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FOLL	LexisNexis Do	cuint Solution:		02 02	OOK 351 POFFICIAL RECORD AT THE 1100 POEM SOLVENS OCT 15 AM S	9: 17
A. Ni	125 Park Avent New York, N	ue		,		EVAÑA
B. SE	Phone: (212) 355	5-3-			CIVA GOUNTE A REBALEATURE LE 110.	CORDER
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	tor: Newmont USA Limited s: County Recoder, Eure		1		\wedge	
			-	THE ABOVE SPA	CE IS FOR FILING OF	FICE USE ONLY
la. INITIAL F	INANCING STATEMENT FILE #	155, 9/30/94			1b. This FINANCING S	TATEMENT AMENI
2. TERM	INATION: Effectiveness of the I	Fina Statement identified above	is terminated with respect to	security interest(s) of the S	REAL ESTATE REC	ORDS
3. CON	FINUATION: Effectiveness of the ued for the additional period provided	ne Fang Statement identified abo				
	GNMENT (full or partial): Give n.		address of assignee in item	7c; and also give name of a	ssignor in item 9	-
	MENT (PARTY INFORMATIO			of record. Check only one		_
Also check	one of the following three boxes a	und pa appropriate information in	items 6 and/or 7.			
	GE name and/or address: Give cur if name change) in item 7a or 7b a	inent it hame in item 6a or 6b; als ind/w address (if address change	o give new DELET to be d	E name: Give record name eleted in item 6a or 6b	ADD name: Comp item 7c: also comp	lete item 7a or 7b, a lete items 7d-7g (if
	T RECORD INFORMATION: ANIZATION'S NAME		-			/ /
	nont Mining Corporation	on		_ /		The same of the sa
(1) 6b. IND	VIDUAL'S LAST NAME	_	FIRST NAME	1	MIDDLE NAME	SUE
. CHANGE	D (NEW) OR ADDED INFORMA	ATIC	$\leftarrow\leftarrow$	-		
l l	ANIZATION'S NAME /MONT USA Limited		1		/	
שפר	VIDUAL'S LAST NAME		FIRST NAME	/_/	MIDDLE NAME	Sur
				\vee /	7.77	
c. MAILING	ADDRESS		CITY		STATE POSTAL CODI	E COI
d. TAX ID #:	SSN OR EIN ADD'L INFO RE	7HE OF ORGANIZATION	71. JURISDICTION OF C	RGANIZATION	7g. ORGANIZATIONAL II	O #, if any
	ORGANIZATION DEBTOR	coration	DÉ		DE-0623413	
Describe c	ollateral deleted or added	d, or entire restated collater	al description, or describe	collateral assigned.	>	
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adds collate 9a. ORGA Bank	SECURED PARTY OF REC trail or adds the authorizing Debtor. ANIZATION'S NAME One, National Associa	or its a Termination authorized	by a Debtor, check here	and enter name of DEBT(OR authorizing this Amend	authorized by a Deb Iment.
9a. ORGA Bank	ral or adds the authorizing Debtor, ANIZATION'S NAME	or its a Termination authorized	by a Debtor, check here	and enter name of DEBT(OR authorizing this Amend	authorized by a Deb Iment.
9a. ORGA Bank 9b. INDIV	oral or adds the authorizing Debtor, ANIZATION'S NAME One, National Associa	or its a Termination authorized	by a Debtor, check here	and enter name of DEBT(OR authorizing this Amend	lment.