一下的表示。这些表别也是特别是特别的一只有一种的一个。

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| - Thirty Comments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Claim. Recorder Deputy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |
| terine der                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | CERTIFICATE OF LOCATION - HEYADA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | THE UNDERSIGNED, hereby certifies that EXXON CORPORATION, by its Agent, the undersigned, does hereby locate the HOP 9 Lode Mining Claim on this 22ND day of NOVEMBER, 19 81, situated in the MT. HOPE Mining District, EUREKA County, Nevada.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | - Said Claim is located in the <u>sw</u> (Quarter) Section(s) 19 Township 22 NORTH , Range <u>52 EAST</u> , Mt. Diablo P.M., and more particularly described as follows, to wit:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | * Beginning at the northeast corner post No. 1,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |
| University and Company of the Compan | Thence, 59.9 feet in a s 1°37'w direction to Post No. 2, Thence, 664.7 feet in a s 89°05'w direction to Post No. 3, Thence, 59.9 feet in a N 1°37'E direction to Post No. 5; Thence, 664.7 feet in a N 89°05'E direction to Post No. 6, Thence, 664.7 feet in a N 89°05'E direction to Post No. 1,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |
| Calden and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | the point of beginning and all posts being 4" x 4" x 4날.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |
| · · · · · · · · · · · · · · · · · · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | The claim monument on which the Notice is posted lies approximately midway between the two sides and is feet from the EASTERLY end and 1309.4 feet from the WESTERLY end.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | To tie this Claim to the Public Survey, begin at the SOUTHEAST corner,  Section 36 , Township 23 NORTH , Range 51 EAST , WE Diablo P.M., bear  SOUTH , 14048.6 feet, and EAST , 5691.3 feet to the northeast corner of this                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |
| PART OF STREET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Claim. *  The location work consisted of making the map as provided in NRS 517.040.  Dated, A.D., 19_82_, and filed in duplicate.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |
| State of Section States                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | *NOTE: BEARINGS ARE GRID BEARINGS (c/o Exxon Minerals Company NEVADA STATE PLANE COORDINATE P. 0. Box 120 SYSTEM - EAST ZONE Denver, Colorado 80201)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
| A CONTRACTOR OF THE PARTY OF TH | 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |  |  |  |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | AT REDUCE POLICY OF SECULATION OF SECURATION OF SECURITION OF SECURITIES OF SECURITION OF SECURITION OF SECURITIES OF SECURITION OF SECURITIES |  |  |  |  |
| - Christian III                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | STATE OF ZWYOMES LELL SS.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | CHAP OF SFREMONT                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Subscribed and sworn to before me this 77H day of JANOARI 19.82.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Hotacy, Public Patricia a van Houten - Notacy Public                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | My commission expires: County of Framont Wyoming                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | APRIL 4. 1982  BOOK   O O PAGE 476                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |

| 6 1 1                                                                                                                                                                                                                                                                                                                                                                                           | 83046                                                                               | 는 기계 |  |                                       |                 |                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------|--|---------------------------------------|-----------------|-------------------------------------------------------|
| 95 9                                                                                                                                                                                                                                                                                                                                                                                            | _                                                                                   |                                          |  |                                       |                 |                                                       |
| N- 05   20                                                                                                                                                                                                                                                                                                                                                                                      | STATE OF NEVADA                                                                     |                                          |  |                                       |                 |                                                       |
| 4 3 2                                                                                                                                                                                                                                                                                                                                                                                           | COUNTY OF EUREKA                                                                    | SS. Fee \$, No                           |  |                                       |                 |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 | COUNTY OF ECKERN                                                                    |                                          |  |                                       |                 |                                                       |
| <u>[4</u>                                                                                                                                                                                                                                                                                                                                                                                       | Filed for record this                                                               | day of 1                                 |  |                                       |                 |                                                       |
| These diagrams explain method of description of                                                                                                                                                                                                                                                                                                                                                 | Reception No.                                                                       |                                          |  |                                       |                 |                                                       |
| claim-                                                                                                                                                                                                                                                                                                                                                                                          | Recorder                                                                            | Deputy                                   |  |                                       |                 |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                     | · · · · · · · · · · · · · · · · · · ·    |  |                                       |                 |                                                       |
| CERTIFICATE OF LOCATION - NEVADA  THE UNDERSIGNED, hereby certifies that EXXON CORPORATION, by its Agent, the undersigned, does hereby locate the HOP 11 Lode Mining Claim on this Lode Mining Claim on this MIT. HOPE MIT. HOPE County, Nevada.                                                                                                                                                |                                                                                     |                                          |  |                                       |                 |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                     |                                          |  | 17TH day of NOVEMBER District, EUREKA | County, Nevada. |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                     |                                          |  | pistrict,                             | the NE (Quart   | ter) Section(s): 11  ablo P.M., and more particularly |
| - Said Claim 15 located in                                                                                                                                                                                                                                                                                                                                                                      | e 51 EAST, Mt. Dia                                                                  | ablo P.M., and more particularly         |  |                                       |                 |                                                       |
| described as follows, to wit:                                                                                                                                                                                                                                                                                                                                                                   | ,                                                                                   |                                          |  |                                       |                 |                                                       |
| * Beginning at the northeast corner post No. 1,                                                                                                                                                                                                                                                                                                                                                 |                                                                                     |                                          |  |                                       |                 |                                                       |
| _                                                                                                                                                                                                                                                                                                                                                                                               | - a direct                                                                          | ion to Post No. 2.                       |  |                                       |                 |                                                       |
| Thence, 338 fo                                                                                                                                                                                                                                                                                                                                                                                  | et in a s 16°33'W direct                                                            | ion to Post No. 4.                       |  |                                       |                 |                                                       |
| Thence, 338 fo                                                                                                                                                                                                                                                                                                                                                                                  | eet in a N 16°33'E direct                                                           | ton to Post No. 6                        |  |                                       |                 |                                                       |
| Thence, 338 f                                                                                                                                                                                                                                                                                                                                                                                   | eet in a N 16 33 E direct<br>eet in a N 16°33 E direct<br>eet in a S 75°51'E direct | ion to Post No. 1,                       |  |                                       |                 |                                                       |
| thence, 183.5                                                                                                                                                                                                                                                                                                                                                                                   | all mosts being 4                                                                   | י" x 4" x 4אַנ                           |  |                                       |                 |                                                       |
| the point of beginning and all posts being 4" x 4" x $4\frac{1}{2}$ ".  The claim monument on which the Notice is posted lies approximately midway between the two sides and is $20$ feet from the NORTHERLY end and $656$ feet                                                                                                                                                                 |                                                                                     |                                          |  |                                       |                 |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                     |                                          |  | between the two sides and is          |                 |                                                       |
| Claim to the Public Survey, begin at the SOUTHEAST corner,                                                                                                                                                                                                                                                                                                                                      |                                                                                     |                                          |  |                                       |                 |                                                       |
| Section 36 , Township 23 NORTH , Range 51 EAST , Mt. Diablo P.M., Dear Section 36 , Township 23 NORTH , Range 601 to the northeast corner of this                                                                                                                                                                                                                                               |                                                                                     |                                          |  |                                       |                 |                                                       |
| from the SOUTHERLY end.  To tie this Claim to the Public Survey, begin at the SOUTHEAST CORNER,  Section 36 , Township 23 NORTH , Range 51 EAST , Mt. Diablo P.M., bear SOUTH , 6627.6 feet, and WEST , 6087.1 feet to the northeast corner of this Claim. *  The location work consisted of making the map as provided in MRS 517.040.  Dated JANUARY 7 , A.D., 1982 , and filed in duplicate. |                                                                                     |                                          |  |                                       |                 |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                     |                                          |  | Da tea                                | \ \             |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                     |                                          |  | *NOTE: BEARINGS ARE GRID BEA          | EXXON COR       | RPORATION<br>on Minerals Company                      |
| NEVADA STATE PLANE CO                                                                                                                                                                                                                                                                                                                                                                           | IDRDINATE D 0 801                                                                   | x 120<br>Colorado 80201)                 |  |                                       |                 |                                                       |
| SYSTEM - EAST ZONE                                                                                                                                                                                                                                                                                                                                                                              | Denver,                                                                             |                                          |  |                                       |                 |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 | Ву:                                                                                 | hel I duke                               |  |                                       |                 |                                                       |
| Para Control                                                                                                                                                                                                                                                                                                                                                                                    | /////                                                                               | Its Agent<br>-Locator-                   |  |                                       |                 |                                                       |
| SS SS                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                     |                                          |  |                                       |                 |                                                       |
| N ESSE                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                     |                                          |  |                                       |                 |                                                       |
| STATE OF SWYDMING                                                                                                                                                                                                                                                                                                                                                                               | )                                                                                   |                                          |  |                                       |                 |                                                       |
| 5                                                                                                                                                                                                                                                                                                                                                                                               | SS.                                                                                 |                                          |  |                                       |                 |                                                       |
| CONTY OF FREMONT                                                                                                                                                                                                                                                                                                                                                                                | to before me this 7TH                                                               | day of JANUARY                           |  |                                       |                 |                                                       |
| ப் Subscribed and sworn                                                                                                                                                                                                                                                                                                                                                                         | to before me this                                                                   | 7                                        |  |                                       |                 |                                                       |
| 19 82                                                                                                                                                                                                                                                                                                                                                                                           | $\mathcal{U}$                                                                       | True a Con Bruta                         |  |                                       |                 |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                     | otary Public                             |  |                                       |                 |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                     | PATRICIA A. VAN HOUTEN : Holary Public   |  |                                       |                 |                                                       |
| My commission expires:                                                                                                                                                                                                                                                                                                                                                                          |                                                                                     | County of Framont State of Wyoming       |  |                                       |                 |                                                       |
| APRIL 4, 1982                                                                                                                                                                                                                                                                                                                                                                                   | OK 1 0 0 PAGE 4 78                                                                  | My Commission expres April 4, 1992       |  |                                       |                 |                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                     | 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그    |  |                                       |                 |                                                       |