

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

1. File Number: <b>26678</b>	2. Status Change Date: <b>4-15-19</b>	3. Change Num: <b>C1</b>	4. Field Office: <b>04</b>	5. GMD: <b>03</b>
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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: <b>4/8/19</b>
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8a. Landowner, WUC, New to system <input type="checkbox"/>  <b>CIRCLE N FARMS LLC</b> <b>1105 E 7TH ST</b> <b>DOUGLASS KS 67039</b>	8c. applicant New to system <input type="checkbox"/>  Person ID <u><b>65240</b></u> Add Seq# <u><b>1</b></u>
--	--

8b. Landowner(s) New to system <input type="checkbox"/>  Person ID _____ Add Seq# _____	8d. LANDOWNER New to system <input type="checkbox"/>  Person ID _____ Add Seq# _____
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9. Documents and Enclosure(s):  DWR Meter(s) Date to Comply: **12/31/19**     N & P Date to Comply: **12/31/20**

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: **4/8/19**    By: **MAM**  
 Date Entered: \_\_\_\_\_    By: \_\_\_\_\_

File No. **26678**      11. County: HS      Basin: ARKANSAS RIVER      Stream:      Formation Code: **211/331**      Special Use:

12. Points of Diversion										Rate and Quantity				
CHK MOD DEL ENT	PDIV	Qualifier	S	T	R	ID	'N	'W	Comment (AKA Line)	Authorized		Additional		Overlap PD Files
										Rate gpm	Quantity af	Rate gpm	Quantity af	
ENT		NWSWNE	35	28	31	W	3474'	2546'		2505	320	2505	320	

DEL 28034

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	22678																						

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

April 15, 2019

CIRCLE N FARMS LLC  
1105 E 7TH ST  
DOUGLASS KS 67039

RE: Water Right, File No. 26678

Dear Sir:

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

Since this order modifies the original document 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 to call this office. If you would prefer, you could arrange an appointment for additional assistance.

Sincerely,

A handwritten signature in blue ink that reads "Michael A. Meyer".

Michael A. Meyer  
Water Commissioner

MAM:  
enclosures  
pc:

GROUNDWATER MANAGEMENT DISTRICT NO. 3

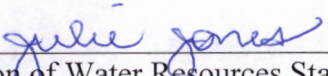
**CERTIFICATE OF SERVICE**

On this 15<sup>th</sup> day of April, 2019, I hereby certify that the foregoing Approval of Application for Change in Point of Diversion, Water Right, File No. 26,678, dated 15<sup>th</sup> day of April, 2019 was mailed postage prepaid, first class, US mail to the following:

CIRCLE N FARMS LLC  
1105 E 7TH ST  
DOUGLASS KS 67039

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. 26678

**RECEIVED**  
 4:50 PM  
 APR 08 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: CIRCLE N FARMS LLC

Phone Number: (     ) \_\_\_\_\_ Email address: \_\_\_\_\_

Name and address of Water Use Correspondent: CIRCLE N FARMS LLC

Phone Number: (     ) \_\_\_\_\_ Email address: \_\_\_\_\_

3. The presently authorized place of use is:

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	

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	

<b>For Office Use Only: Code</b> _____ <b>Fee \$</b> _____ <b>TR #</b> _____ <b>Receipt Date</b> _____ <b>Check #</b> _____
---

5. **Presently authorized point of diversion:**  
 One in the NW Quarter of the SW Quarter of the NE Quarter  
 of Section 35, Township 28 South, Range 31 (W),  
 in HASKELL County, Kansas, 3600 feet North 2400 feet West of Southeast corner of section.  
 Authorized Rate 2505 GPM Authorized Quantity 320 AF Depth of well \_\_\_\_\_ (feet)  
 (DWR use only: Computer ID No. 2 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 NW Quarter of the SW Quarter of the NE Quarter  
 of Section 35, Township 28 South, Range 31 (W),  
 in HASKELL County, Kansas, 3474 feet North 2546 feet West of Southeast corner of section.  
 Proposed Rate \_\_\_\_\_ Proposed Quantity \_\_\_\_\_ Proposed well depth (feet) ≈ 535'  
 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) lack of production on current PD

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

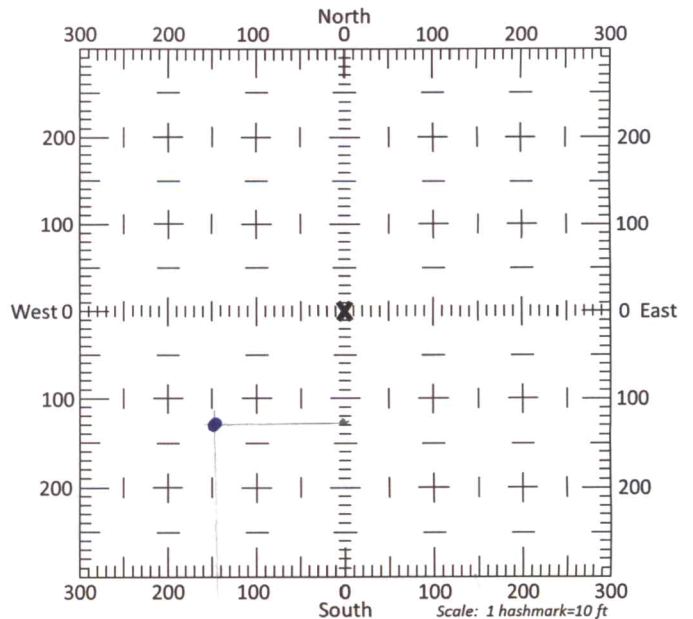
9. The change(s) (was)(will be) completed by?  
 \_\_\_\_\_

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

11. Groundwater Management District recommendation attached?  
 Yes  No

12. Assisted by CAC

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 8th day of April, 2019.

Jacobo Newdorf  
(Owner)

\_\_\_\_\_  
(Spouse)

Jacobo Newdorf  
(Please Print)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Owner)

\_\_\_\_\_  
(Spouse)

\_\_\_\_\_  
(Please Print)

\_\_\_\_\_  
(Please Print)

State of Kansas }  
County of Stimmy } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 8th day of April, 2019.

Julie Jones  
Notary Public

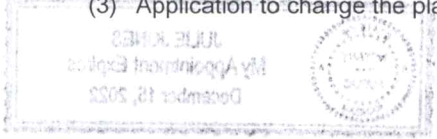
My Commission Expires \_\_\_\_\_.

**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



**SUMMARY ORDER APPROVING APPLICATION FOR CHANGE AND IMPOSING CONDITIONS**

This Summary Order is issued under authority of K.S.A. 82a-708b, as amended, and K.A.R. 5-5-1, *et seq.* and other applicable provisions of the *Kansas Water Appropriation Law, K.S.A. 82a-701 et. seq.*, and rules and regulations promulgated thereunder, With the exception of those conditions expressly contained herein, this Summary Order does not change the terms, conditions and limitations of File No. 26678.

1. A change application was received on APRIL 8, 2019 requesting that the place of use and / or point of diversion authorized under the above-referenced file number be changed as described in the application.
2. On and after the effective date of this summary order, the authorized place(s) of use shall be located substantially as shown on the topographic map accompanying the application to change the place of use.  Applicable  Not Applicable
3. The change in point of diversion shall not impair existing rights and shall be limited to the same source or sources of water as previously authorized. The point of diversion authorized by this summary order shall be located within a 50 foot radius of the authorized point(s) of diversion.  Applicable  Not Applicable
4. The point(s) of diversion described herein is administratively corrected to be more accurately described using the Global Positioning System (GPS), as described in the application.  Applicable  Not Applicable
5. The point(s) of diversion authorized herein shall not actually be located more than \_\_\_\_\_ feet from the previously authorized point(s) of diversion.  Applicable  Not Applicable
6. As required by K.A.R. 5-3-5d, if the works for diversion is a well with a diversion rate of 100 gallons per minute or more, a tube or other device suitable for making water level measurements shall be installed, operated and maintained in accordance with K.A.R. 5-6-13.  Applicable  Not Applicable
7. **The owner of the authorized place(s) of use shall properly install an acceptable water flow meter on or before December 31, 2019**, or before the first use of water, whichever occurs first. The water flow meter shall be installed, operated and maintained in accordance with K.A.R. 5-1-4 through 5-1-12. As required by K.S.A. 82a-732, as amended, and K.A.R. 5-3-5e, the owner shall maintain records and report the reading of the water flow meter and the total quantity of water diverted annually to the Chief Engineer by March 1 following the end of each calendar year.  Applicable  Not Applicable
8. **Installation of the works for diversion of water shall be completed on or before December 31, 2019**, or within any authorized extension of time. By March 1, 2020 the applicant shall notify the Chief Engineer that construction of the works for diversion has been completed, on the form provided by the Chief Engineer, as required by K.A.R. 5-8-4e.  Applicable  Not Applicable
9. **The completed well log shall be submitted with the required notice.**  Applicable  Not Applicable
10. All diversion works into which any type of chemical or other foreign substance will be injected into the water shall be equipped with an in-line, automatic, quick-closing check valve capable of preventing pollution of the source of the water supply. The check valve(s) shall be installed, operated and maintained in accordance with K.A.R. 5-3-5c.  Applicable  Not Applicable
11. Additional Conditions are attached.  Yes  No
12. In accordance with K.S.A. 82a-708a, as amended, and K.A.R. 5-5-14, all of the owners of the authorized place(s) of use of water appropriated under the above-referenced file number are responsible for compliance with its terms, conditions and limitations, as amended and/or supplemented by this Summary Order, and with applicable provisions of the *Kansas Water Appropriation Law* and the *Rules and Regulations* promulgated thereunder. Failure to comply with these provisions may result in civil penalties pursuant to K.S.A. 82a-737, as amended, and/or the suspension or revocation and dismissal of the water or appropriation right or any other enforcement actions authorized by law.

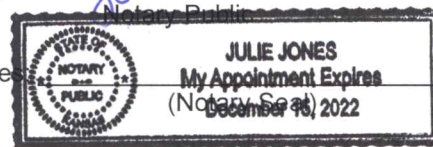
**Administrative Appeal and Effective Date of Order**

If you are aggrieved by this order, pursuant to K.S.A. 82a-1901, you may request an evidentiary hearing before the Chief Engineer or request administrative review by the Secretary of Agriculture. A request for hearing by the Chief Engineer must be filed within **15 days** of service of this Order and a request for administrative review by the Secretary must be filed within **30 days** pursuant to K.S.A. 77-531. Any request for administrative review must state a basis for review pursuant to K.S.A. 77-527. File any request with **Kansas Department of Agriculture, Legal Division, 1320 Research Park Drive, Manhattan, KS 66502**. Failure to timely request a hearing or review may preclude review under the Kansas Judicial Review Act.

*For Use by Register of Deeds*

FOR OFFICE USE ONLY  
**APPLICATION APPROVED AND  
SUMMARY ORDER ISSUED**

By: Michael A. Meyer  
Duly Authorized Designee of the Chief Engineer  
(Print Name): MICHAEL A. MEYER  
Division of Water Resources - Kansas Department of Agriculture  
Date of Issuance: APRIL 15, 2019  
State of Kansas )  
County of Finney ) SS  
Acknowledged before me on April 15, 2019  
by Michael A. Meyer  
Signature: Julie Jones  
Notary Public  
My commission expires \_\_\_\_\_







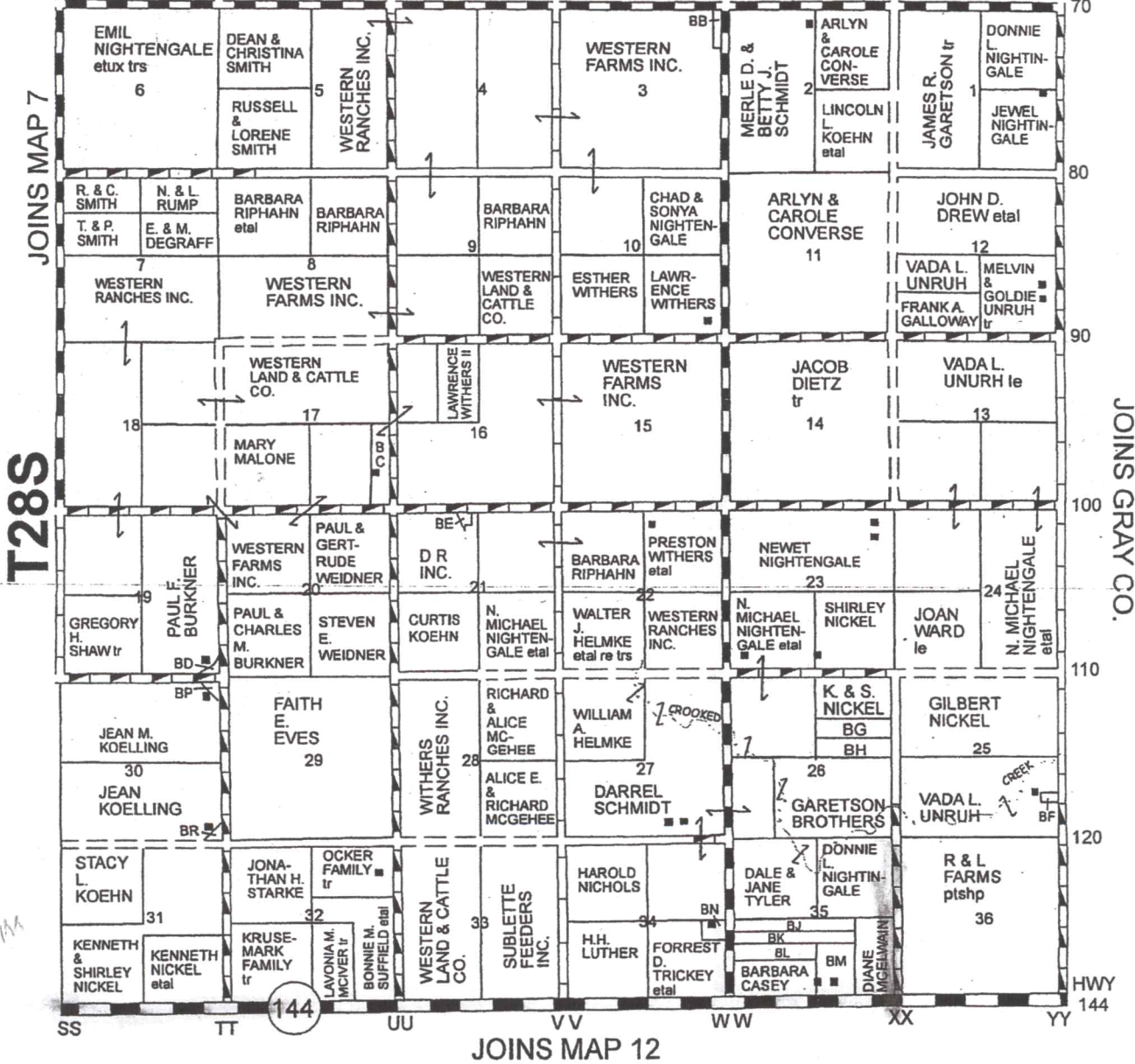
PICKENVILLE



# MAP 8

## R31W

### JOINS MAP 4



FROM US 85

CIRCLE N FARMS  
NE 35 - 28S - 31 W  
HASKELL



State of Kansas, Haskell County  
 This instrument was filed for  
 Record on April 30, 2015 10:11:00 AM  
 Recorded in Book 223 Page 775-780  
 Fee: \$52.00 201500364



*Candy Huffine*  
 Candy Huffine, Register of Deeds

Entered in Transfer Record 4  
 in my office this 30<sup>th</sup> day of  
 of April, 2015.

*Pamela Carr*  
 County Clerk

**KANSAS QUITCLAIM DEED**

Don Nightingale a/k/a Donnie Lee Nightingale and Jewel Nightingale, husband and wife, of Gray County, Kansas, hereby quitclaim and convey to Circle N Farms LLC, a Kansas limited liability company, real estate located in Haskell County, Kansas, as more fully described on Exhibit A attached hereto and incorporated herein by reference, subject to easements, restrictions and reservations of record. This deed is made by way of a contribution; pursuant to K.S.A. 79-1437(e), a sales validation questionnaire is not required per exception (4).

Dated this 19<sup>th</sup> day of January, 2015.

*Don Nightingale by Lori Boese*  
 Don Nightingale by Lori Boese, attorney in fact

*Jewel Nightingale*  
 Jewel Nightingale

STATE OF KANSAS, COUNTY OF FINNEY, ss:

This instrument was acknowledged before me on the 19<sup>th</sup> day of January, 2015, by Lori Boese as attorney in fact for Don Nightingale and Jewel Nightingale.



*Michael E Collins*  
 Notary Public  
 My appointment expires: 19 March 2017

RECEIVED

APR 11 2019

Garden City Field Office  
 DIVISION OF WATER RESOURCES

## **EXHIBIT A**

### **Haskell County, Kansas**

**Northeast quarter (NE/4) of section one (1), township twenty-eight (28) south, range thirty-one (31) West of the 6<sup>th</sup> P.M.**

**Southeast quarter (SE/4) of section one (1), township twenty-eight (28) south, range thirty-one (31) West of the 6<sup>th</sup> P.M.**

**Northeast quarter (NE/4) of section thirty-five (35), township twenty-eight (28) south, range thirty-one (31) West of the 6<sup>th</sup> P.M.**

**Southeast quarter (SE/4) of section thirty-three (33), township thirty (30) south, range thirty-two (32) West of the 6<sup>th</sup> P.M.**

RECEIVED

APR 11 2019

Garden City Field Office  
DIVISION OF WATER RESOURCES

GENERAL DURABLE POWER OF ATTORNEY

**FOR BUSINESS AND FINANCIAL MATTERS  
AND HEALTH CARE DECISIONS**

I, **DON NIGHTINGALE**, a resident of Haskell County, Kansas, do hereby revoke any and all prior powers of attorney which I may have executed, and I do hereby appoint **my wife, JEWEL NIGHTINGALE, and my daughter, LORI BOESE, with either one alone to be able to sign on my behalf**, as my attorney in fact to act and sign for me in my name and stead in all matters, including but not limited to the powers specially designated herein:

**BUSINESS AND FINANCIAL DECISIONS**

1. To transact all of my business at any bank or other financial institution in which I may have deposited or may hereafter deposit or have deposited for me, any funds; to have access to my safety deposit box; to draw checks on my account in said bank or other financial institution; to endorse all checks, drafts and bills of exchange, securities, bonds, or other documents which may require my endorsement for collection or deposit; to waive demand, notice, and notice of protest thereon; and to open, remove from, and add to, items in a bank safety deposit box on my behalf.
2. To prepare, execute, and file both federal and state income tax returns, or amendments thereto, and any claims for refund, or to make any report required by governmental agencies; to contract with and make claims to any governmental organization or private company with regard to medical or retirement related matters; to pay insurance premiums, purchase new insurance policies, cancel insurance policies and collect any refunds therefrom.
3. To open or maintain accounts with stockbrokers; to purchase and sell stocks, bonds, certificates, and all securities of whatever nature or kind; to act as my proxy in connection with any shares of corporate stock or other securities, including any government bonds and partnership interests belonging to me; and to buy, sell, endorse, or transfer shares of stock, bonds, or other securities.
4. To carry on any business transaction of any kind in which I am now or hereafter may become interested, including acting in any capacity I may have as sole proprietor, partner, shareholder, officer, director, LLC member, joint venture LLC member, or joint venturer.
5. To execute any instruments of any kind and involving any property or transactions or rights in which I am now or may hereafter become involved or in which I may have any rights or interests of any kind.

6. To purchase, rent, lease, manage, or otherwise acquire any interest in real or personal property in my name; to sell, assign, and convey property standing in my name or which I may now or hereafter own, at market value; and to invest and reinvest the proceeds from such sales or deposit such proceeds in my account in any bank or financial institution in which I may have or may deposit funds.

7. To sell, convey, exchange, lease, rent, mortgage or encumber any and all personal and real property, including any and all securities, now or hereafter owned by me or any interest in any such property as I may have, and including any real estate which is my homestead; and in my name to make, execute, acknowledge and deliver good and sufficient deeds, leases, mortgages, bills of sale and other conveyances of the same.

8. To operate my farm property with hired labor, tenants, or a farm management service; to supervise the farming operations; to lease or rent my land for cash or on shares; to sell, purchase, exchange, or otherwise acquire or dispose of all farm products, or other proceeds from the land; and to pay on my behalf or charge to me fertilizer, chemicals, or other farm related expenses.

9. To execute contracts, notes, chattel mortgages, and other agreements relating to agriculture with the Commodity Credit Corporation, the Secretary of Agriculture, the Consolidated Farm Services Agency, or any other officer or agency of the federal or state government, or of any corporation organized under them; to enter into acreage reduction agreements; to make soil conservation commitments; and in general, to do all acts necessary to cooperate with any governmental agricultural program and to participate in and receive all payments and other benefits and proceeds under any such programs.

10. To lease my property for oil, gas, or other minerals upon such conditions as may be customary in the community, regardless of whether the term of such lease may extend beyond the termination of this power of attorney.

### HEALTH CARE DECISIONS

11. To consent, refuse consent, or withdraw consent to any care, treatment, service or procedure to maintain, diagnose, or treat a physical or mental condition, and to make decisions about organ donations, autopsies, and disposition of the body.

12. To make all necessary arrangements at any hospital, psychiatric hospital or psychiatric treatment facility, hospice, nursing home or similar institution; to employ or discharge health care personnel to include physicians, psychiatrists, psychologists, dentists, nurses, therapists or any other person who is licensed, certified or otherwise authorized or permitted by the laws of this state to administer health care as the agent shall deem necessary for my physical, mental, and emotional well being.

13. To request, receive, and review any information, verbal or written, regarding my personal affairs or physical or mental health including medical and hospital records and to execute any releases of other documents that may be required in order to obtain such information.

**I HEREBY GIVE AND GRANT** unto my said attorney in fact herein named full power and authority to do and perform all and every lawful act and thing whatsoever that may be necessary to be done, as fully and to all intents and purposes as I might or could do if personally present, and hereby ratify and confirm all that my attorney shall lawfully do, or cause to be done hereunder.

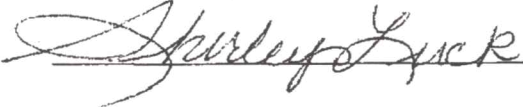
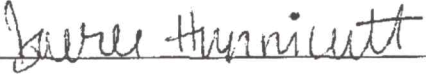
**THIS IS A DURABLE POWER OF ATTORNEY** and the authority of my attorney in fact shall not terminate if I become disabled or incapacitated or in the event of later uncertainty as to whether I am dead or alive.

**IN WITNESS WHEREOF**, I have hereunto set my hand on January 14, 2015.

  
\_\_\_\_\_  
Don Nightingale, by his mark

**WITNESSES:**

We, Shirley Luck and Saerec Hunnicutt  
state that we have on January 14, 2015, witnessed the above mark of Don Nightengale as his signature.

  
\_\_\_\_\_  
  
\_\_\_\_\_

STATE OF KANSAS     )  
                                  )  
COUNTY OF Finney    )

**BE IT REMEMBERED**, that on January 14, 2015, before me, the undersigned, a notary public in and for the county and state aforesaid, came **Don Nightingale**, Shirley Luck and Saeree Hannicutt, who are known to me to be the same persons who executed the within instrument of writing, and such persons duly acknowledged the execution of the same.

**IN WITNESS WHEREOF**, I have hereunto set my hand and affixed my notarial seal, the day and year last above written.

Dona J Rouse  
Notary Public

My Term Expires:  
Aug 16, 2015

