Vol_	M04	_Page	00054

UCC FINANCING STATEME FOLLOW INSTRUCTIONS (front and back A. NAME & PHONE OF CONTACT AT FI	() CAREFULLY	<del></del>	Recorded 01/ Vol M04 Pg_ Linda Smith,	00054-5	<u>8</u>
B. SEND ACKNOWLEDGMENT TO: (Na  Northwest Farm Cree  900 Klamath Avenue PO Box 148 Klamath Falls, OR 9	dit Services, PCA		~· · · •	~ · ••	 
4 DESTACE SYACT FULL FOAL NA	NAT.		Æ SPACE IS FOR FIL	NG OFFICE USE ONLY	<u>'</u>
DEBTOR'S EXACT FULL LEGAL NA     1a. ORGANIZATION'S NAME	ME: - Insert only one debtor name (1s or	1b) - do not abbreviate or combine names			
Langell Valley Dairy  on 15 INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
1c. MAILING ADDRESS		CITY		POSTAL CODE	COUNTRY
6735 Bunn Rd  1d. TAX ID #: 88N OR EIN   ADD'L INFO RE	1e. TYPE OF ORGANIZATION	Bonanza  If. JURISDICTION OF ORGANIZATION	OR 10 OR	197623 NIZATIONAL ID #. If arry	USA
	Partnership	OR		19979-84	NONE
2. ADDITIONAL DEBTOR'S EXACT FU	LL LEGAL NAME - Insert only one	debtor name (2a or 2b) - do not abbreviate o	r combine names		
2a. ORGANIZATION'S NAME					
on 25. INDIVIDUAL'S LAST NAME See attached Addendum	1	FIRST NAME	MIDDLE	NAME	SUFFIX
2c. MAILING ADDRESS		СПҮ	STATE	POSTAL CODE	COUNTRY
ORGANIZATION	20. TYPE OF ORGANIZATION	21. JURISDICTION OF ORGANIZATION	l 2g. ORG	ANIZATIONAL ID 6, If any	USA
3. SECURED PARTY'S NAME (or NAM	E & TOTAL ASSIGNEE & AS	SIGNOR S/P) - trace and any annual	Landy name (Se or Sh)		NONE
3a. ORGANIZATION'S NAME		Sister of J- mant day on section	pearly (marine (ass or as))		
Northwest Farm Credit Se	rvices, PCA	FIRST NAME	MIDDLE	NAME	SUFFIX
SU. INDIVIDUAL S LAST NAME		FIRST INVINE	MIDDLE	NO SHIE	SUFFIX
3c. MAILING ADDRESS PO Box 148		спу Klamath Falls	STATE OR	POSTAL CODE 97601	USA
4. This FINANCING STATEM All now owned or hereafter items of collateral described collateral, and including:	acquired collateral	described herein, inc			
See attached Addendum					

THIS IS A FIXTURE FILING TO BE FILED FOR RECORD IN THE REAL ESTATE RECORDS.

Ag products are produced/located in Klamath county(ies).								
5. ALTERNATIVE DESIGNATION (If applicable)	LESSEE/LESSOR CONSK	SNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING		
6. This FINANCING STATEMENT is to be filed (if X ESTATE RECORDS Attach Addend		7. Check to REQUE (ADDITIONAL FI	EST SEARCH REPORT(S) EE) (optional)		All Debtors	Debtor 1 Debtor 2		
8. OPTIONAL FILER REFERENCE DATA					-			

	C FINANCING STATEMENT						
	OLLOW INSTRUCTIONS (front and back) CAREFULLY  NAME OF FIRST DEBTOR (1A OR 1B) ON RELATED FINANCING STATEMENT						
- 1	9a. ORGANIZATION'S NAME		1				
	Langell Valley Dairy  St. INDIVIDUAL'S LAST NAME     F						
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX				
10.	MISCELLANEOUS:						
				THE ABOVE SPACE	IS FOR	FILING OFFICE USE O	NLY
11.	ADDITIONAL DEBTOR'S EXACT FULL L 11s. ORGANIZATION'S NAME	EGAL NAME - Insert only one name	(11s or 11b) - do not abbrevis				
OR	11b. INDIVIDUAL'S LAST NAME	I FIR	8T NAME		MIDDLE NA	WE	SUFFIX
	DeJong		filliam	ľ		<del></del>	
11c	MAILING ADDRESS 6735 Bunn Rd	СП	onanza			POSTAL CODE 97623	USA
11d			JURISDICTION OF ORGANI			NIZATIONAL ID #, If any	JUOA
	ORGANIZATION DEBTOR	1		ı			NONE
12.	ADDITIONAL SECURED PARTY'S or   12a. ORGANIZATION'S NAME	ASSIGNOR S/P'S NAME	- Insert only <u>one</u> name (12e	or 12b)			
OR	12b. INDIVIDUAL'S LAST NAME	FIF	RST NAME	7	MIDDLE I	NAME	SUFFIX
12:	MAILING ADDRESS	cr	Y		STATE	POSTAL CODE	COUNTRY
13.	This FINANCING STATEMENT covers timber	r to be cut or as extracted 16.	Additional collateral des	cription:			
14.	collateral, or is filed as a X fixture filing Description of real estate:						
	See attached Schedule A						
15.	Name and address of a RECORD OWNER of al (if Debtor does not have a record interest):	bove-described real estate					
		İ	Check only if applicable and				
		<u> </u>		Trustee acting with respect	to propert	y held in trust or	Decedent's Estate
		18	Check <u>only</u> if applicable and on the control of th	<del></del>			
		<u> </u>	Filed in connection with a Ma		tion - effect	ive 30 years	
			Filed in connection with a Pu			•	

	C FINANCING STATEMENT ADDENDUM  LOW INSTRUCTIONS (front and back) CAREFULLY				
	NAME OF FIRST DEBTOR (1A OR 1B) ON RELATED FINANCING STATEM	ENT			
	9a, ORGANIZATION'S NAME				
	Langell Valley Dairy				
OR	90. INDIVIDUAL'S LAST NAME FIRST NAME	MIDDLE NAME, SUFFIX			
10.	MISCELLANEOUS:				
		-			
11.	ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only gas 11s. ORGANIZATION'S NAME	name (11a or 11b) - do not abbrevial	THE ABOVE SPACE IS FO	OR FILING OFFICE USE (	ONLY
		T=			<u>.</u>
OR	11b. INDIVIDUAL'S LAST NAME	FIRST NAME		E NAME	SUFFIX
	DeJong	Sandra	F.		
11c	MAILING ADDRESS	CITY	STATE		COUNTRY
44	6735 Bunn Rd TAX ID 6: 89N OR EIN   TADDIL INFO RE   116, TYPE OF ORGANIZATION	Bonanza	OR		USA
TIEL	TAX ID II: 88N OR EIN ADD'L INFO RE 110. TYPE OF ORGANIZATION ORGANIZATION	11f. JURISDICTION OF ORGANIZ	ATION [11g. O	RGANIZATIONAL ID #, If any	
	DEBTOR	İ	1		NONE
12.		AME - Insert only one name (12s o	12b)		
	12a. ORGANIZATION'S NAME				
OR	12b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDD	LE NAME	SUFFIX
	MAILING ADDRESS	СПУ	STAT	POSTAL CODE	COUNTRY
13.	This FINANCING STATEMENT coverstimber to be cut or as extracted	16. Additional collateral descr	iption:		
14.	collateral, or is filed as a X fixture filing Description of real estate:				
	See attached Schedule A				
15.	Name and address of a RECORD OWNER of above-described real estate (If Debtor does not have a record interest):	17. Check only if applicable and of Debtor is a Trust or X Ti 18. Check only if applicable and ch	rustee acting with respect to pro- eck <u>only</u> one box.	party held in trust or [	Deceders's Estate
		Filed in connection with a Man	ufactured-Home Transaction - e	Tective 30 years	
			c-Finance Transaction - effectiv	-	

	CC FINANCING STATEMEN					
	NAME OF FIRST DEBTOR (1A OR 1B) ON RI	1				
	9a. ORGANIZATION'S NAME			1		
	Langell Valley Dairy st. INDIVIDUAL'S LAST NAME					
OR	9b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME, SUFFIX			
10.	MISCELLANEOUS:					
11.	ADDITIONAL DEBTOR'S EXACT FULL 11a. ORGANIZATIONS NAME	LEGAL NAME - Insert only <u>one</u> ne	ame (11a or 11b) - do not abbrevia	THE ABOVE SPACE IS FOR	RFILING OFFICE USE O	NLY
OR	11b. INDIVIDUAL'S LAST NAME	- 1	FIRST NAME	TMIDDLE I	VAME	I SUFFIX
	DeJong		Richard	T.		
11c.	MAILING ADDRESS		CITY	STATE	POSTAL CODE	COUNTRY
	6735 Bunn Rd		Bonanza	lor	97623	USA
11d.	TAX ID #: 88N OR EIN ADD'L INFO RE 116		11f. JURISDICTION OF ORGANIC		ANIZATIONAL ID #, If any	
	ORGANIZATION DESTOR					_
12.	ADDITIONAL SECURED PARTY'S or	LASSIGNOR S/P'S NAI	ME - Insert only one name (12a o	v 12h)		X NONE
	12a. ORGANIZATION'S NAME	T TABLETON OF CITA	VIE - Index Only Sile Name (122 C	A 120)		
OR	12b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE	NAME	SUFFIX
12:	MAILING ADDRESS		CITY	STATE	POSTAL CODE	USA
13.	This FINANCING STATEMENT covers timb	er to be cut oras extracted _	16. Additional collateral desc	ription:		100/1
14.	colleteral, or is filed as a X fixture filing Description of real estate:	_				
	See attached Schedule A					
15.	Name and address of a RECORD OWNER of a (if Debtor does not have a record interest):	above-described real estate				
		ļ.	17. Check <u>only</u> if applicable and c	hark only one hav		
				<del>_</del>	A. A. A. A. A. A. A. A. A. A. A. A. A. A	7
		<b>-</b>		Trustee acting with respect to proper	rty held in trust or	Decedent's Estate
		Ľ	18. Check <u>only</u> if applicable and c			
		F	Debtor is a TRANSMITTING			
		}-		nufactured-Home Transaction - effective Control of the Control of	-	
			ried in connection with a Put	dio-Finance Transaction - effective 3	IO years	

SCHEDULE A 00058

## **FIXTURES:**

# All irrigation equipment.

All equipment, machinery, appliances, and tools which are related to or are a part of the dairy facility, including but not limited to all similar goods which may be acquired at any time, any additions, replacements, substitutions and accessions.

### **LOCATION OF FIXTURES:**

### PARCEL 1

The N1/2 of the NW1/4 of the NE1/4, N1/2 of the S1/2 of the NW1/4 of the NE1/4, and the N1/2 of the S1/2 of the NW1/4 of the NE1/4 of Section 28, Township 39 South, Range 12 East of the Willamette Meridian, Klamath County, Oregon, EXCEPTING THEREFROM that portion lying within road rights of way.

#### PARCEL 2

The NE1/4 of the NE1/4 of Section 28, Township 39 South, Range 12 East of the Willamette Meridian, Klamath County, Oregon, EXCEPTING that portion conveyed to the United States of America by Deed recorded on page 540 of Volume 69 of Deed Records of Klamath County, Oregon.

### PARCEL 3

The SE1/4 of the NE1/4 of Section 28, Township 39 South, Range 12 East of the Willamette Meridian, Klamath County, Oregon.

## PARCEL 4

The W1/2 of the SW1/4, those portions of the NW1/4 of the NW1/4, SW1/4 of the SE1/4, the E1/2 of the SW1/4 and the S1/2 of the NW1/4 lying Westerly of the Langell Valley Irrigation District North Canal in Section 27, Township 39 South, Range 12 East of the Willamette Meridian, Klamath County, Oregon.

## PARCEL 5

Those portions of the NW1/4 of the NW1/4, the S1/2 of the NW1/4, lying Easterly of the East bank of the Langell Valley Irrigation District North Canal and those portions of the NE1/4 of the SW1/4, and the NW1/4 of the SE1/4 lying Easterly of the Langell Valley Irrigation District Canal in Section 27 of Township 39 South, Range 12 East of the Willamette Meridian, Klamath County, Oregon.