

**AFFIDAVIT AND DECLARATION OF CLAIMS HELD
IN NEVADA PURSUANT TO NRS 517.188**

The following Document contains no Personal
Information as defined by NRS 603A.040

**MUST BE COMPLETED IN BLACK INK
MUST BE FILED ON OR BEFORE NOVEMBER 1, 2010**



The undersigned declares that the greatest number of mining claims held in Nevada on the date of the filing made in this county pursuant to NRS 517.230 for the year 2010 is (check one):

- Less than 11 claims (Fee is \$0 per claim)
- Not less than 11 and not more than 199 (Fee is \$70 per claim)
- Not less than 200 and not more than 1,299 (Fee is \$85 per claim)
- Not less than 1,300 (Fee is \$195 per claim)

RECORDER'S STAMP

The number of mining claims held in Eureka County is 273 claims.
The total fee payable for claims held in this county is \$ 23,205.00 (not including recording fees).


Name of claim(s): BLM Serial No(s):
See Document #215542 for claims.

Please attach additional page(s) as necessary.

Fee remittance method (check one):

- \$ _____ This is the total fee and it is being paid at the time of filing.
- \$ _____ This is half the fee and it is being paid at the time of filing. The second half will be paid not later than June 1, 2011.
- \$ _____ This is the second half of the fee. Refer to Document # _____ recorded on _____
- No fee is being paid with this filing. The total fee, \$ _____, will be paid not later than June 1, 2011.
- This is the total fee, \$ 23,205.00, due by June 1, 2011. Refer to Document # 215542 recorded on 10/5/2010

STATE OF Nevada
 COUNTY OF Elko
 Subscribed and sworn to by
Robert L. Brock
 (Owner, Claimant, Agent, or Lessee)
 before me this
24th day of March, 20 11.



Tasha Caple
 NOTARY PUBLIC (Signature)
 (or other person authorized to administer an oath)

Name and mailing address of owner or claimant:
Barrick Goldstrike Mines Inc.
136 E. South Temple, Suite 1800
Salt Lake City, UT 84111

Dated this 24th day of March, 20 11

By [Signature]
Owner, Claimant, Agent, or Lessee Signature

Robert L Brock
Owner, Claimant, Agent, or Lessee Name (printed)