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FILED
SEAL
By Don Pitner

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Amador
J. MICHAEL J. SON

Return Address:

PITNER DRILLING & Pump, INC.
P.O. Box 1570
WOODLAND, WA. 98674

CLAIM OF LIEN

Indexing information required by the Washington State Auditor's Recorder's Office, (RCW 36.19 and RCW 65.04) 1/97. (Please print last name first)

Reference # (if applicable): _____

Grantor(s) (Owner): (1) _____ (2) _____ Add L on pg _____

Grantee(s) (Claimant): (1) _____ (2) _____ Add L on pg _____

Legal Description (abbreviated): SEC. 25 T2N R5EWM Add L legal is on page _____

Assessor's Property Tax Parcel / Account # 02-05-25-0-0-0800-00

PITNER DRILLING & Pump, INC. Claimant

vs.

VIVIAN A. & DAVID ADKINS Name of person indebted to Claimant

Notice is hereby given that the person named below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

1. NAME OF LIEN CLAIMANT: PITNER DRILLING & Pump, INC.
TELEPHONE NUMBER: 360-225-6135 ADDRESS: P.O. Box 1570, 1100 NW HAYES
WOODLAND, WA. 98674
2. DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE PROFESSIONAL SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR THE DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS BECAME DUE: 9-27-02
3. NAME OF PERSON INDEBTED TO THE CLAIMANT: VIVIAN & DAVID ADKINS
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): 11.42 ACRES OFF
OF MAEBEE MINES RD. NE 1/4 OF THE SE 1/4 SEC 25 T2N R5EWM
TAX PARCEL # 02-05-25-0-0-0800-00
5. NAME OF THE OWNER OR REPUTED OWNER (if not known state "unknown"): VIVIAN ADKINS
TELEPHONE NUMBER: 360-604-4328 ADDRESS: 4619 NE 112th AVE R-102
VANCOUVER, WA. 98682
6. THE LAST DATE ON WHICH LABOR WAS PERFORMED PROFESSIONAL SERVICES WERE FURNISHED, CONTRIBUTIONS TO AN EMPLOYEE BENEFIT PLAN WERE DUE, OR MATERIAL, OR EQUIPMENT WAS FURNISHED: 10-09-02



Claim of Lien
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7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$ 16,623.99

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: NO

Donald R. Pinner
Claimant
DONALD R. PINNER, PRESIDENT
Print or Type Name
P.O. BOX 1570, 1100 NW HAYES RD.
Address
WOODLAND, WA. 98674
360-225-6955
Telephone Number

STATE OF WASHINGTON

County of CLARK

SS.

Donald R. Pinner, being sworn, says: I am the claimant (or attorney of the claimant, or administrator, representative, or agent of the trustees of an employee benefit plan) above named; I have read or heard the foregoing claim, read and know the contents thereof, and believe the same to be true and correct and that the claim of lien is not frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury.

Signed and sworn to before me on this 6th day of JANUARY, 2003.



Marjorie Sarah Reed
Print Name MARJORIE SARAH REED
Notary Public in and for the State of WASHINGTON
My appointment expires: 5-22-2005

NOTE: THE CLAIM OF LIEN MUST BE FILED FOR RECORDING IN THE COUNTY WHERE THE REAL PROPERTY IS LOCATED NO LATER THAN NINETY (90) DAYS AFTER THE CLAIMANT HAS CEASED TO FURNISH LABOR, PROFESSIONAL SERVICES, MATERIALS OR EQUIPMENT OR THE LAST DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS WERE DUE, IN ADDITION TO ANY NOTICE REQUIREMENTS THAT MAY BE PROVIDED BY LAW.



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