

This STATEMENT is presented for filing pursuant to the Nevada Uniform Commercial Code

145131

Receipt #

1. FILE NO OF ORIG FINANCING STATEMENT 1225	1A. DATE OF FILING OF ORIG FINANCING STATEMENT June 6, 1988	1B. DATE OF ORIG FINANCING STATEMENT	1C. PLACE OF FILING ORIG FINANCING STATEMENT EUREKA COUNTY
2. DEBTOR (AS APPEARS ON ORIGINAL FINANCING STATEMENT) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) CHANEY, SANDRA L.			2A. SOCIAL SECURITY OR FEDERAL TAX ID NO
2B. MAILING ADDRESS (AS APPEARS ON ORIGINAL FINANCING STATEMENT) P.O. BOX 614		2C. CITY STATE EUREKA, NV	2D. ZIP CODE 89316
3. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input checked="" type="checkbox"/> INDIVIDUAL (LAST NAME FIRST) CHANEY RANCHES			3A. SOCIAL SECURITY OR FEDERAL TAX ID NO
3B. MAILING ADDRESS P.O. BOX 614		3C. CITY STATE EUREKA, NV	3D. ZIP CODE 89316
4. ADDITIONAL DEBTOR (IF ANY) (ONE NAME ONLY) <input type="checkbox"/> LEGAL BUSINESS NAME <input type="checkbox"/> INDIVIDUAL (LAST NAME FIRST)			4A. SOCIAL SECURITY OR FEDERAL TAX ID NO
4B. MAILING ADDRESS		4C. CITY STATE	4D. ZIP CODE
5. SECURED PARTY NAME CIRCLE BAR N RANCH, a Nevada general partnership MAILING ADDRESS P.O. BOX 1576 CITY SPARKS STATE NV ZIP CODE 89431			5A. SOCIAL SECURITY NO. FED TAX NO. OR BANK TRANSIT AND A.B.A. NO
6. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE			6A. SOCIAL SECURITY NO. FED TAX NO. OR BANK TRANSIT AND A.B.A. NO
7. <input type="checkbox"/> CONTINUATION—The original Financing Statement between the foregoing Debtor and Secured Party bearing the file number and date shown above is continued. If collateral is crops or timber, fixtures, or oil, gas or minerals check here <input type="checkbox"/> and insert description of real property on which growing or to be grown or to which affixed or to be affixed or from which to be extracted in Item 8 below. If crops or fixtures, also insert name of record owner of real estate. Effective only if submitted within 6 months prior to expiration date.			
<input type="checkbox"/> RELEASE—From the collateral described in the Financing Statement bearing the file number shown above, the Secured Party releases the collateral described in Item 8 below. Release does not terminate debt.			
<input type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all or part of the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 8 below			
<input checked="" type="checkbox"/> TERMINATION—The Secured Party certifies that the Secured Party no longer claims a security interest under the Financing Statement bearing the file number shown above			
<input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 8 below (Signature of Debtor(s) and Secured Party(ies) required on all amendments)			

THIS SPACE FOR USE OF FILING OFFICER

9. (Date) April 5, 1988

By: _____ (SIGNATURE OF DEBTOR(S)) _____ (TITLE)

By: [Signature] _____ (SIGNATURE OF SECURED PARTY) PARTNER (TITLE)
CIRCLE BAR N RANCH (TYPE NAME(S))

10. This Space for Use of Filing Officer (Date, Time, Filing Office)

BOOK 246 PAGE 446
OFFICIAL RECORDS
RECORDED AT THE REQUEST OF
Frontier Title
93 APR -8 19:46
EUREKA COUNTY, NEVADA
M.H. REGALDATE RECORDING
FILE NO. 1100
145131
BOOK 246 PAGE 446

11. Return Copy to

NAME FRONTIER TITLE COMPANY
ADDRESS ATTN: PAM ACUIRRE//EU45009-PA
CITY, STATE P.O. BOX 228
AND ZIP ELKO, NEVADA 89803

(1) FILING OFFICER COPY- ALPHABETICAL
UNIFORM COMMERCIAL CODE - FORM UCC-2 (REV. 8-80) Prepared by the Nevada Secretary of State

FILING FEE
SEE INSTRUCTIONS