

NOTIFICATION OF OPERATIONS

EXPIRES DEC. 31, 1988

NO. 88 61711

**CHECK APPROPRIATE BLOCKS**

1A NOTICE IS GIVEN TO THE STATE FORESTER THAT AN OPERATION(S) WILL BE CONDUCTED ON LANDS DESCRIBED BELOW AND ON THE COMPLETED ATTACHED MAPS (ORS 527.670).

1B APPLICATION FOR PERMIT TO OPERATE POWER DRIVEN MACHINERY (ORS 477.625).

1C APPLICATION FOR PERMIT TO CLEAR RIGHTS OF WAY (ORS 477.685).

PREVIOUS NOTIFICATION NO. \_\_\_\_\_

COUNTY (ENTER ONLY ONE)  
**COLUMBIA**

2 OPERATOR  
NAME: **OREGON NATURAL GAS DEVELOPMENT COMPANY**  
MAILING ADDRESS - STREET: **220 N.W. SECOND AVE.**  
CITY, STATE AND ZIP CODE: **PORTLAND, OR 97209** PHONE NO.: **220-2573**

3 LAND-OWNER  
NAME: **LONGVIEW FIBRE CO.**  
MAILING ADDRESS - STREET: **P.O. BOX 667**  
CITY, STATE AND ZIP CODE: **LONGVIEW, WA 98632** PHONE NO.: **206-425-1550**

4 TIMBER OWNER  
NAME: **LONGVIEW FIBRE CO.**  
MAILING ADDRESS - STREET: **P.O. BOX 667**  
CITY, STATE AND ZIP CODE: **LONGVIEW, WA 98632** PHONE NO.: **206-425-1550**  
TIMBEROWNER E.I. NUMBER OR SOCIAL SECURITY NO. \_\_\_\_\_

2A NAME OF OPERATOR'S DESIGNATED REPRESENTATIVE TO CONTACT IN CASE OF FIRE EMERGENCY  
**TODD THOMAS** PHONE NO. **220-2573**

THE OPERATOR, TIMBER OWNER OR LAND-OWNER UPON GIVING THIS NOTICE GIVES CONSENT TO THE STATE FORESTER TO GO UPON THE LAND SUBJECT TO THE OPERATION FOR THE PURPOSE OF INSURING COMPLIANCE WITH THE FOREST PRACTICES ACT.

NOTICE TO TAXPAYER  
THE PARTY OWNING TIMBER AT THE TIME OF HARVEST IS SHOWN IN SECTION 4 AND IS THE PARTY RESPONSIBLE FOR PAYMENT OF OREGON TIMBER TAXES.

WESTERN OREGON PRIVATE LAND ONLY  
CHECK BOX IF ALL TIMBER TO BE HARVESTED UNDER THIS NOTIFICATION IS EXEMPT FROM WESTERN OREGON SEVERANCE TAX. IF CHECKED AND UNDER "SMALL TRACT OPTION" GIVE CERTIFICATION.  
 NO.

5. 1/4 SECTION

NE	NW	SW	SE	S E C.	T W P.	R G E.	6. OPERATION STARTING DATE (15 DAY NOTICE REQUIRED)		7. TYPES OF OPERATIONS (USE NOS IN INSTRUCTIONS)		8. WESTERN OREGON SEVERANCE TAX HARVEST UNIT NO. (IF ANY)		TO BE COMPLETED BY OREGON DEPARTMENT OF FORESTRY	
N N S S	N N S S	N N S S	N N S S	S E C.	T W P.	R G E.	MO.	DAY			FPH TAX CLASS	REGULATED USE AREA		
		X					4	15	3,8		B	NW3		
			X				4	15	3,8		B	NW3		

PLEASE CHECK 1/16 SECTIONS WHERE OPERATING

COMPLETE FOR AREAS OUTSIDE OF REGULAR SECTIONS  
GOVERNMENT LOT NUMBER \_\_\_\_\_

EXPLAIN "OTHER" TYPES OF OPERATIONS  
**DRILLING NATURAL GAS WELL**

TIMBER SALE NAME AND NUMBER (IF ANY) \_\_\_\_\_

9. SIGNATURE OF AUTHORIZED REPRESENTATIVE  
 **TODD A. THOMAS** **KLS** DATE SIGNED **03-30-88**

15 DAY WAITING PERIOD IS HEREBY WAIVED

BY: \_\_\_\_\_ DATE \_\_\_\_\_ TIME \_\_\_\_\_ FOREST PRACTICES FORESTER \_\_\_\_\_ F.P.F. NO. \_\_\_\_\_ F.P.F. PHONE \_\_\_\_\_

RECEIVED **04-06-88** **mail** **LIN FARM** **12XX** **397-2636**

YOU ARE HEREBY ADVISED THAT THE STATE FORESTER HAS DETERMINED THE FOLLOWING RESOURCES OCCUR WITHIN OR ADJACENT TO YOUR OPERATION AREA. YOUR OPERATION MAY REQUIRE PRIOR APPROVAL BEFORE YOU BEGIN.  
 CLASS 1 WATER(S)  HIGH RISK AREA(S)  CRITICAL WILDLIFE HABITAT  WATER RIGHT(S)  PROTECTED HABITAT(S)  COASTAL SHORELANDS.

**ADAMS CREEK**

DISTRICT **FG 53** FOREST OFFICE **CU 3** RC **5** EG **1** S **7**

SIGNATURE **LEE ONAN** **JAMES E. BROWN** STATE FORESTER