200003100070 Kathy Hill, Skagit County Auditor 3/10/2000 Page 1 of 2 12:04:20PM

RETURN ADDRESS:

Northwest Hydrofracturing

13812 W Lincoln Rd

Spokane, WA 99224

CLAIM OF LIEN

Claimant (Grantee):

Person or Company Indebted
To Claimant (Grantor):

Abbreviated Legal DescripTion (e.g. Lot 1, Block 2,...):

Assessor's Property
Tax Parcel/Account No:

Bartholomew Drilling, Inc. dba
Northwest Hydrofracturing

Scott Oglesbee

NE 1/4 SW 1/4 Section 13 Township 34

Range 1

Notice is hereby given that the person below claims a Lien pursuant to RCW ch.60.04. In support of the Lien, the following information is submitted.

1. Name of Lien Claimant:

Lynn Bartholomew

Telephone Number

509-466-5078

Address:

13812 W Lincoln Rd Spokane, 99224

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.

December 22, 1999

	<i>3</i> .	Name of person	or contractor indebted to clain	nant·		
		Scott Ogl				
and the second s				N-ATMENAGE		
Appen 1	4.		he property against which a Lie	•	ess, legal	
	descrip	tion or other info	rmation that will reasonably de	scribe the property):		
		FIDALGO CITY VACATED WOODLAND AVENUE ADJACENT TO & S1/2 lot 4 & ALL OF LOT 5-10 & S1/2 LOT 11 & VACATED SIREETS ADJACENT TO & EAST 321/2 FEET OF LOTS 1-3 & N1/2 OF LOT 4 ALL IN BLOCK 39. ALSO INCLUDES W1/2 VACATED				
	and the second s					
		The state of the s	ADJACENT TO & EAST 32.5 FI			
		(P73025 & P730	038 COMBINED TO THIS ACCOUNT	NI'	***************************************	
	5.	Name of the own	me of the owner or reputed owner (if not known state "unknown"):			
		Scott Oglesbee & Angela T Oglesbee				
		DCOCE OFF	spee & Angera i Ogie	bbee		
	6. contrib		which labor was performed, pro byee benefit plan were due; or i			
		December	22, 1999		· •	
				1 401 40	•	
	7.	Principal amoun	t for which the Lien is claimed	is \$_1,491.42	A-7-114-5	
	8.	If the claimant i	s the assignee of the claim so st	ate here:		
		[🖈 No				
		[2s. 1VO		<u>></u>		
		[] Yes. State	name of Assignor:	<u> </u>		
			The state of the s			
OT ATE	OE WA	CHINICTON				
SIAIE	OF WA	SHINGTON)	SS.			
COUNT	Y OF <u>S</u>	pokane)				
			being sworn, says: I am the cla	aimant above named: I ha	ve read or	
heard the	e foregoi	ng claim, read an	d know the contents thereof, an	d believe the same to be t	rue and	
		the claim of lien is penalty of perjury	not frivolous and is made with	reasonable cause, and is	not clearly	
CACCBBIVE	under p	charry of perjury				
			Myon Ca	Motomece		
		4	Claimant	\	and the second of the second o	
SUI	BSCRIB	ED AND SWOR	N TO before me this	_day of March		
Das	STOOK ON	M. Et A.		10'		
	40	TAR	May -	Loun		
	S A	IRI IC	Print name: DORIS F. NOTARY PUBLIC in and for	r the State of Washington	• • • • • • • • • • • • • • • • • • •	
	γ_{λ} ρ_{C}	H 15, 200 0	Residing at: Solow	O	· • · · ·	
(14,50 OF	SHIM LAND	My commission expires:	311512003		
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Kathy Hill, Skagit County Auditor

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