

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

1. File Number: 28871-D1	2. Status Change Date: 3-13-19	3. Change Num: C2	4. Field Office: 4	5. GMD: 3		
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: 2/22/2019		
8a. Applicant(s) New to system <input type="checkbox"/> JACOB NEUFELD 10165 W RIVER RD HOLCOMB KS 67851		Person ID 61989 Add Seq# _____			8c. Landowner(s) New to system <input type="checkbox"/> SANDYHILL ENTERPRISES LLC JACOB NEUFELD 10165 W RIVER RD HOLCOMB KS 67851	Person ID 64846 Add Seq# _____
8b. Landowner(s) New to system <input type="checkbox"/> Person ID _____ Add Seq# _____		8d. WUC New to system <input type="checkbox"/> 8a			Person ID _____ Add Seq# _____	
9. Documents and Enclosure(s): <input checked="" type="checkbox"/> DWR Meter(s) Date to Comply: 12/31/2019 <input type="checkbox"/> N & P Date to Comply: _____ <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: 3/11/2019 By: AM Date Entered: _____ By: _____						

File No. **28871-D1** 11. County: FI Basin: **ARKANSAS RIVER** Stream: _____ Formation Code: _____ 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/cfs	Quantity af/mgy	Rate gpm/cfs	Quantity af/mgy	

CHK 25488

CHK 76170

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	NE ¼	NW ¼	SW ¼	SE ¼				
CHK	17330	9	26S34W	2										34	34	34	34	34	34	34	34	34	34	34	34	272	8c		29939; 33676; 33677
ENT	39162	10	26S34W	1						40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	640	8c		29939; 33676; 33677
ENT	33972	15	26S34W	1						34	34	34	34	34	34	34	34								272	8c		29939; 33676; 33677	

Base Acres: _____ Year: _____ Minimum Reasonable Quantity: _____

Comments: _____

Garden City Field Office
2508 Johns Street
Garden City, KS 67846-2804



Phone: 620-276-2901
Fax: 620-276-9315
www.agriculture.ks.gov

Mike Beam, Interim Secretary

Laura Kelly, Governor

March 13, 2019

SANDYHILL ENTERPRISES LLC
JACOB NEUFELD
10165 W RIVER RD
HOLCOMB KS 67851

RE: Water Right, File Nos. 28871-D1, 29939, 33676, 33677

Dear Sir:

Enclosed are 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 are that acceptable water flow meters 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 installation of the required meters as soon as these actions are completed.

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

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

Sincerely,

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

Michael A. Meyer
Water Commissioner

MAM:
enclosures

pc:

GROUNDWATER MANAGEMENT DISTRICT NO. 3

CERTIFICATE OF SERVICE

On this 13th day of March, 2019, I hereby certify that the foregoing Approval of Application for Change in Place of Use, Water Right, File Nos. 28,871-D1, 29,939, 33,676, & 33,677, dated 13th day of March, 2019 was mailed postage prepaid, first class, US mail to the following:

SANDYHILL ENTERPRISES LLC
JACOB NEUFELD
10165 W RIVER RD
HOLCOMB KS 67851

With photocopies to:

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. 28871-D1

RECEIVED
 2:00pm
 FEB 22 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: JACOB NEUFELD

10165 W RIVER RD HOLCOMB KS 67851

Phone Number: () Email address: _____

Name and address of Water Use Correspondent: JACOB NEUFELD

10165 W RIVER RD HOLCOMB KS 67851

Phone Number: () Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: SANDYHILL ENTERPRISES LLC - JACOB NEUFELD

ADDRESS: 10165 W RIVER RD HOLCOMB KS 67851

(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	
9	26S	34W									34	34	34	34	34	34	34	34	272

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: SANDYHILL ENTERPRISES LLC - JACOB NEUFELD

ADDRESS: 10165 W RIVER RD HOLCOMB KS 67851

(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	
9	26S	34W									34	34	34	34	34	34	34	34	272
10	26S	34W	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	40	640
15	26S	34W	34	34	34	34	34	34	34	34									272

For Office Use Only: Code _____ Fee \$ 200.00 TR # _____ Receipt Date 2-22-19 Check # 4125

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) CREATE COMPLETE OVERLAP IN
PLACE OF USE W/ FILE NOS. 29939; 33676 AND 33677

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

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

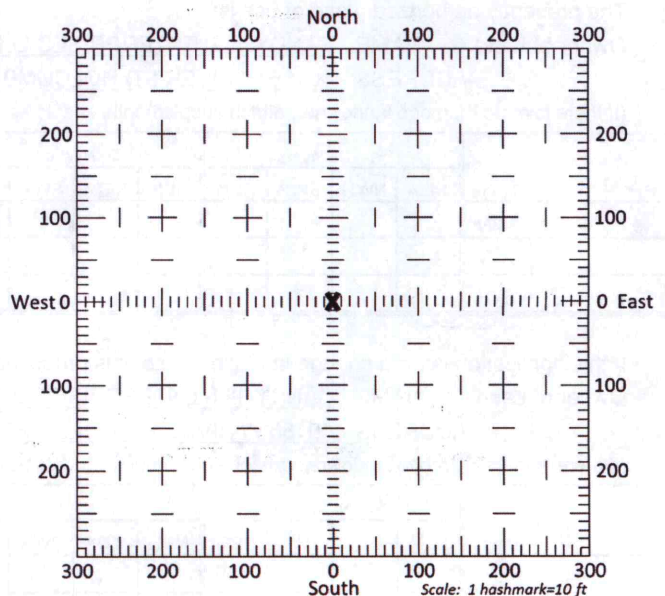
10. If the point of diversion is a well:
 (a) What are you going to do with the old well?

 (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.)**

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, Kansas, this 22nd day of February, 2019.

[Signature]

 (Owner)
Jacob Newfeld

 (Please Print)

 (Owner)

 (Please Print)

 (Owner)

 (Please Print)

[Signature]

 (Spouse)
Aganetha Newfeld

 (Please Print)

 (Spouse)

 (Please Print)

 (Spouse)

 (Please Print)

State of Kansas }
 County of Stinson } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 22nd day of February, 2019.



[Signature]

 Notary Public

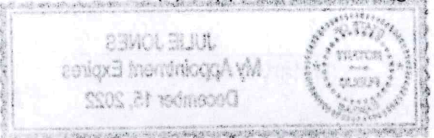
My Commission Expires _____

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.

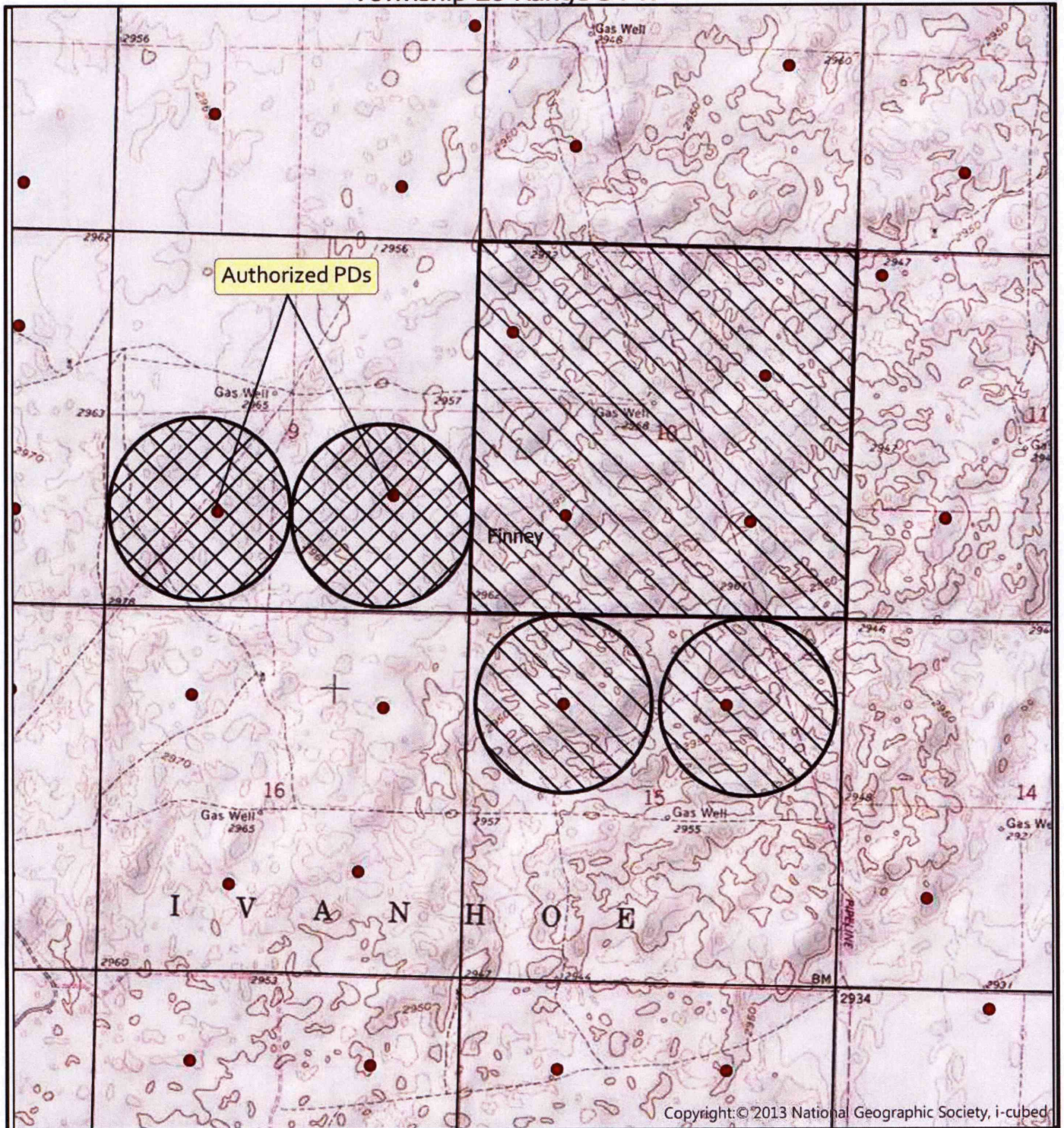
FEE SCHEDULE

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

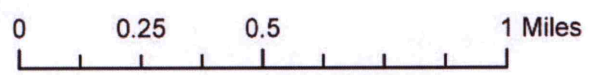


Change in Place of Use
 File No. 28871-D1
 Finney County
 Township 26 Range 34 W

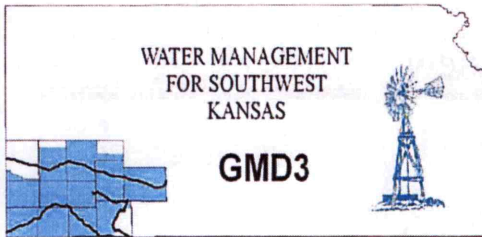


Copyright © 2013 National Geographic Society, i-cubed

-  **Points of Diversion**
-  **Authorized Place of Use**
-  **Requested 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

February 28, 2019

Michael A. Meyer
Division of Water Resources
2508 N Johns Street
Garden City, Kansas 67846

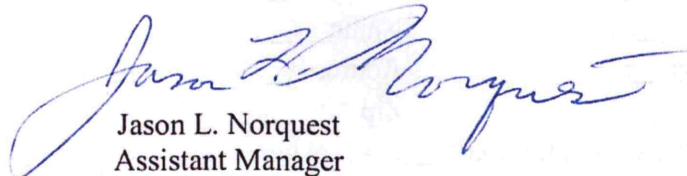
RE: Applications for Change in Place of Use
Water Right, File Nos. 28871 D1, 29939, 33676 & 33677

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(b)(1). 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,

A handwritten signature in blue ink, which appears to read "Jason L. Norquest".

Jason L. Norquest
Assistant Manager

GMD3 Change Review

File No(s).: 28871D1, 29939, 33676 & 33677.

DWR office: GC.

App filed to change: PU.

Is Landowner(s) correct in WRIS: No, but will be corrected.

If NO, is documentation included?

Is Water Use Correspondent correct in WRIS? .

If NO, is documentation included?

Regulation(s) Reviewed: KAR 5-5-11(b)(1)

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? No change.

Is Proposed PU overlapping existing WRs? Creating a complete overlap on acres, no new acres being brought in that are not covered by the water rights.

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: .

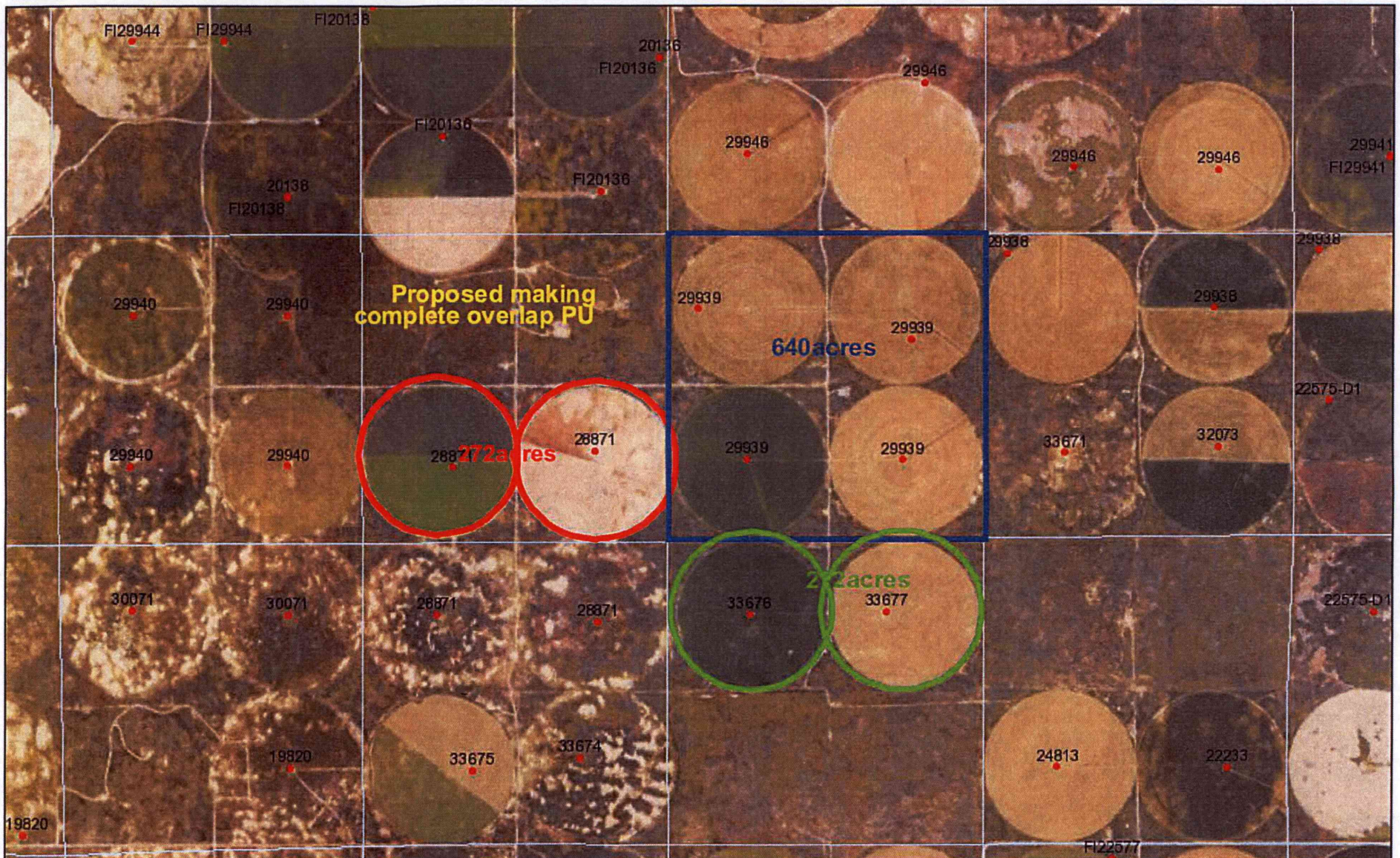
Irr. Return-Flow %

All acres proposed are covered by at least one of the water rights and this is just making a 100% overlap.

Is a waiver needed: No.

Final Recommendation: After review of all available information, it appears all current area rules are met. Staff therefore recommends approval of the applications.

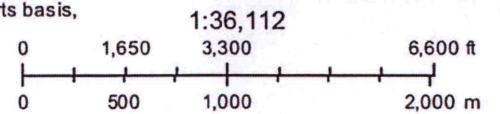




February 28, 2019
09:12 AM

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.

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





First American Title Company

Electronically Recorded Document

File #

1506966

The attached document was recorded on your behalf by First American Title Company via our electronic recording process.

Thank you for allowing First American Title Company to record your documents.

Recorded Date/Time:	<i>01/15/2019 2:50:00 PM</i>
Instrument Number:	<i>201900148</i>
Book:	<i>337</i>
Page:	<i>146</i>
No Of Pages:	<i>2</i>
County/State:	<i>Finney/KS</i>
Borrower/Buyer :	<i>Sandy Hill Enterprises, LLC</i>
Document Type:	<i>Warranty Deed</i>
Document Seq:	<i>2</i>

Do not detach. This page is now a permanent part of this document.

DATA ENTRY
LAND INDEX



Ulrike Lappin
ULRIKE LAPPIN,
FINNEY COUNTY REGISTER OF DEEDS

Entered in Transfer Record in my office this
15 day of January A.D., 2019

D. J. ...
Finney County Clerk

KANSAS TRUSTEE'S DEED (Individual/Tenants in Common)

THIS DEED, is made this **14** day of **January, 2019** by and between **Kathleen A. Koster Trustee** and **Duane E. Koster, Trustee** of the **Kathleen A. Koster Trust under agreement dated December 15, 2006** and **Duane E Koster Trust under agreement dated December 15, 2006**, as Grantor(s), and **Sandy Hill Enterprises, LLC**, as Grantee(s), whose mailing address is **10165 W.River Road, Holcomb, KS 67851**.

WITNESSETH, that the Grantor(s), for and in consideration of the sum of One Dollar and other good and valuable consideration paid by the Grantees, the receipt and sufficiency of which is hereby acknowledged by Grantor(s), do/does by these presents **SELL AND CONVEY** unto the Grantee(s), the following described Real Estate, situated in the County of **Finney** and State of **Kansas**, to-wit:

SURFACE AND WATER RIGHTS ONLY

The North half (N/2) of Section Fifteen (15), Township Twenty-six (26) South, Range Thirty-four (34) West of the 6th P.M., in Finney County, Kansas.

and

All of Section Ten (10), Township Twenty-six (26) South, Range Thirty-four (34) West of the 6th P.M., in Finney County, Kansas.

and

The Northwest Quarter (NW/4) of Section Eleven (11), Township Twenty-six (26) South, Range Thirty-four (34) West of the 6th P.M., Finney County, Kansas.

Subject to all easements, restrictions and reservations, if any, now of record.

TO HAVE AND TO HOLD the same, together with all rights and appurtenances to the same belonging, unto the Grantee(s), and to the heirs and assigns of such Grantee(s) forever.

The Grantor(s) hereby covenanting that the Grantor(s), and the heirs, executors, administrators and assigns of the Grantor(s), shall and will **WARRANT AND DEFEND** the title to the premises unto the Grantee(s), and to the heirs and assigns of Grantee(s) forever, against the lawful claims of all persons whomsoever, *claiming by, through or under Grantor(s)*, excepting, however, the general taxes for the current calendar year and thereafter, and special taxes becoming a lien after the date of this deed.

KANSAS TRUSTEE'S DEED
(Individual/Tenants in Common)

THIS DEED, is made this **14** day of **January, 2019** by and between **Kathleen A. Koster Trustee** and **Duane E. Koster, Trustee** of the **Kathleen A. Koster Trust under agreement dated December 15, 2006** and **Duane E Koster Trust under agreement dated December 15, 2006**, as Grantor(s), and **Sandy Hill Enterprises, LLC**, as Grantee(s), whose mailing address is **10165 W.River Road, Holcomb, KS 67851**.

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and

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and

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Subject to all easements, restrictions and reservations, if any, now of record.

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The Grantor(s) hereby covenanting that the Grantor(s), and the heirs, executors, administrators and assigns of the Grantor(s), shall and will **WARRANT AND DEFEND** the title to the premises unto the Grantee(s), and to the heirs and assigns of Grantee(s) forever, against the lawful claims of all persons whomsoever, *claiming by, through or under Grantor(s)*, excepting, however, the general taxes for the current calendar year and thereafter, and special taxes becoming a lien after the date of this deed.

Grantor(s) warrant(s) to Grantee(s) that Grantor(s) is/are conveying the Property pursuant to the provisions of the **Kathleen A. Koster Trust** (the "Trust"). Grantor(s) further warrant(s) to Grantee(s) that said Trust is in full force and effect as of the date hereof and has not been amended, modified or revoked, and that Grantor(s) is/are the duly constituted trustee(s) or successor trustee(s) of the Trust. Grantor(s) covenant(s) to Grantee(s) that this conveyance is made pursuant to the authority granted to Grantor(s) by the Trust, and the consideration received by Grantor(s) is in full accordance with the provisions of the Trust.

Dated: 1-14-2019

Kathleen A. Koster Trust

x Kathleen A. Koster
Kathleen A. Koster, Trustee

x Duane E. Koster
Duane E. Koster, Trustee

Duane E. Koster Trust

x Duane E. Koster
Duane E. Koster, Trustee

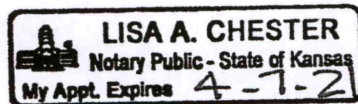
x Kathleen A. Koster
Kathleen A. Koster, Trustee

STATE OF KANSAS)
)ss.
COUNTY OF Finney)

BE IT REMEMBERED, That on this 14 day of **January, 2019**, before me, the undersigned, a Notary Public in and for said County and State, came **Kathleen A. Koster, Trustee** and **Duane E. Koster, Trustee** of the **Kathleen A. Koster Trust and Duane E. Koster Trust** and who is/are personally known to me to be the same person(s) who executed the within instrument of writing, and duly acknowledged the execution of the same as his/her/their free act and deed for the purposes expressed therein pursuant to the authority granted by said Trust Agreement.

Lisa A. Chester
Notary Public

My appointment expires:



ONLY FOR USE IN COUNTIES APPROVED TO ACCEPT ONE-PART FORMS (See website information below)
KANSAS REAL ESTATE SALES VALIDATION QUESTIONNAIRE

FOR COUNTY USE ONLY:									
DEED									
BOOK _____ PAGE _____	COV# _____	CO. NO. _____	MAP _____	SEC _____	SHEET _____	QTR _____	BLOCK _____	PARCEL _____	OWN _____
RECORDING DATE ____/____/____	TYPE OF INSTRUMENT _____	SPLIT <input type="checkbox"/>	MO _____	YR _____	TY _____	AMOUNT _____	S _____	V _____	
	CR _____ RS _____ DE _____	MULTI <input type="checkbox"/>							

<p>SELLER (Grantor)</p> <p>NAME <u>Duane Koster</u></p> <p>MAILING <u>3012 Archer Rd</u></p> <p>CITY/ST/ZIP <u>Garden City KS 67846</u></p> <p>PHONE NO. <u>620-271-4491</u></p> <p>Email (optional) _____</p>	<p>BUYER (Grantee)</p> <p>NAME <u>Sandy Hill Enterprises</u></p> <p>MAILING <u>10165 W River Rd</u></p> <p>CITY/ST/ZIP <u>HOODLAND KS 67851</u></p> <p>PHONE NO. <u>620-271-5283</u></p> <p>Email (optional) _____</p>
---	---

IF AN AGENT SIGNS THIS FORM, BOTH BUYER AND SELLER TELEPHONE NUMBERS MUST BE ENTERED.

<p>BRIEF LEGAL DESCRIPTION</p> <p><u>1/2 15 ac 10,</u> <u>0/4 11 - 26-34</u></p>	<p>Property / Situs Address: _____</p> <p>Name and Mailing Address for Tax Statements See Above</p> <p align="center"><u>See Above</u></p>
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1. Check any special facts that apply:

Sale between immediate family members:
Specify the relationship _____

Sale involved corporate affiliates or related entities

Auction Sale (absolute auction Yes No)

Short sale (amount of lien(s) exceeds sale proceeds)

Transfer in lieu of foreclosure or repossession

Sale involved a build-to-suit or leaseback arrangement

Sale by judicial order (by a guardian, executor, conservator, administrator, or trustee of an estate)

Sale involved a government agency or public utility

Buyer (new owner) is a religious, charitable, or benevolent organization, school or educational association

Buyer (new owner) is a financial institution, insurance company, pension fund, or mortgage corporation

Sale of only a partial interest in the real estate

Sale involved a trade or exchange of properties

None of the above

2. Check use of property at the time of sale:

Single family residence

Agricultural land

Farm/Ranch With residence

Condominium unit

Vacant land

Other: (Specify) _____

Mineral rights included? Yes No

Apartment Building

Commercial/Industrial bldg.

3. Was the property rented or leased at the time of sale?

Yes (number of years remaining on lease _____)

Tenant is buyer

No

4. Did the sale price include an operating business?

Yes (estimated value \$ _____)

No

5. Was any personal property included in the sale price (such as furniture, equipment, inventory, machinery, crops, etc.)?

Yes No If yes, please describe _____

Estimated value of all personal property items included in the sale price \$ _____

If Mobile Home: Year _____ Model _____

6. Were any changes made to the property since January 1st?

Yes No

Demolition New Construction Remodeling Additions

Date completed _____ Amount \$ _____

7. Were any delinquent property taxes paid by the buyer? Amt. \$ _____

Yes AND the amount was included in the total sale price

Yes but the amount was not included in the total sale price

No, delinquent property taxes were included in the sale

8. Method of Financing (check all that apply):

New loan(s) from a financial institution IRS 1031 Exchange

Seller financing Assumption of an Existing loan(s)

All-cash Trade of property Not applicable

9. Was the property offered to other potential buyers?

Yes: Advertised (listed, Internet, yard sign, word-of-mouth, etc.)

No: Private purchase (not offered on the open market)

10. Does the buyer hold title to any adjoining property?

Yes No

11. Are there any additional facts that would cause this sale to be a distressed, forced, or non-arms length exchange?

Yes No If yes, please describe _____

K.S.A 79-1437g. Same; penalty for violations. Any person who shall falsify the value of real estate transferred shall be deemed guilty of a misdemeanor and upon conviction thereof shall be fined not more than \$500.

12. TOTAL SALE PRICE \$ 1,350,000

DEED DATE 1, 14, 19

13. I have read the instructions for completing this form and certify that the above information is true and accurate.

Print name Sandy Hill Enterprises

Signature [Signature] Trustee

Grantor (Seller) Grantee (Buyer)

Agent Daytime phone number () _____

Sarah Newfeld
Member

Garden City Field Office
2508 Johns Street
Garden City, KS 67846-2804



Phone: 620-276-2901
Fax: 620-276-9315
www.agriculture.ks.gov

Mike Beam, Interim Secretary

Laura Kelly, Governor

February 25, 2019

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

Re: Water Right File Nos. 28871_D1, 29939, 33676, 33677

Dear Mr. Norquest:

This is to advise you that Jacob Nuefeld 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.

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,



Michael A. Meyer
Water Commissioner

MAM
Enclosures