

17954(72) Eureka Cty, NV.

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

1. FILE NO. OF ORIG. FINANCING STATEMENT #1273	1A. DATE OF FILING OF ORIG. FINANCING STATEMENT 06/27/89	1B. DATE OF ORIG. FINANCING STATEMENT	1C. PLACE OF FILING ORIG. FINANCING STATEMENT Eureka Cty, NV.
2. DEBTOR (LAST NAME FIRST) Diamond Land and Cattle, a partnership		2A. SOCIAL SECURITY OR FEDERAL TAX NO.	2B. ZIP CODE
2B. MAILING ADDRESS 627 Court Street		2C. CITY, STATE Elko, Nevada	2D. ZIP CODE 89801
3. ADDITIONAL DEBTOR (IF ANY) (LAST NAME FIRST) Minor James and Jessie F. (see attached)		3A. SOCIAL SECURITY OR FEDERAL TAX NO. 95-2630767	3B. ZIP CODE
3B. MAILING ADDRESS P O Box 398		3C. CITY, STATE San Jacinto, CA	3D. ZIP CODE 92383
4. SECURED PARTY NAME The Travelers Insurance Company MAILING ADDRESS 2121 N. California Blvd., Ste. 1000 CITY Walnut Creek STATE CA ZIP CODE 94596		4A. SOCIAL SECURITY NO., FED. TAX NO., OR BANK TRANSIT AND R.T.S. NO. 06-0566090	
5. ASSIGNEE OF SECURED PARTY (IF ANY) NAME MAILING ADDRESS CITY STATE ZIP CODE		5A. SOCIAL SECURITY NO., FED. TAX NO., OR BANK TRANSIT AND R.T.S. NO.	
6. 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 7 below. If crops or fixtures, also insert name of record owner of real estate. Effective if submitted within 6 months of expiration date.			
7. <input checked="" 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 7 below. If crops or fixtures, also insert name of record owner of real estate. Effective if submitted within 6 months of expiration date.			
8. <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 7 below. Release does not terminate debt.			
9. <input type="checkbox"/> ASSIGNMENT—The Secured Party certifies that the Secured Party has assigned to the Assignee above named, all the Secured Party's rights under the Financing Statement bearing the file number shown above in the collateral described in Item 7 below.			
10. <input 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.			
11. <input type="checkbox"/> AMENDMENT—The Financing Statement bearing the file number shown above is amended as set forth in Item 7 below. (Signature of Debtor and Secured Party required on all amendments.)			
12. <input checked="" type="checkbox"/> OTHER (May be used for change of address.)			

SECURED PARTY CHANGE OF ADDRESS

7. CHANGE OF SECURED PARTY ADDRESS TO: **THE TRAVELERS INSURANCE COMPANY
ONE TOWER SQUARE-2SHS
HARTFORD, CT 061832021
ATTN: INVESTMENT ADMINISTRATOR**

8. (Date) _____ 19____

By: _____ (TITLE)
THE TRAVELERS INSURANCE COMPANY

By: *C. Phelan Henneley* (SIGNATURE OF SECURED PARTY) (TITLE)

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

UCC FILE NO. #

**FILED THIS 9TH DAY OF
WED. 1994 AT 30 MINS.
PAST 8 A.M. RECORDS
OF EUREKA COUNTY, NV.**

M.W. Roberts
EUREKA COUNTY RECORDER

10. Return Copy to

NAME
ADDRESS
CITY, STATE
AND ZIP

**THE TRAVELERS INSURANCE COMPANY
ONE TOWER SQUARE - 2 SHS
HARTFORD, CT 06183-2021
ATTN: INVESTMENT ADMINISTRATION**

150452

THIS SPACE FOR USE OF FILING OFFICER

Diamond Land and Cattle
Loan No. 179540

EXHIBIT "A"

Additional Debtors

DEBTOR:

James Minor
James Minor

Jessie F. Minor
Jessie F. Minor

ADDITIONAL DEBTOR:

Daniel H. Russell by Thomas S. Van Horne his attorney in fact
Daniel H. Russell by Thomas S. Van Horne his attorney in fact

Robertta A. Russell by Thomas S. Van Horne her attorney in fact
Robertta A. Russell by Thomas S. Van Horne her attorney in fact

SECURED PARTY:

THE TRAVELERS INSURANCE COMPANY,
a Connecticut corporation

By: Deborah F. Dolinsky
Deborah F. Dolinsky
Authorized Signer

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