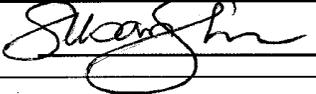


Comments:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Test Performed By:  Title: M.S.O. Phone: (701) 300-3841

Signed: JOAN SWETLICK Title: REGULATORY Date: \_\_\_\_\_

Witnessed By:  Title: FIELD INSPECTOR Agency: COGCC