

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

1. File Number: 19820-D8	2. Status Change Date:	3. Change Num: C2	4. Field Office: 4	5. GMD: 3
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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: 8/5/2019
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8a. Applicant(s) Person ID 64846 New to system <input type="checkbox"/> Add Seq# _____ SANDYHILL ENTERPRISES LLC Attn: JACOB NEUFELD P O BOX 1005 HOLCOMB, KS 67851	8c. Landowner(s) Person ID _____ New to system <input type="checkbox"/> Add Seq# _____
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8b. Landowner(s) Person ID _____ New to system <input type="checkbox"/> Add Seq# _____ 8a	8d. WUC Person ID 61989 New to system <input type="checkbox"/> Add Seq# _____ 8a
--	--

9. Documents and Enclosure(s): DWR Meter(s) Date to Comply: **12/31/2019** N & P Date to Comply: _____

Anti-Reverse Meter Meter Seal Check Valve N & P Form Water Tube Driller Copy H & E Letter

Conservation Plan Date Required: _____ Date Approved: _____ Date to Comply: _____

10. Use Made of Water From: _____ To: _____

Date Prepared: **8/28/2019** By: **AM**
 Date Entered: _____ By: _____

File No. **19820-D8** 11. County: FI Basin: **ARKANSAS RIVER** Stream: Formation Code: Special Use:

12. Points of Diversion Rate and Quantity
 CHK Authorized Additional
 MOD Rate Quantity Rate Quantity
 DEL PDIV Qualifier S T R ID 'N 'W Comment (AKA Line) gpm/cfs af/mgy gpm/cfs af/mgy Overlap PD Files
 ENT

CHK 43596

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 CHK MOD DEL ENT	PUSE	S	T	R	ID	NE¼				NW¼				SW¼				SE¼				Total	Owner	Chg?	Overlap Files
						NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼	NE ¼	NW ¼	SW ¼	SE ¼				
ENT	518	25	26S	34W	4					34	34	34	34	34	34	34	34	34	34	34	34	408	8a	N	MULTIPLE
ENT	17483	22	26S	34W	1	34	34	34	34	34	34	34	34									272	8a	N	MULTIPLE
ENT	24287	24	26S	34W	1	34	34	34	34					34	34	34	34	34	34	34	34	408	8a	N	MULTIPLE
ENT	29974	13	26S	34W	1									32	32	32	32	32	32	32	32	256	8a	N	MULTIPLE
ENT	30897	23	26S	34W	1	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34	544	8a	N	MULTIPLE
ENT	33001	26	26S	34W	1	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34	544	8a	N	MULTIPLE
ENT	30456	21	26S	34W	2	34	34	34	34													136	8a	N	MULTIPLE
CHK	24175	21	26S	34W	1					34	34	34	34									136	8a	N	MULTIPLE

Base Acres: Year: Minimum Reasonable Quantity:

Comments: **OVERLAPPING WR ON PU: 16157; 19820-D8; 20890; 22576-D2; 22576-D3; 22576-DA; 22576-DB; 22577-D1; 22578-D2; 24050; 28620; 29855-D1; 29855-D2; 30157**

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

August 29, 2019

SANDYHILL ENTERPRISES LLC
Attn: JACOB NEUFELD
P O BOX 1005
HOLCOMB, KS 67851

RE: Water Right, File Nos. 16157; 19820-D8; 20890; 22576-D2; 22576-D3; 22576-DA; 22576-DB; 22577-D1; 22578-D2; 24050; 28620; 29855-D1; 29855-D2 & 30157

Dear Sir or Madam:

Enclosed are the orders executed by the designee of the 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 enclosures and to the terms, conditions, and limitations specified in these approvals for change. A condition of these approvals is that an acceptable water flow meter must be installed on the diversion works authorized under the referenced file numbers and meet current specifications. Please return the required notification of completion of the diversion works and/or installation of the required meter as soon as these actions are completed.

Since these orders modify the original documents referred to above, it should be recorded with the Register of Deeds as other instruments affecting real estate.

Should you have any questions, please feel free contact this office. If you would prefer, you could arrange an appointment for additional assistance.

Sincerely,

A handwritten signature in blue ink, appearing to read "Austin J. McColloch".

Austin J. McColloch
Assistant Water Commissioner

AM:
enclosures

pc:
GROUNDWATER MANAGEMENT DISTRICT NO. 3

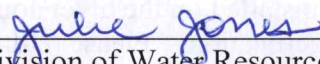
CERTIFICATE OF SERVICE

On this 29th day of August, 2019, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Water Right, File Nos. 16157; 19820-D8; 20890; 22576-D2; 22576-D3; 22576-DA; 22576-DB; 22577-D1; 22578-D2; 24050; 28620; 29855-D1; 29855-D2 & 30157 dated 28th day of August, 2019 was mailed postage prepaid, first class, US mail to the following:

SANDYHILL ENTERPRISES LLC
Attn: JACOB NEUFELD
P O BOX 1005
HOLCOMB, KS 67851

Pc:

GROUNDWATER MANAGEMENT DISTRICT NO. 3



Division of Water Resources 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

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. 19820 D8

RECEIVED
4:31 pm
AUG 05 2019
Garden City 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: SANDYHILL ENTERPRISES LLC - JACOB NEUFELD
10165 W RIVER RD HOLCOMB KS 67851
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: SAME AS ABOVE
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	
21	26S	34W					34	34	34	34								136	

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: SAME AS ABOVE
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	
13	26S	34W									32	32	32	32	32	32	32	256	
22	26S	34W	34	34	34	34	34	34	34	34								272	
23	26S	34W	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34	544	

For Office Use Only: Code _____ Fee \$ 200.00 TR # _____ Receipt Date 8-5-19 Check # 1039

5. **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 _____

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) OVERLAP ALL FILES FOR PLACE
OF USE

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

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

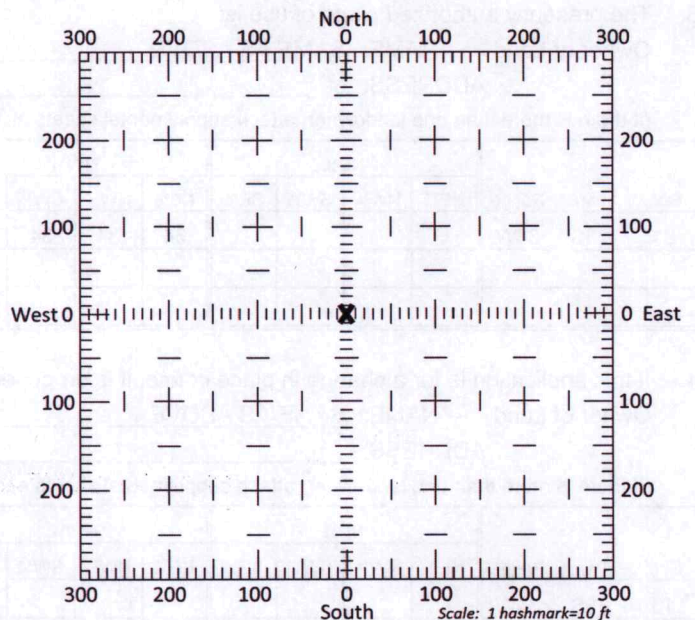
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (b) When will this be done? _____

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by AM/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 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.)**

APPLICATION FOR APPROVAL TO CHANGE
THE PLACE OF USE AND/OR POINT OF DIVERSION
SUPPLEMENTAL SHEET

FILE NO. 19820 D8

MAKE ADDITIONAL COPIES AS NECESSARY

3. *Continued:* The presently authorized place of use is:

Owner of Land ---- NAME: _____
ADDRESS: _____

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	

Owner of Land ---- NAME: _____
ADDRESS: _____

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	

Owner of Land ---- NAME: _____
ADDRESS: _____

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. *Continued:* 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: SAME AS ABOVE
ADDRESS: _____

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	
24	26S	34W	34	34	34	34					34	34	34	34	34	34	34	34	408
25	26S	34W					34	34	34	34	34	34	34	34	34	34	34	34	408
26	26S	34W	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34	34	544

Owner of Land ---- NAME: _____
ADDRESS: _____

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	
21	26S	34W	34	34	34	34	34	34	34	34									272

Owner of Land ---- NAME: _____
ADDRESS: _____

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	

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 KS, Kansas, this 5 day of August, 20 19.

[Signature]

(Owner)

[Signature]

(Spouse)

Jacob Neufeld

(Please Print)

Aganetha Neufeld

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas }
County of Linney } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 5th day of August, 20 19.

My Commission Expires _____



[Signature]

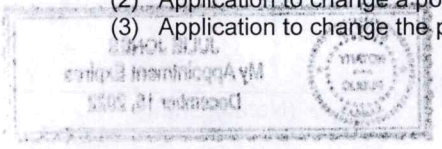
Notary Public

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.

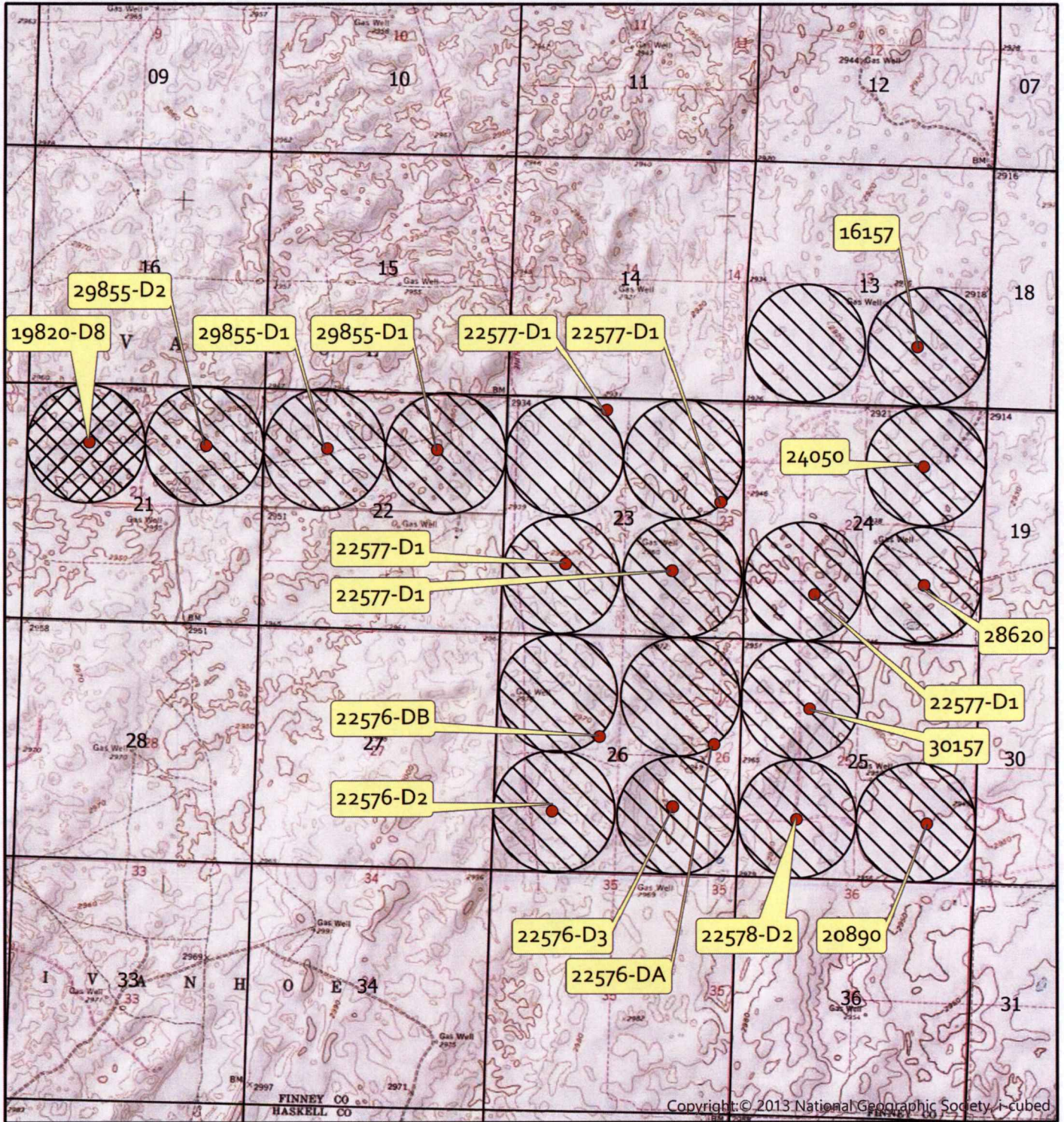
FEE SCHEDULE

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**

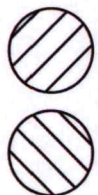
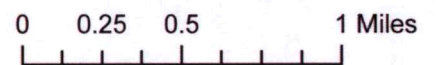
- (1) Application to change a point of diversion 300 feet or less \$100
- (2) Application to change a point of diversion more than 300 feet \$200
- (3) Application to change the place of use \$200



APPLICATION FOR CHANGE IN PLACE OF USE
WATER RIGHT, FILE NO. 19820-D8



Township 26 South Range 34 West
Finney County

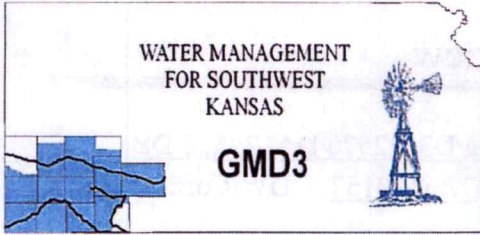


AUTHORIZED PLACE OF USE

PROPOSED PLACE OF USE



Created By: AM/GCFO



Southwest Kansas
Groundwater Management District No. 3
2009 E. Spruce Street
Garden City, Kansas 67846
(620) 275-7147 phone (620) 275-1431 fax
www.gmd3.org

August 20, 2019

Michael A. Meyer
Division of Water Resources
4532 W Jones Ave., Suite B
Garden City, Kansas 67846

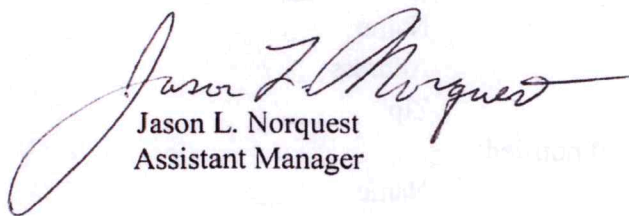
RE: Applications for Change in Place of Use
Water Right, File Nos. 16157, 19820-D8, 20890, 22576-D2, 22576-D3, 22576-DA,
22576-DB, 22577-D1, 22578-D2, 24050, 28620, 29855-D1, 29855-D2 & 30157

Dear Mike:

We have completed a review of the applications for the above referenced water rights. The proposals are not in conflict with the Management Program of the Southwest Kansas Groundwater Management District No. 3 (GMD3). The proposed change in place of use for a complete overlap in irrigation acres is in accordance with K.A.R. 5-5-11. No new acres are being proposed. It is therefore recommended that the applications be approved at this time.

Thank you for the opportunity to review the applications and to provide a recommendation. If you have any questions, please don't hesitate to contact us.

Sincerely,


Jason L. Norquest
Assistant Manager

GMD3 Change Review

File No(s): 16157, 19820 D8, 20890, 22576 D2, 22576 D3, 22576 DA, 22576 DB, 22577 D1, 22578 D2, 24050, 28620, 29855 D1 29855 D2 & 30157. DWR office: GC.

App filed to change: PU.

Is Landowner(s) correct in WRIS: Sandyhill Enterprises, Jacob Neufeld.

If NO, is documentation included?

Is Water Use Correspondent correct in WRIS? ___.

If NO, is documentation included?

Regulation(s) Reviewed: KAR 5-5-11

Point of diversion ID No(s) ___ being changed.

	ft. North	ft. West		
Authorized PD				
Proposed PD				
Difference	0	0		
$a^2 + b^2 = c^2$	0	0	0	

GPS for proposed PD: Lat: ___ Long: ___.

Is proposed PD stacking on existing WRs? ___.

Is Proposed PU overlapping existing WRs? Proposed to completely overlap PU, need to bring in two additional WRs.

Land Owner(s) notified: ___.

Name ___. Name ___.

Address ___. Address ___.

Zip ___. Zip ___.

Neighboring certified well(s) notified: ___.

Name ___. Name ___.

Address ___. Address ___.

Zip ___. Zip ___.

Domestic well(s) notified: ___.

Name ___. Name ___.

Address ___. Address ___.

Zip ___. Zip ___.

Base Acres: ___.

Perfected Acres: ___.

Irr. Return-Flow ___%

Proposed Apps bring in 1982 D8 & 29855 D2 acres. The rest are already completely overlapped.

No new acres are being proposed, all currently covered.

Is a waiver needed: No.

Recommendation: After review of all available information, it appears that the current area rules are met. No new acres, just making a complete overlap in PU. Staff therefore recommends approval of the applications.



GMD3 Change Review

DATE: 1/11/11
BY: [illegible]
REVISION: 1.0
DESCRIPTION: [illegible]

APPROVED BY: [illegible]
DATE: [illegible]

REVIEWED BY: [illegible]
DATE: [illegible]

TESTED BY: [illegible]
DATE: [illegible]

IMPLEMENTED BY: [illegible]
DATE: [illegible]

STATUS: [illegible]

COMMENTS: [illegible]

REFERENCES: [illegible]

APPROVED BY: [illegible]

DATE: [illegible]

REVIEWED BY: [illegible]

DATE: [illegible]

TESTED BY: [illegible]

DATE: [illegible]

IMPLEMENTED BY: [illegible]

DATE: [illegible]

STATUS: [illegible]

COMMENTS: [illegible]

REFERENCES: [illegible]

APPROVED BY: [illegible]

DATE: [illegible]

REVIEWED BY: [illegible]

DATE: [illegible]

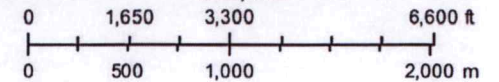


August 20, 2019
15:05 PM

DISCLAIMER: This map is not intended for conveyances, nor is it a legal survey. The information is presented on a best-efforts basis, and should not be relied upon for making financial, survey, legal or other commitments.

1:36,112

Wells	+	CON	+	FPR	▲	MUN	⚡	THX	
?	Other	⊠	DEW	+	HYD	⚡	REC	?	Empty
•	IRR	⊠	DOM	★	IND	⊠	STK	□	Sections



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

August 16, 2019

SOUTHWEST KANSAS GROUNDWATER
MANAGEMENT DISTRICT NO. 3
409 CAMPUS DRIVE, SUITE 106
GARDEN CITY KS 67846

Re: Water Right
File Nos. 16157, 19820-D8, 20890, 22576-D2, 22576-D3, 22576-DA,
22576-DB, 22577-D1, 22578-D2, 24050, 28620, 29855-D1,
29855-D2, 30157

Dear Mr. Norquest:

This is to advise you that Sandyhill Enterprises LLC-Jacob Neufeld, has filed applications for approval of the Chief Engineer, Division of Water Resources, Kansas Department of Agriculture, to change the place of use for the above referenced files. These applications are proposing a complete overlap among all referenced water rights, with no new land.

We are delaying action on the change applications to allow you time to review and provide a recommendation. Please submit a recommendation within 15 days from the date of this letter.

Thank you and as always feel free to contact this office at any time.

Sincerely,

A handwritten signature in blue ink, appearing to read "Michael A. Meyer".

Michael A. Meyer
Water Commissioner

MAM
Enclosures