

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
RIGHT-OF-WAY NOTICE TO PROCEED

Right-of-Way or Temporary Use Permit (TUP) Serial Number
OR-65891

Date
05/21/2012

Issuing Office
Burns District Office

Right-of-Way or TUP name
North Steens Transmission Line

Certified/Registered Mail-Return Receipt Requested

INSTRUCTIONS — Use Certified or Registered Mail or hand deliver. Send or give original to Holder. Distribute other copies as indicated after receipt date.

Holder: Echanis, LLC

In accordance with the terms and conditions of the above referenced right-of-way grant or TUP you are hereby authorized to proceed with the activities noted below in the locations specified. Map(s) are attached. ☐ Yes ☒ No

Activity	Location
<p>Echanis, LLC may commence with all Pre-Construction Activities as described on pages 10 and 11 of the Plan of Development in the Plan of Development dated March 16, 2012.</p> <p>In addition, Echanis, LLC may commence with the surveying activities associated with construction, as described on page 11 of the Plan of Development dated March 16, 2012.</p> <p>Echanis, LLC may not begin any construction activities that involve ground breaking on public ground until BLM Burns District has recieved:</p> <p>1) Engineered Transmission Line Plans with pole locations 2) \$19,174.00 as agreed to in the Cost Recovery Agreement dated 3) A map(s) that details the task schedule per section.</p>	<p>See attached Legal Description for Transmission Line Locations.</p>

Authorized officer is:

Brendan Cain

(Name)

Burns District Manager

(Title)

Onsite inspection and compliance of the Right-of-Way or TUP stipulations will be conducted by the authorized officer's representative.

Tara McLain

(Name of Authorized Officer's Representative)

28910 HWY 20 West Hines, Oregon

(Office, Street Address, City, State, Zip)

(541) 573-4462

(Office Phone Number)

Brendan Cain

(Authorized Officer's or Representative's Signature)

(Cell Phone Number)

MAY 21 2012

(Date)

Holders Acknowledgement when notice is delivered in person.

(Signature of Recipient)

(Firm Name)

(Name of Recipient)

(Date)

☐ HOLDER ☐ CASE FILE