Minde NU 89423

AFFIDAVIT OF ANNUAL ASSESSMENT WORK (Short Form)

TO ALL WHOM IT MAY CONCERN:

The undersigned, Are Are Are FOSTER, Are certifies that at least ONE HUNDRED AND 00/100 DOLLARS (\$100.00) per claim was expended for development, labor and improvements, or equivalent value added, as the annual assessment work for the assessment year ending September 1, _____ for the following unpatented mining claim(s) generally located in the following sections(s):

DOC # 0680798 07/28/2006 11:37 AM Deputy: PK OFFICIAL RECORD Requested By: GEORGE A FOSTER JR

> Douglas County - NV Werner Christen - Recorder

Page: 1 Of 1 Fee: 29.50

Suggested Form - Nevada Division of Minerals (REV. 3/1/2003 LV)

Nevada Proof of Labor, 30 USC Sec. 28 - NRS 517.230

BK-0706 PG-10024 RPTT: 0.00



			RECO	RDER'S STAMP	
Name of Claim(s) Se	ction	Township	Range	<u>Meridian</u>	
Oreana 10	3	12N	215	27° 36'N	
Oreans 11	3	12N	215	27° 36'N	
Orcana 12	2	12N	215	27° 36'N	
BLM Serial No(s):	Name	me and mailing address of owner or claimant:			
NMC- 838814		George A.	Fosters	h	
NMC- 8388 15		1782 La	ntana	Or	
NMC- 838816		Minden	NV	89423	
The work consisted of exploration, mining & clean-cap The work described above was performed at the following locations:					
Said work was performed between 1 Sep , 2001, and 31 Aug , 2006 A total of more than					
DOLLARS (\$ 300) was expended in performing the work, or equivalent value added. The work was performed by:	s	TATE OF NO.	vada 1918		
George Foster		○ Subscribe	ed and sworn	to by	
All of the aforesaid unpatented mining claims are	•	1 corge	A. Fost	er Ir.	
contiguous and work on, or for the benefit of, an		20th pe	fore me this		
one claim or group of claims tends to develop all claims. The work was performed for the purpos		day o	1 <u>2014</u>	_, 20 <u>0(</u> c	
developing the mineral potential of the claims an		Announce of the Control of the Contr	***************************************		
maintain and hold such claims.			NOTARY PUBLI STATE OF NEVA	DA	
Dated this 28 day of July 2006.			County of Dougle	as .	
Hora a Freshirts		TO NA ALBITACE	EANN M. TET		
By Surge a. Fostura	!	My Appointmen	nt Expires April 15,	2007	
Owner, Claimant, Agent, or Lessee Signature		_			
Owner, Claimant, Agent, or Lessee Name (printed)		Hon.	125	Tel	
	1-	NO.	TARY PUBLIC		