

FIELD AMENDMENT FORM

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): T Joyce Orders Date: 10/3/02
Date: _____

For Organizations:

I do solemnly swear or affirm that I am _____ of _____ Title _____, that I have signed the foregoing Organization _____ document in the space below as _____ of Title _____ and that the statements contained in the Organization _____ foregoing document are true and correct.

Signature of Authorized Agent

Title and Organization

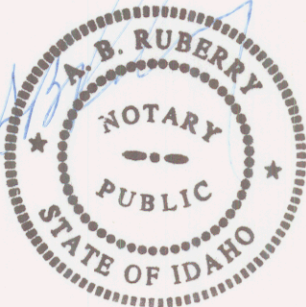
Date

State of Idaho)
County of Bonneville) SS.

Subscribed and sworn (or affirmed) before me this 3rd day
of October 20 02

Aaron B. Ruberry
Notary Public

Seal



Residing at Pomona Falls ID

My Commission Expires 9/23/03

NOTE:

THIS AMENDMENT CORRECTS CLAIMED
PLACE OF USE. NO CHANGE TO ACRES.