DOC # 0145393 Official Record Recording requested By DIVERSIFIED FINANCIAL SERVICES, LLC Lincoln County - NV Leslie Boucher - Recorder Fee: \$60.00 Page 1 UCC FINANCING STATEMENT PPTT Recorded By: HB Book- 287 Page- 0135 FOLLOW INSTRUCTIONS A. NAME & PHONE OF CONTACT AT FILER (optional) 800-552-1955 B. E-MAIL CONTACT AT FILER (optional) documents@dfsfin.com C. SEND ACKNOWLEDGMENT TO: (Name and Address) IRRIGATION FINANCE SOLUTIONS, LLC 14010 FIRST NATIONAL BANK PKWY **STE 400 OMAHA, NE 68154** THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY 1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact, full name, do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 1a ORGANIZATION'S NAME C & L FARM & CATTLE, LLC OR 16. INDIVIDUAL'S SURNAME ADDITIONAL NAME(S)/INITIAL(S) SUFFIX FIRST PERSONAL NAME POSTAL CODE STATE COUNTRY 1c. MAILING ADDRESS 84725 UT PO BOX 184 **ENTERPRISE** 2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact, full name; do not omit, modify, or abbreviste any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad) 2a. ORGANIZATION'S NAME OR 2b. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME ADDITIONAL NAME(\$)/INITIAL(\$) SUFFIX STATE POSTAL CODE COUNTRY 2c. MAILING ADDRESS 3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY). Provide only one Secured Party name (3s or 3b) 3a, ORGANIZATION'S NAME IRRIGATION FINANCE SOLUTIONS, LLC ADDITIONAL NAME(\$)/INITIAL(\$) SHEELX 36. INDIVIDUAL'S SURNAME FIRST PERSONAL NAME STATE POSTAL CODE COUNTRY 3c. MAILING ADDRESS CITY 14010 FIRST NATIONAL BANK PKWY STE 400 NE **OMAHA** 68154 4. COLLATERAL: This financing statement covers the following collateral: 1 NEW 2014 MODEL 9500 ZIMMATIC PIVOT 4 TOWER 667' 2432' WIRE, 1960' PIPE, MISC VALVES & FITTINGS

5. Check only if applicable and check only one box. Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative							
6a. Check only if applicable and check	only one box:			6b. Check <u>only</u> if applicable a	nd check <u>only</u> one box:		
Public-Finance Transaction	Manufactured-Home Transaction	A Debtor is a Trans	mitting Utility	Agricultural Lien	Non-UCC Filling		
7. ALTERNATIVE DESIGNATION (if a	pplicable): Lessee/Lessor	Consignee/Consignor	Seller/Buye	r Bailee/Bailor	Licensee/Licensor		
8. OPTIONAL FILER REFERENCE	E DATA:						
0184013-001 FIXTURE F	ILING / REAL ESTATE						

be	AME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statemen acause Individual Debtor name did not fit, check here				
9a. ORGANIZATION'S NAME				\ \	
ŀ	C & L FARM & CATTLE, LLC		\ \		
PB. INDIVIDUAL'S SURNAME					
ŀ	FIRST PERSONAL NAME				
-	ADDITIONAL NAME(S)/INITIAL(S)	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY			
). E	DEBTOR'S NAME: Provide (10s or 10b) only <u>one</u> additional Debtor nam do not omit, modify, or abbreviate any part of the Debtor's name) and enter the	a or Debtor name that did not fit in e mailing address in line 10c	lline 1b or 2b of the Financing	Statement (Form UCC1) (use	exact, full na
_	10a. ORGANIZATION'S NAME	///	//		
R	10b. INDIVIDUAL'S SURNAME))		
ŀ	INDIVIDUAL'S FIRST PERSONAL NAME	///			
ŀ	INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S)		$\checkmark/$		SUFFIX
	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTR
ŧ.	ADDITIONAL SECURED PARTY'S NAME or ASSIG	I SNOR SECURED PARTY	'S NAME: Provide only one	name (11a or 11b)	<u>.</u>
Ì	11a, ORGANIZATION'S NAME				
R	11b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	AODIT	IONAL NAME(S)/INITIAL(S)	SUFFIX
1c.	MAILING ADDRESS	CITY	STATE	POSTAL CODE	COUNTR
2.7	ADDITIONAL SPACE FOR ITEM 4 (Collateral):				
3.	This FINANCING STATEMENT is to be filed [for record] (or recorded) in REAL ESTATE RECORDS (if applicable)	the 14. This FINANCING STAT		d collateral X is filed as a	fixture filing
	Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):	16. Description of real esta	e:	<u>• • • • • • • • • • • • • • • • • • • </u>	
&	L FARM & CATTLE, LLC	W 1/2 SEC. 20 T-2	S R-68E, LINCOLN CO	UNTY, NV	