

Official Record

Recording requested By STEVEN & TORRIE KLOMP

Lincoln County - NV Leslie Boucher - Recorder

Fee: \$14.00 Page 1 of 1 RPTT: Recorded By: DP Book- 257 Page- 0496

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 LINCOLN County is 9 claims. The total fee payable for claims held in this county is \$ (not including recording fees).

Name of claim(s): TUFF #1 THRU TUFF #9 BLM Serial No(s): 909593 THRU 909601

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, \$, due by June 1, 2011. Refer to Document # recorded on

STATE OF Nevada COUNTY OF Lincoln Subscribed and sworn to by Steven Klomp (Owner, Claimant, Agent, or Lessee) before me this 17th day of Aug, 2010. RIANNAN STEVER Notary Public-State of Nevada APPT. NO. 08-104588-11 My App. Expires April 12, 2014 NOTARY PUBLIC (Signature) (or other person authorized to administer an oath)

Name and mailing address of owner or claimant: STEVEN & TORRIE KLOMP PO Box 308 PANAMA, NV 89042

Dated this 17th day of August, 2010

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

STEVEN W. KLOMP, DMD Owner, Claimant, Agent, or Lessee Name (printed)