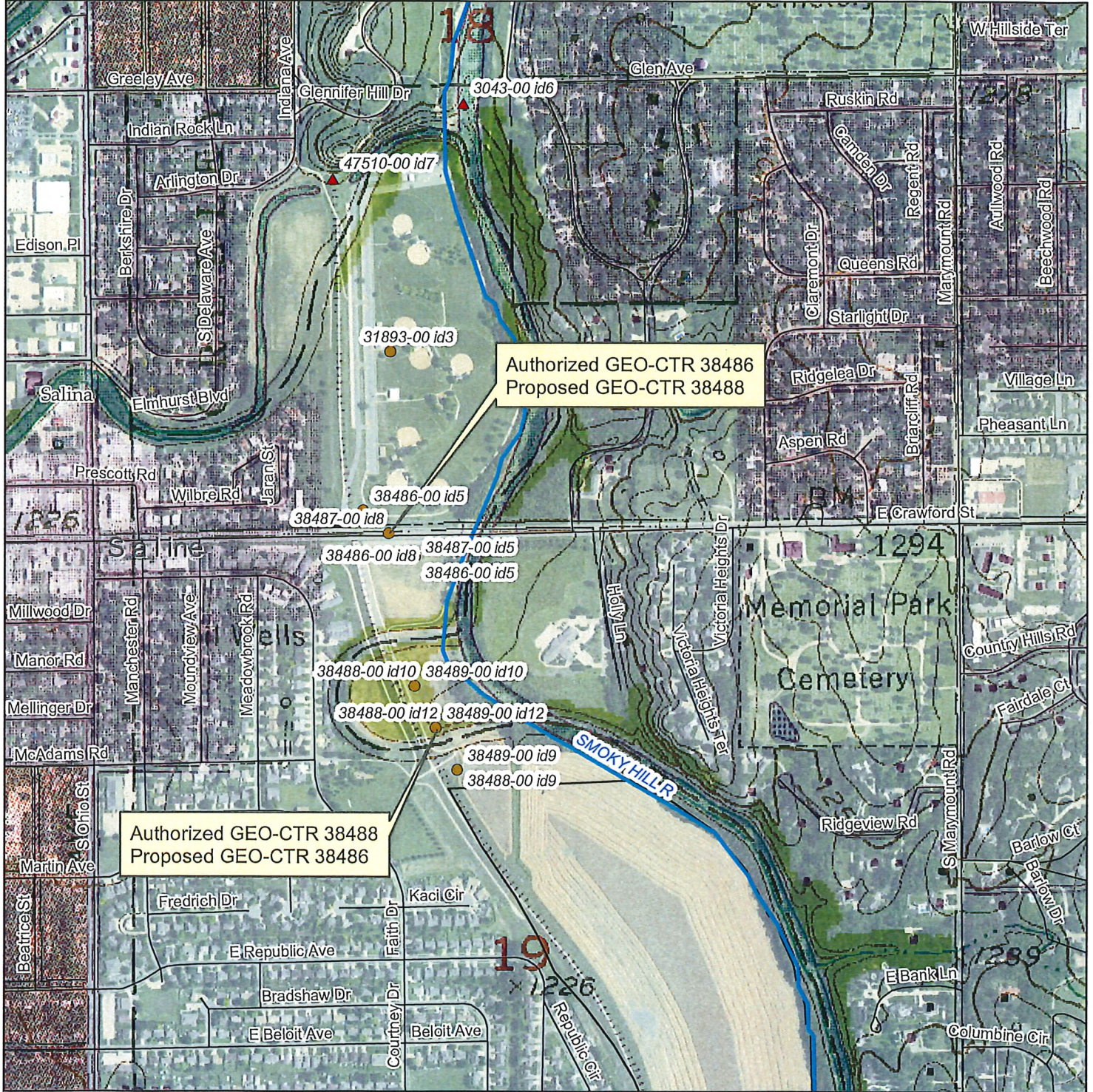
One in the _____ Quarter of the _____ Quarter of the _____ Quarter
of Section _____, Township _____ South, Range _____ (E/W),
in _____ County, Kansas, _____ feet North _____ feet West of Southeast corner of section.
Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
(DWR use only: 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 _____

Application to Change the Point of Diversion For Water Right File # 38,486 & 38,488



RECEIVED
DEC 27 2023
Stockton Field Office
Division of Water Resources

- ▲ Surface Water Point of Diversion
- Groundwater Point of Diversion

1:10,000

Signature Required

[Handwritten Signature]

By signing this I am stating that to the best of my knowledge that all wells within 1/2 mile of proposed well location are identified on this map.



Stockton Field Office
820 S. Walnut
Stockton, KS 67669-0192



Phone: 785-425-6787
Fax: 785-425-6842
www.agriculture.ks.gov

Mike Beam, Secretary

Laura Kelly, Governor

January 17, 2024

CITY OF SALINA
Attn: MUNICIPAL GOLF COURSE
2500 E CRAWFORD ST
SALINA, KS 67401-3769

Re: Water Right, File Nos. 38,486 and 38,488

Dear Sir or Madam:

Enclosed are two (2) orders executed by Earl Lewis, Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, approving the applications for change under the above referenced file numbers.

Your attention is directed to the terms, conditions, and limitations specified in these approvals for change. Also, the approval of the orders does require the installation of a water flow meter(s) on the point(s) of diversion authorized under the above file numbers by **December 31, 2024**. Please complete and return the enclosed Notice(s) 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 is 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 these orders modify the original certificates, they 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.

These documents are summary orders by this agency regarding this matter. These orders 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,



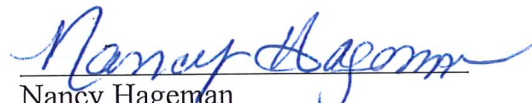
Mark Billinger
Assistant Water Commissioner

MB:ndh
Enclosures

CERTIFICATE OF SERVICE

On this 17th day of January 2024, I hereby certify that the attached **SUMMARY ORDERS APPROVING APPLICATIONS FOR CHANGE in Point of Diversion** for water right, File Nos. 38,486 and 38,488, dated on the 17th day of January 2024, were mailed postage prepaid, first class, U.S. mail, to the following:

CITY OF SALINA
Attn: MUNICIPAL GOLF COURSE
2500 E CRAWFORD ST
SALINA, KS 67401-3769



Nancy Hageman
Administrative Assistant