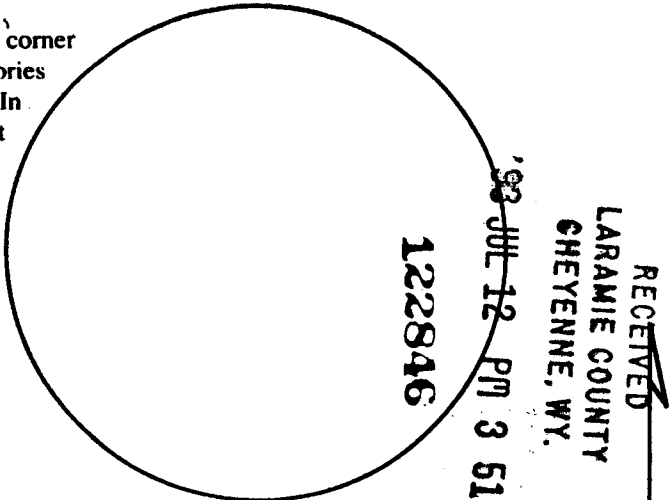


# Wyoming Certified Land Corner Recordation Certificate

*This form is to be completed in accordance with W.S. 36-11-101, printed in black ink or typed, and shall be for one individual corner.*

Describe below, or show in sketch attached to this form, the corner evidence found. Include condition and type of monument, accessories and ties. Describe any maintenance or rehabilitation performed. In the circle to the right, show monument inscription. If monument is determined lost or obliterated, restate the GLO or BLM original field note record; describe or show the procedure used to reestablish the corner and all data as above for a found monument.



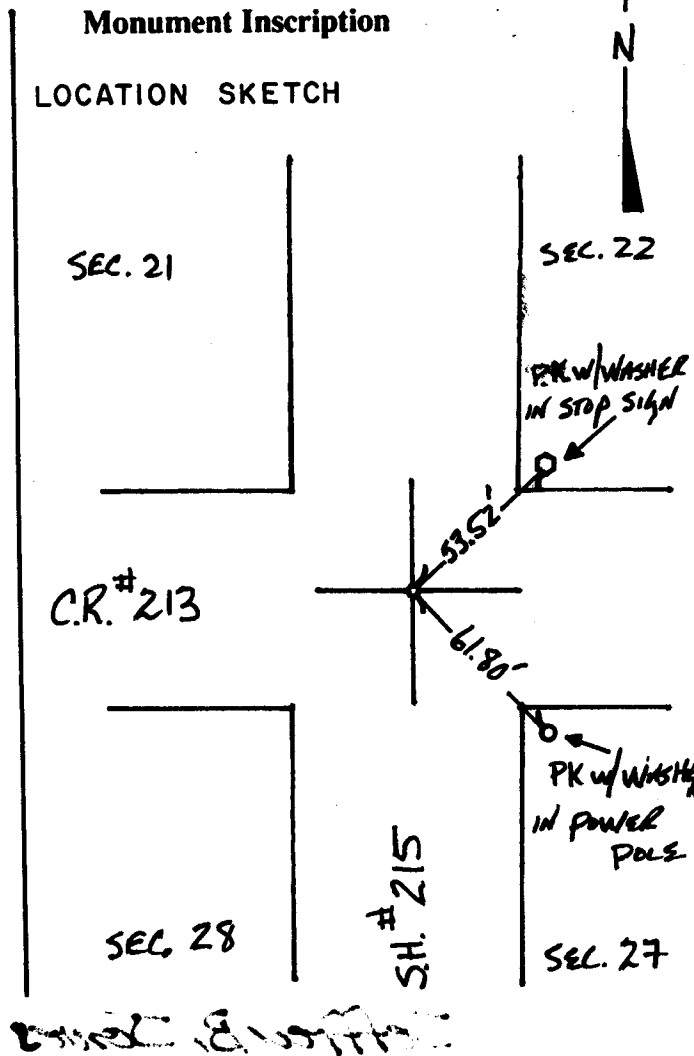
Field Date \_\_\_\_\_ Office Reference 2488

EVIDENCE FOUND: FOUND SPIKE  
ORIGIN UNKNOWN

GLO RECORD:

MONUMENT SET: NONE

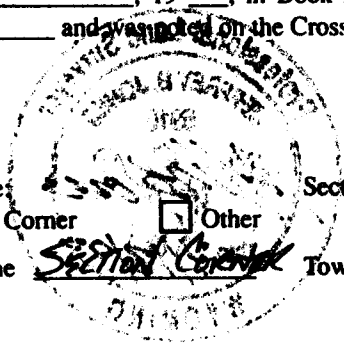
REFERENCE POINTS SET: P.K. NAILS  
W/WASHER STAMPED  
PLS 5910 SET AS  
SHOWN IN SKETCH.



State of Wyoming  
Office of County Clerk  
County of \_\_\_\_\_

This Certified Land Corner Recordation Certificate was filed for record on the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_, in Book No. T 16, R 60, on Alpha-Numeric coordinates R-13 and was plotted on the Cross Index Plat.

Corner Type:  Aliquot Corner  Other  
Section(s) 21, 22, 27, 28 Meridian 6<sup>th</sup> P.M.  
Corner Name Section Corner Township T. 16 N. Range R. 60 W. Page 1  
Sheet 1 of 1

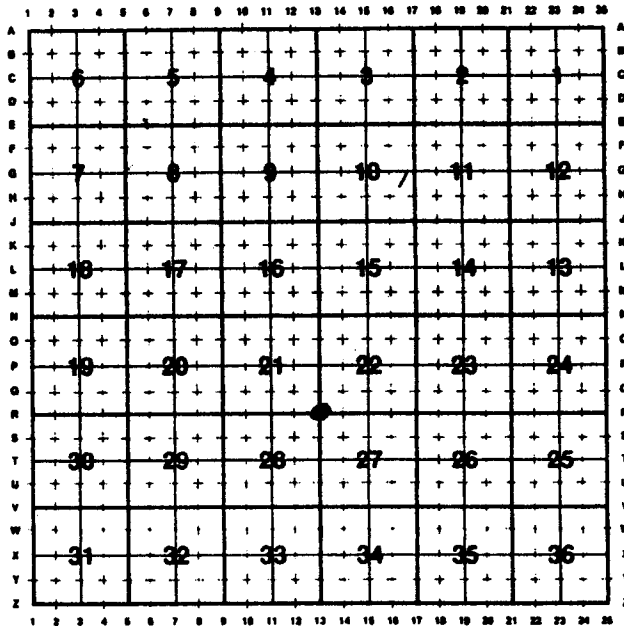


**Directions for using the  
Cross Index Plat**

Section, quarter and sixteenth corners will be marked with a dot at the corner location. The alpha-numeric coordinate number is then determined for the intersection of the two lines. A corner that applies to two or more townships shall be filed under all that apply by the use of photo copies.

Closing corners will be indexed under the township in which they control ownership. For 1/64, 1/256, 1/1024 and non-aliquot corners lying between grid designations, mark the appropriate grid area with a dot and use the index code to the north and west (local systems may be used if the method is approved by the County Surveyor or Clerk and a written description of its use is filed in the front of each book of certificates).

**Cross Index Plat**



**State Plane Coordinates (optional)**

Zone      W      WC      EC      E      feet/meters

NAD 1927       NGVD 1929       NAD 1983       NAVD 1988

North (Y) = \_\_\_\_\_ East (X) = \_\_\_\_\_ EL = \_\_\_\_\_

Latitude \_\_\_\_\_ Longitude \_\_\_\_\_

Scale Factor \_\_\_\_\_ Geoid Height \_\_\_\_\_

**Certification**

I, Jeffrey B. Jones, Wyoming PLS-DE 5910 certify that I, or others under my supervision, have performed the work as described above and completed this form.

Company or Agency INTERMOUNTAIN PROFESSIONAL SERVICES, INC.

Mailing Address 1816 CENTRAL AVENUE

Street Address \_\_\_\_\_

City, State, ZIP CHEYENNE, WYOMING 82001

Telephone, FAX PH. 307-632-3138 FAX 307-632-3194



Signature \_\_\_\_\_ and Date \_\_\_\_\_

Sheet \_\_\_\_\_ of \_\_\_\_\_