

RETURN TO:  
 ARIZONA STATE LAND DEPARTMENT  
 PUBLIC COUNTER  
 1616 WEST ADAMS  
 PHOENIX, ARIZONA 85007  
 SUBMIT NON-REFUNDABLE  
 \$200 FILING FEE

DEPARTMENTAL USE ONLY	
ACCOUNTING	T & C
MAR 15 2010 Filing Fee: \$200	Exam: Sandi
ARIZONA STP(32)	App. entry: MAR 17 2010

INDEX # 20987  
 LEASE NO. 05-48244-00-027  
 MAR 16 2010

**SUBLEASE OR PASTURE AGREEMENT  
 REQUEST AND PERMISSION**

**THIS FORM MUST BE COMPLETED, SIGNED BY ALL PARTIES AND SUBMITTED WITH A NON-REFUNDABLE \$200 FILING FEE.**

Check one:  SUBLEASE

PASTURE AGREEMENT

1A. APPLICANT(S):

BOX O PROPERTIES LLC  
 State Lessee aka Sub-Lessor #2361

1B. APPLICANT(S):

~~DOBSON & BADER CATTLE CO~~  
 Sub-Lessee Rick Bader

State Lessee aka Sub-Lessor

1309 N MISSION CANYON LN  
 Mailing Address

GILBERT AZ 85234  
 City State Zip

GALE BRIMHALL 480 497 2031  
 Contact Person #9007 Phone No.

GSRIMHALL@GX.NET  
 Email Address (optional)

Sub-Lessee

46585 TEACUP RANCH  
 Mailing Address

FLORENCE AZ 85232  
 City State Zip

RICK BADER 520-251-0858  
 Contact Person #81 Phone No.

Email Address (optional)

By submitting this request and permission, the above Sub-Lessor and Sub-Lessee agree that the land described in this Sublease/Pasture Agreement shall be used for the purpose described in the State Lease referenced and for no other use. Further, Sub-Lessor and Sub-Lessee agree to abide by all of the terms and conditions of the State Lease and to conform and perform in accordance with A.R.S. Title 37, the Rules of the Arizona State Land Department, A.A.C. Title 12, Chapter 5.

**2. REQUEST TO SUBLEASE STATE TRUST LANDS:**

The State lessee requests permission to allow the sub-leasing or pasturing of those lands described in State Lease No. 05-48244 which expires on MARCH 14, 2015.

Check One:  All of the lands in the State Lease number described above.  
 Only that portion of the above referenced State Lease as described below.

TWN.	RNG.	SEC.	LEGAL DESCRIPTION	COUNTY	SLD USE ONLY	CTY GRI PARCEL

C. H.

3. PURPOSE OF SUBLEASE:

Check one:  Livestock Grazing  Other: \_\_\_\_\_  
(Specify purpose)

If the purpose of the sublease is irrigation, and the land under the lease is located within an Active Management Area or Irrigation Non-Expansion Area, have you reviewed the annual allotment of water regulated by the Arizona Department of Water Resources (ADWR) with which to irrigate eligible acres?  
 Yes  No.

Have you reviewed the status of the flexibility account for the Irrigation Grandfathered Right (IGR)?  
 Yes  No.

PLEASE NOTE: The annual allotment of water may be reduced pursuant to management plan requirements developed and enforced by ADWR. If the flexibility account has a debit balance that exceeds 50% of the allotment during a calendar year, a transfer of credits to the IGR would be required to avoid enforcement by ADWR and the Department. Please contact either ADWR or the Department's Water Right Management Section for assistance.

4. TERM:

March 14, 2010 to March 14, 2015

The term of this sublease/pasture agreement is: From MARCH 14, 2010 to MARCH 14, 2015  
NOTE: The term of the sublease/pasture agreement cannot exceed the term of the State Lease.

5. BRAND:

Does SUB-LESSEE have an Arizona Registered Brand?  Yes  No

Sublessee must attach a certificate indicating proof of an Arizona Registered Brand or this request for permission to sublease will be returned.

6. CONSIDERATION: Specify the \*monetary compensation being paid by the Sublessee:

(\*Lessee is obligated to pay the Department annual rent, regardless of the rental value reached between the Lessee and Sublessee)

\$ 1.00 FOR EXCESS PER AUM \$ 35,000 ANNUALLY OTHER \_\_\_\_\_

7. SUB-LESSOR(S) - COMPLETE AND SIGN PAGE 3.

(The name of the Sub-lessor(s) must be the same as on the State lease.)

8. SUB-LESSEE(S) - COMPLETE AND SIGN PAGE 4.

FOR DEPARTMENT USE ONLY

The State Land Commissioner, by virtue of the authority vested in him by law hereby grants permission to sublease or pasture the State Lands herein described.

This permission is granted subject to all terms and conditions herein stated or attached and made a part hereof.

If this box is checked, additional terms and conditions are attached to this document and are made a part hereof.

(SEAL)

STATE OF ARIZONA  
ARIZONA STATE LAND COMMISSIONER

By Stephen M. Williams  
Date 7/21/10

**TO BE COMPLETED BY SUB-LESSOR(S) (STATE RESIDENT) "1A"**

**CERTIFICATION:** Pursuant to A.R.S. Title 37 and the Rules of the Arizona State Land Department, A.R.S. Title 12, Chapter 5, you must complete the following information pertinent to you and/or the organization you represent and sign the certification or your application will not be processed. NOTE: Applicant must complete item #1.

1. Is this application made in the name of: (Applicant must check one) \_\_\_\_\_ Individual(s) \_\_\_\_\_ Husband & Wife  
 \_\_\_\_\_ Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Limited Partnership  Limited Liability Company \_\_\_\_\_ Estate  
 \_\_\_\_\_ Trust \_\_\_\_\_ Joint Venture \_\_\_\_\_ Municipality \_\_\_\_\_ Political Subdivision \_\_\_\_\_ Other (specify) \_\_\_\_\_

2. INDIVIDUAL(S) OR HUSBAND & WIFE: Complete the following for each applicant:

NAME	AGE	MARITAL STATUS
_____	_____	_____
_____	_____	_____

3. CORPORATION: Complete the following:  
 (A) Do you have authority from the Arizona Corporation Commission to do business in the State of Arizona? Yes \_\_\_ No \_\_\_  
 (B) Is the corporation presently in good standing with the Arizona Corporation Commission? Yes \_\_\_ No \_\_\_  
 (C) In what state are you incorporated? \_\_\_\_\_  
 (D) Is the legal corporate name and Arizona business address the same as stated in this application? Yes \_\_\_ No \_\_\_  
 If no, state the Legal Corporate Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 (Street or Box Number) (City) (State) (Zip)

4. LIMITED LIABILITY COMPANY: Complete the following:  
 (A) If an out-of-state limited liability company: Have you filed for a Certificate of Registration with the Arizona Corporation Commission?  
 Yes \_\_\_ No \_\_\_  
 (B) If an Arizona limited liability company: Have you filed Articles of Organization with the Arizona Corporation Commission?  
 Yes \_\_\_ No \_\_\_  
 (C) Are you authorized by the Arizona Corporation Commission to transact business in Arizona?  Yes \_\_\_ No \_\_\_

5. PARTNERSHIP OR JOINT VENTURE: Complete the following for each authorized partner or principal in the partnership or joint venture:

NAME	BUSINESS ADDRESS	AGE	MARITAL STATUS
_____	_____	_____	_____
_____	_____	_____	_____

6. LIMITED PARTNERSHIP: Is this Limited Partnership on file with the Arizona Secretary of State?  Yes  No  
 Complete the following for the authorized general partner(s) only:
- | GENERAL PARTNER(S) NAME | BUSINESS ADDRESS |
|-------------------------|------------------|
| _____                   | _____            |
| _____                   | _____            |

7. ESTATE: Complete the following and attach a copy of the court or estate document(s):  
 Name of the court appointed administrator or personal representative: \_\_\_\_\_  
 List the type and date of issuance of the court or Estate document: \_\_\_\_\_  
 (Type of Document) (Date issued)

8. TRUST: (A) Complete the following pursuant to A.R.S. § 33-404, for each beneficiary of the Trust:

NAME	ADDRESS	AGE	MARITAL STATUS
_____	_____	_____	_____
_____	_____	_____	_____

or (B) Identify the Trust document by title, document number, and county where document is recorded: \_\_\_\_\_

9. I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN, TOGETHER WITH ALL EXHIBITS AND ATTACHMENTS ARE TRUE, CORRECT AND COMPLETE AND THAT I/WE HAVE AUTHORITY TO SIGN THIS DOCUMENT.

SIGNATURE(S)

BOX-O PROPERTIES LLC 4/1/2010  
 \_\_\_\_\_  
 (Name of Corporation, Partnership, etc.) Date

[Signature] \_\_\_\_\_  
 Signature of Sub-Lessor (Individual) Date

[Signature] \_\_\_\_\_  
 Signature of Sub-Lessor (Individual) Date

MANAGER  
 \_\_\_\_\_  
 Signature Title

2010 MAR 15 PM 2:52  
 ARIZONA  
 STATE  
 SECRETARY  
 OF  
 STATE

TO BE COMPLETED BY SUB-LESSEE(S) "B"

CERTIFICATION: Pursuant to A.R.S. Title 37 and the Rules of the Arizona State Land Department, A.A.C. Title 12, Chapter 5, you must complete the following information pertinent to you and/or the organization you represent and sign the certification or your application will not be processed. NOTE: Applicant must complete item #1.

1. Is this application made in the name of: (Applicant must check one)
[X] Individual(s)
\_\_\_\_ Husband & Wife
\_\_\_\_ Corporation
\_\_\_\_ Partnership
\_\_\_\_ Limited Partnership
\_\_\_\_ Limited Liability Company
\_\_\_\_ Estate
\_\_\_\_ Trust
\_\_\_\_ Joint Venture
\_\_\_\_ Municipality
\_\_\_\_ Political Subdivision
\_\_\_\_ Other (specify) \_\_\_\_\_

2. INDIVIDUAL(S) OR HUSBAND & WIFE: Complete the following for each applicant:

NAME: Rick Bader
AGE: 61
MARITAL STATUS: Single

3. CORPORATION: Complete the following:

(A) Do you have authority from the Arizona Corporation Commission to do business in the State of Arizona? Yes \_\_\_ No \_\_\_
(B) Is the corporation presently in good standing with the Arizona Corporation Commission? Yes \_\_\_ No \_\_\_
(C) In what state are you incorporated? N/A
(D) Is the legal corporate name and Arizona business address the same as stated in this application? Yes \_\_\_ No \_\_\_

If no, state the Legal Corporate Name: \_\_\_\_\_

Address: \_\_\_\_\_
(Street or Box Number) (City) (State) (Zip)

4. LIMITED LIABILITY COMPANY: Complete the following:

(A) If an out-of-state limited liability company: Have you filed for a Certificate of Registration with the Arizona Corporation Commission? Yes \_\_\_ No \_\_\_
(B) If an Arizona limited liability company: Have you filed Articles of Organization with the Arizona Corporation Commission? Yes \_\_\_ No \_\_\_
(C) Are you authorized by the Arizona Corporation Commission to transact business in Arizona? Yes \_\_\_ No \_\_\_

5. PARTNERSHIP OR JOINT VENTURE: Complete the following for each authorized partner or principal in the partnership or joint venture:

NAME BUSINESS ADDRESS AGE MARITAL STATUS
N/A

6. LIMITED PARTNERSHIP: Is this Limited Partnership on file with the Arizona Secretary of State? [ ] Yes [ ] No
Complete the following for the authorized general partner(s) only:

GENERAL PARTNER(S) NAME BUSINESS ADDRESS
N/A

7. ESTATE: Complete the following and attach a copy of the court or estate document(s):

Name of the court appointed administrator or personal representative: N/A
List the type and date of issuance of the court or Estate document: N/A
(Type of Document) (Date Issued)

8. TRUST: (A) Complete the following pursuant to A.R.S. § 33-404, for each beneficiary of the Trust:

NAME ADDRESS AGE MARITAL STATUS
N/A

or (B) Identify the Trust document by title, document number, and county where document is recorded: \_\_\_\_\_

9. I HEREBY CERTIFY, UNDER PENALTY OF PERJURY, THAT THE INFORMATION AND STATEMENTS CONTAINED HEREIN, TOGETHER WITH ALL EXHIBITS AND ATTACHMENTS ARE TRUE, CORRECT AND COMPLETE AND THAT I/WE HAVE AUTHORITY TO SIGN THIS DOCUMENT.

SIGNATURE(S)

Signature of Sub-Lessee (Individual): Rick Bader 2-8-10

(Name of Corporation, Partnership, etc.) Date

Signature Title

Signature of Sub-Lessee (Individual) Date

Signature of Sub-Lessee (Individual) Date

ARIZONA SECRETARY OF STATE
2010 MAR 15 PM 2:52

**SUBLEASE ADDENDUM  
BOX-O RANCH**

We agree to extend the existing Ranch Sublease between Box-O Properties, LLC, an Arizona Limited Liability Company ("Landlord") and Dobson and Bader Cattle Company ("Tenant"). Paragraph 2 of the sublease and the second addendum to the sublease extended the effective date of the sublease to March 15, 2010. The parties to this agreement hereby agree to extend the Effective Date through and including March 14, 2015. All other conditions and terms remain the same.

Landlord and Tenant have executed this addendum effective March 14, 2010.

LANDLORD

BOX-O PROPERTIES L.L.C.

An Arizona Limited Liability Company

By: *[Signature]* Date: 12/29/09  
Its: *[Signature]*

TENANT

DOBSON AND BADER CATTLE COMPANY

A Sole Proprietorship

By: *[Signature]* Date: 12-29-09