[redacted]

2025-009000
Klamath County, Oregon
10/08/2025 11:31:02 AM
Fee: $92.00

UCC FINANCING STATEMENT
FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT SUBMITTER (optional)
CSC 1-800-858-5294

B. E-MAIL CONTACT AT SUBMITTER (optional)
SPRFiling@cscglobal.com

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

3252 03253
CSC
801 Adlai Stevenson Drive
Springfield, IL 62703

Filed In: Oregon
(Klamath)

SEE BELOW FOR SECURED PARTY CONTACT INFORMATION

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)

OR	1a. ORGANIZATION'S NAME				
	1b. INDIVIDUAL'S SURNAME: HEATON	FIRST PERSONAL NAME: GREGORY	ADDITIONAL NAME(S)/INITIAL(S): DREW		SUFFIX
	1c. MAILING ADDRESS: 206 E 2ND ST	CITY: MERRILL	STATE: OR	POSTAL CODE: 97633	COUNTRY: USA

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (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 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)

OR	2a. ORGANIZATION'S NAME				
	2b. INDIVIDUAL'S SURNAME: HEATON	FIRST PERSONAL NAME: MELISSA	ADDITIONAL NAME(S)/INITIAL(S): ANNE		SUFFIX
	2c. MAILING ADDRESS: 206 E 2ND ST	CITY: MERRILL	STATE: OR	POSTAL CODE: 97633	COUNTRY: USA

3. SECURED PARTY'S NAME (or NAME of ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one Secured Party name (3a or 3b)

OR	3a. ORGANIZATION'S NAME: DFS FINANCE, A DIVISION OF FIRST NATIONAL BANK OF OMAHA				
	3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)		SUFFIX
	3c. MAILING ADDRESS: 14010 FNB PARKWAY STE 400	CITY: Omaha	STATE: NE	POSTAL CODE: 68154	COUNTRY: USA

4. COLLATERAL: This financing statement covers the following collateral:
1 NEW 2025 MODEL 7000 VALLEY PIVOT 7-TOWER S/N 15147058; NEW 2025 1880' 12" 100PSI PVC PIPE, 1880' MAINLINE WIRE INSTALLATION, AND OTHER RELATED ANCILLARY EQUIPMENT, TOGETHER WITH ALL ATTACHMENTS, REPLACEMENTS, PARTS AND SUBSTITUTIONS, ADDITIONS, REPAIRS AND ACCESSORIES INCORPORATED THEREIN OR AFFIXED THERETO, AND PROCEEDS THEREOF (COLLECTIVELY, THE "GOODS"), AS DESCRIBED IN THIS CONTRACT TO SECURE (A) PAYMENT AND PERFORMANCE OF ALL OF BUYER'S OBLIGATIONS UNDER THIS CONTRACT, AND (B) TO THE EXTENT PERMITTED BY LAW, ANY AND ALL OTHER INDEBTEDNESS, HOWEVER EVIDENCED, NOW OR HEREAFTER OWING BY BUYER TO DFS OR ITS ASSIGNEES.

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: ☐ Public-Finance Transaction ☐ Manufactured-Home Transaction ☐ A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box: ☐ Agricultural Lien ☐ Non-UCC Filing

7. ALTERNATIVE DESIGNATION (if applicable): ☐ Lessee/Lessor ☐ Consignee/Consignor ☐ Seller/Buyer ☐ Bailee/Bailor ☐ Licensee/Licensor

8. OPTIONAL FILER REFERENCE DATA: 0168666-002 JW KERNS

3252 03253

FILING OFFICE COPY — UCC FINANCING STATEMENT (Form UCC1) (Rev. 07/01/23)

UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS

9. NAME OF FIRST DEBTOR: Same as line 1a or 1b on Financing Statement; if line 1b was left blank because Individual Debtor name did not fit, check here ☐

9a. ORGANIZATION'S NAME

OR

9b. INDIVIDUAL'S SURNAME

HEATON

FIRST PERSONAL NAME

GREGORY

ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

DREW

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

10. DEBTOR'S NAME: Provide (10a or 10b) only one additional Debtor name or Debtor name that did not fit in line 1b or 2b of the Financing Statement (Form UCC1) (use exact, full name; do not omit, modify, or abbreviate any part of the Debtor's name) and enter the mailing address in line 10c

10a. ORGANIZATION'S NAME

OR

10b. INDIVIDUAL'S SURNAME

INDIVIDUAL'S FIRST PERSONAL NAME

INDIVIDUAL'S ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

10c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY

11. ☐ ADDITIONAL SECURED PARTY'S NAME or ☐ ASSIGNOR SECURED PARTY'S NAME: Provide only one name (11a or 11b)

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S SURNAME | FIRST PERSONAL NAME | ADDITIONAL NAME(S)/INITIAL(S) | SUFFIX

11c. MAILING ADDRESS | CITY | STATE | POSTAL CODE | COUNTRY

12. ADDITIONAL SPACE FOR ITEM 4 (Collateral):

13. ☑ This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL ESTATE RECORDS (if applicable)

14. This FINANCING STATEMENT:
☐ covers timber to be cut ☐ covers as-extracted collateral ☑ is filed as a fixture filing

15. Name and address of a RECORD OWNER of real estate described in item 16 (if Debtor does not have a record interest):

DREW HEATON FARMS LLC

16. Description of real estate:

NW1/4NE1/4, NE1/4NW1/4, N1/2SW1/4NE1/4, N1/2SE1/4NW1/4, SEC 4 T41S R10E, MAP:4110-00400-00200, PID: 101099, KLAMATH COUNTY, OR

17. MISCELLANEOUS: