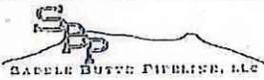


TEST SPECIFICATIONS						Date:		Select Routing:													
Rangeview Pipeline Gathering System Hydrostatic Pressure Test						23-Jan-2017															
Klein 19MN (North) Well Connect						Test Number: 1		of 1													
Project Name: Rangeview Pipeline Gathering System			Project I.D. / AFE Number 16W022A			Facility Name or Number Klein 19MN Well Pad															
Installation Location (M.P. or S.S.): 0+00 to 0+35		State: CO	County/Parish: Weld		Class Location Designation 2	Selected Design Pressure 1480	Planned MAOP 1400														
Project Description:																					
Hydrostatic pressure test of the 4" well connect pipeline.																					
Testing at 1.25*MAOP = 1850 minimum test pressure. 2225 psig Target Test Pressure at Chart Location Max Test Pressure for ANSI 600 Valves and Fittings is 2660 psig where they are located.																					
Test shall be compliant with all test specifications in Exhibit D "Pipeline Construction Specifications" and all other Construction Documents.																					
LEAK ONLY TEST <input type="checkbox"/> STRENGTH TEST <input checked="" type="checkbox"/> FABRICATION <input type="checkbox"/> NEW CONSTRUCTION <input checked="" type="checkbox"/> REPLACEMENT <input type="checkbox"/> RETEST <input type="checkbox"/> REFERENCE DRAWINGS ATTACHED <input type="checkbox"/>																					
POST-INSTALLATION TEST <input type="checkbox"/> PRE-INSTALLATION TEST <input checked="" type="checkbox"/>																					
Test Design Criteria					Test Section - Reference Data																
Minimum Component Characteristics			Test Pressure Calculations																		
Pipe Information			<input type="checkbox"/> Input minimum and maximum pressure of test <input type="checkbox"/> Input minimum and maximum %SMYS of test			Test Medium: Water Test Duration: 4 Hours (min) Section Length: 35 Ft. Section Fill Volume: 24 Gal Max. Elevation Change: 0 Ft.															
Valve/Flange ANSI Class Rating 600# Valves/Fittings			<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Pressure (psig)</th> <th>% PIPE SMYS</th> </tr> </thead> <tbody> <tr> <td>Max. Test Pressure (Pipe)</td> <td>2600</td> <td>59.8%</td> </tr> <tr> <td>Max. Test Pressure (Valves and Fittings)</td> <td>2660</td> <td>61.2%</td> </tr> <tr> <td>Min.</td> <td>1850</td> <td>42.6%</td> </tr> </tbody> </table>				Pressure (psig)	% PIPE SMYS	Max. Test Pressure (Pipe)	2600	59.8%	Max. Test Pressure (Valves and Fittings)	2660	61.2%	Min.	1850	42.6%	Station Equations: Back: 1 (0+00), 2 (0+00), 3 (0+00) Ahead: 1 (0+00), 2 (0+00), 3 (0+00)			
	Pressure (psig)	% PIPE SMYS																			
Max. Test Pressure (Pipe)	2600	59.8%																			
Max. Test Pressure (Valves and Fittings)	2660	61.2%																			
Min.	1850	42.6%																			
Test Pressures																					
Location	Station	Elevation (feet)	Max. psig.	% SMYS @ Max.	Min. psig.	% SMYS @ Min.	Variance psig.	Target psig.	% SMYS @ Target												
BEGIN -	0+00	4631	2,600	59.8%	1,850	42.6%	750	2,225	51.2%												
HIGH ELEVATION	0+35	4631	2,600	59.8%	1,850	42.6%	750	2,225	51.2%												
LOW ELEVATION	0+00	4631	2,600	59.8%	1,850	42.6%	750	2,225	51.2%												
END	0+35	4631	2,600	59.8%	1,850	42.6%	750	2,225	51.2%												
Chart Location (Test Point)	0+00	4631	2,600	59.8%	1,850	42.6%	750	2,225	51.2%												
REMARKS:																					
ASME B16.5 2.6 System Hydrostatic Testing 2003: Flanged joints and flanged fittings may be subjected to system hydrostatic tests at a pressure of 1.5 times the 38°C (100°F) rating rounded off to the next higher 1 bar (25 psi) increment. Testing at any higher pressure is the responsibility of the user, taking into account the requirements of the applicable code or regulation.																					
Test shall be compliant with all test specifications in Exhibit D "Pipeline Construction Specifications" and all other Construction Documents.																					
PRE-TEST SPECIFIED / REVIEWED BY:			TEST PERFORMED / ACCEPTED BY:			POST-TEST REVIEWED BY:															
Originator (Signature)	Date:	Test Performed by (Signature) <i>Demayre Key</i>			Date:	Compliance (signature)		Date:													
Designed Reviewed if applicable (Signature)	Date:	Company Name (for Contractor or for Employee): <i>North Winds of Wyoming</i>			Date:	Engineering or Operations (Signature)		Date:													
Compliance (Signature)	Date:	Witnessed & Accepted by Company Representative: (Signature) <i>Charles Walker</i>			Date:	Actual MAOP															

✓



April 2006

MOP Establishment and Pressure Testing of Pipelines
TG1601.190

PAGE 1 OF 9

LIQUID PIPELINE
PRESSURE TEST
REPORT

Pressure Test Number _____

MOP of tested facility is PSIG

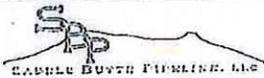
Company: Saddle Butte Operations Area: _____

Project: Rangview Gathering AFE: 16W022A

Pipeline: Klein 19 MN Well Connect

Section: all

Station or Milepost From: 0+00 To: 0+35



INSTRUCTIONS

In this worksheet, cells containing formulas are protected against input.
Cells with **BLUE** text labels allow or require input.

<i>General Information</i>	<ul style="list-style-type: none"> • Complete this Report and attached necessary exhibits for all SBP installed pipelines or pipeline segments or those re-qualified for service. • Fill in all applicable information. If information is not applicable, write NA in the corresponding space on the Report.
<i>Pipe Data</i>	<ul style="list-style-type: none"> • Record the details for each pipe section tested, including lengths, line fill, pipe fittings, etc. • Add together pipe section lengths and line fill for a total pipe section length and line fill.
<i>Test Water Data</i>	<ul style="list-style-type: none"> • Enter water source information (i.e., from municipal supply, well, river, lake, pond) in the Test Log or notes section of the Report. • Source water temperature compared to ground temperature can assist with understanding the time for the water to stabilize.
<i>Pressure Calculations</i>	<ul style="list-style-type: none"> • Elevation of high and low points and the elevation of the test pressure measure sites is required for calculation of the target test pressures.
<i>Test Log</i>	<ul style="list-style-type: none"> • Fill out the Test Log at the time of the test. This is the actual log of the test. • From the start of filling the test section, record pressure readings from the calibrated test gauge or deadweight tester used in the test. • Record the test pressure and temperatures at intervals of 30 minutes to an hour and as necessary to represent the test pressure during the test period. • The below ground pipe temperature sensor should be placed away from exposed pipe and far enough from the water injection point so that water injected will not affect the readings. • In the Remarks column, enter start of test, end of test, and any remarks concerning unusual events, such as liquid added or withdrawn, weather conditions, etc.
<i>Notes</i>	<ul style="list-style-type: none"> • Enter all pertinent comments about the test, including such things as weather conditions, radical weather changes, equipment malfunctions, or any other noteworthy event that may affect testing.
<i>Profile</i>	<ul style="list-style-type: none"> • An elevation profile is required for any test section where the elevation varies more than 100 feet. The following items should be noted on the profile: <ul style="list-style-type: none"> - Location and elevation where test pressure measurements are taken - High and low points - Stationing or mileposts - Horizontal and vertical scale of the drawing • Elevation data is available in electronic format from the KPL mapping system. • If electronic elevation data is not available, take profile elevations from survey information or from U.S. Geological Service 7 1/2 minute topographical maps.
<i>Failure Log</i>	<ul style="list-style-type: none"> • Record each failure event that causes the line to be taken "off test". • Enter the date, time, and pressure at the time of failure. • List the apparent cause of the failure if the actual cause cannot be determined. Pipe seam failure or leaking flange, for example, could be entered as the cause of test failure. • Describe the repair method (i.e., changed-out pipe or tightened flange).
<i>Supplementary Documentation</i>	<ul style="list-style-type: none"> • Check each supplementary documentation attached as part of this test record (i.e., test charts and/or equipment certifications). • Write the corresponding Exhibit Number on the attached supplementary documentation.
<i>Certification</i>	<ul style="list-style-type: none"> • Signatures of the Company and Contractor representatives in charge of the test are MANDATORY.



PRESSURE CALCULATIONS

Location of Test Point Klein North above ground	Elevation of Test Point 4631 Ft. (Elevation) 0+00 Ft. (Station)	High Point 4631 Ft. (Elevation) 0+35 Ft. (Station) Location Name	Low Point 4631 Ft. (Elevation) 0+00 Ft. (Station) Location Name
Target MOP: Target Test Pressure Range 1st Min: 2225 Maximum: 2600 2nd Min:	Test Duration: 4 hr High Point: 2360 Low Point: 2240	Start Point 4631 Ft. (Elevation) 0+00 Ft. (Station) Location Name	End Point 4631 Ft. (Elevation) 0+35 Ft. (Station) Location Name

TEST LOG

DATE	TIME	PRESSURE	AMBIENT TEMP	BELOW GROUND TEMP	ABOVE GROUND TEMP	REMARKS
	9:45	0	38		40	
	10:00	0	38		46	Build to 500
	10:00	499	38		46	
	10:15	498	39		47	Build to 1000
	10:15	1000	39		47	
	10:30	1001	39		47	Build to 1500
	10:30	1500	39		47	
	10:45	1500	40		49	Build to 2000
	10:45	2002	40		48	
	11:00	2004	40		49	Build to 2225 +
	11:00	2266	40		49	Bleed to 2240
*	11:02	2240	40		49	* Begin TEST
	11:15	2243	41		50	Sunny nice
	11:30	2246	43		52	most of pipe is shaded by Tanks
	11:45	2248	43		53	but it is starting to get some
	12:00	2254	44		57	Sun
	12:15	2261	45		59	
	12:30	2268	46		60	Sunny
	12:45	2276	46		62	
	1:00	2288	46		62	
	1:15	2298	47		64	
	1:30	2310	47		65	Partly Cloudy
	1:45	2322	48		66	
	2:00	2334	48		65	Mostly cloudy, wind picked up
	2:15	2338	48		63	cloudy covered pipe, turned
	2:30	2334	47		60	heater on
	2:45	2340	47		59	
	3:00	2350	47		58	
*	3:15	2360	46		56	* END TEST Bleed to 2000
	3:16	2003	46		56	
	3:30	2003	45		55	Bleed to 1500
	3:30	1502	45		55	
	3:45	1500	44		54	Bleed to 1000
	2:45	1001	44		54	
	4:00	1000	43		53	Bleed to 500
	4:00	501	43		53	
	4:15	500	42		52	Bleed to 0
	4:15	0	42		53	
	4:30	0	42		53	



TEST EQUIPMENT

PRESSURE RECORDER 1:

Mfg. Barton
Model V202A
Serial No. 161894
Range 0 - 3000 PSI
0 - 150° F
Notes: _____

PRESSURE RECORDER 2:

Mfg. _____
Model _____
Serial No. _____
Range _____
Notes: _____

DEADWEIGHT TESTER OR CALIBRATED TEST GAUGE:

Mfg. Crystal
Model YPSI
Serial No. 364359
Date of last Calibration 11/2/16
Calibrated by PMC
Range 0 - 5000 PSI
Notes: _____

TEMPERATURE RECORDER:

Mfg. _____
Model _____
Serial No. _____
Range _____
Notes: _____

CALIBRATION OF TEMPERATURE RECORDER

Temperature recorder reading	Test mercury thermometer reading	Remarks

CALIBRATION OF PRESSURE RECORDER 1

Pressure recorder reading	Deadweight tester reading	Remarks

CALIBRATION OF PRESSURE RECORDER 2

Pressure recorder reading	Deadweight tester reading	Remarks

NOTES



EQUIPMENT CALCULATED MOP SUMMARY WORKSHEET

1. Test Information:

Target MOP
Enter the desired MOP,
if less than pipe
internal design
pressure.

Date 1-23-17 Time 9:00 AM
Test Point Location 0+00
Test Medium Water Test Duration 4 hr
Specific Gravity of Test Medium _____
Min. Test Press. at test site 125% of min. MOP + elev. 110%
Maximum allowable % of SMYS = 100%

2. Pipe Specifications:

Manufacture Type _____

Grade _____

Pipe (#1) O.D. _____
SMYS _____
Wall thickness _____
Length (ft.): _____

MOP _____
Seam Joint Factor _____
Design Factor (F) _____
Volume _____

Max allowable test pressure, psig _____

3. Pipe Specifications:

Manufacture Type _____

Grade _____

Pipe (#2) O.D. _____
SMYS _____
Wall thickness _____
Length (ft.): _____

MOP _____
Seam Joint Factor _____
Design Factor (F) _____
Volume _____

Max allowable test pressure, psig _____

4. Pipe Specifications:

Manufacture Type _____

Grade _____

Pipe (#3) O.D. _____
SMYS _____
Wall thickness _____
Length (ft.): _____

MOP _____
Seam Joint Factor _____
Design Factor (F) _____
Volume _____

Max allowable test pressure, psig _____

5. Pipe Specifications:

Manufacture Type _____

Grade _____

Pipe (#4) O.D. _____
SMYS _____
Wall thickness _____
Length (ft.): _____

MOP _____
Seam Joint Factor _____
Design Factor (F) _____
Volume _____

Max allowable test pressure, psig _____

6. Pipe Specifications:

Manufacture Type _____

Grade _____

Pipe (#5) O.D. _____
SMYS _____
Wall thickness _____
Length (ft.): _____

MOP _____
Seam Joint Factor _____
Design Factor (F) _____
Volume _____

Max allowable test pressure, psig _____

7. Pipe Specifications:

Manufacture Type _____

Grade _____

Pipe (#6) O.D. _____
SMYS _____
Wall thickness _____
Length (ft.): _____

MOP _____
Seam Joint Factor _____
Design Factor (F) _____
Volume _____

Max allowable test pressure, psig _____

8. Pipe Fittings Specifications:

Manufacture Type _____

Grade _____

Fitting Description _____

Pipe Fitting O.D. _____
SMYS _____
Wall thickness _____

MOP _____
Seam Joint Factor _____
Design Factor (F) _____

Max allowable test pressure, psig _____

9. Pipe Fittings Specifications:

Manufacture Type _____

Grade _____

Fitting Description _____

Pipe Fitting O.D. _____
SMYS _____
Wall thickness _____

MOP _____
Seam Joint Factor _____
Design Factor (F) _____

Max allowable test pressure, psig _____

10. Pipe Fittings Specifications:

Manufacture Type _____

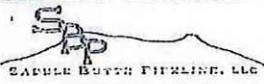
Grade _____

Fitting Description _____

Pipe Fitting O.D. _____
SMYS _____
Wall thickness _____

MOP _____
Seam Joint Factor _____
Design Factor (F) _____

Max allowable test pressure, psig _____



FAILURE LOG

FAILURE:
Date: _____ Time: _____ am / pm Failure Pressure: _____
Apparent Cause: _____
REPAIR:
Describe Repair Method: _____

FAILURE:
Date: _____ Time: _____ am / pm Failure Pressure: _____
Apparent Cause: _____
REPAIR:
Describe Repair Method: _____

FAILURE:
Date: _____ Time: _____ am / pm Failure Pressure: _____
Apparent Cause: _____
REPAIR:
Describe Repair Method: _____

FAILURE:
Date: _____ Time: _____ am / pm Failure Pressure: _____
Apparent Cause: _____
REPAIR:
Describe Repair Method: _____

FAILURE:
Date: _____ Time: _____ am / pm Failure Pressure: _____
Apparent Cause: _____
REPAIR:
Describe Repair Method: _____



SUPPLEMENTARY DOCUMENTATION

The following marked exhibits are attached as a part of this Test Report:

- EXHIBIT NO. 1 Sketch of Tested Piping (including how section is isolated), with material list
- EXHIBIT NO. 2 Profile of pipeline section and/or segment
- EXHIBIT NO. 3 Pressure Chart, with pressure test number, date, test section name, Inspector name and signature
- EXHIBIT NO. 4 Temperature Chart, with pressure test number, date, test section name, Inspector name and signature
- EXHIBIT NO. 5 Pressure Recorder Certification Papers
- EXHIBIT NO. 6 Temperature Recorder Certification Papers
- EXHIBIT NO. 7 Deadweight or Calibrated Test Gauge Certification Papers
- EXHIBIT NO. 8 Field test data log, if hand written
- EXHIBIT NO. 9 Pressure Test Procedure, if applicable, with MOP Area Representative and Engineer signature approval

CERTIFICATION

I certify this pipeline or pipeline section has been tested and successfully met the terms of SBP MOP Establishment and Pressure Testing of Pipelines Technical Guideline and, where applicable, the contract document between SBP and its prime contractor.

MOP Area Representative

By: _____ (Please print) _____ (Signature) Date: _____

Engineer

By: _____ (Please print) _____ (Signature) Date: _____

Inspector

By: Charles Wallace (Please print) Charles Wallace (Signature) Date: 1-23-17

Name of Testing Contractor

By: North winds of Wyoming (Please print) Dwayne Keys (Signature) Date: 1-23-17

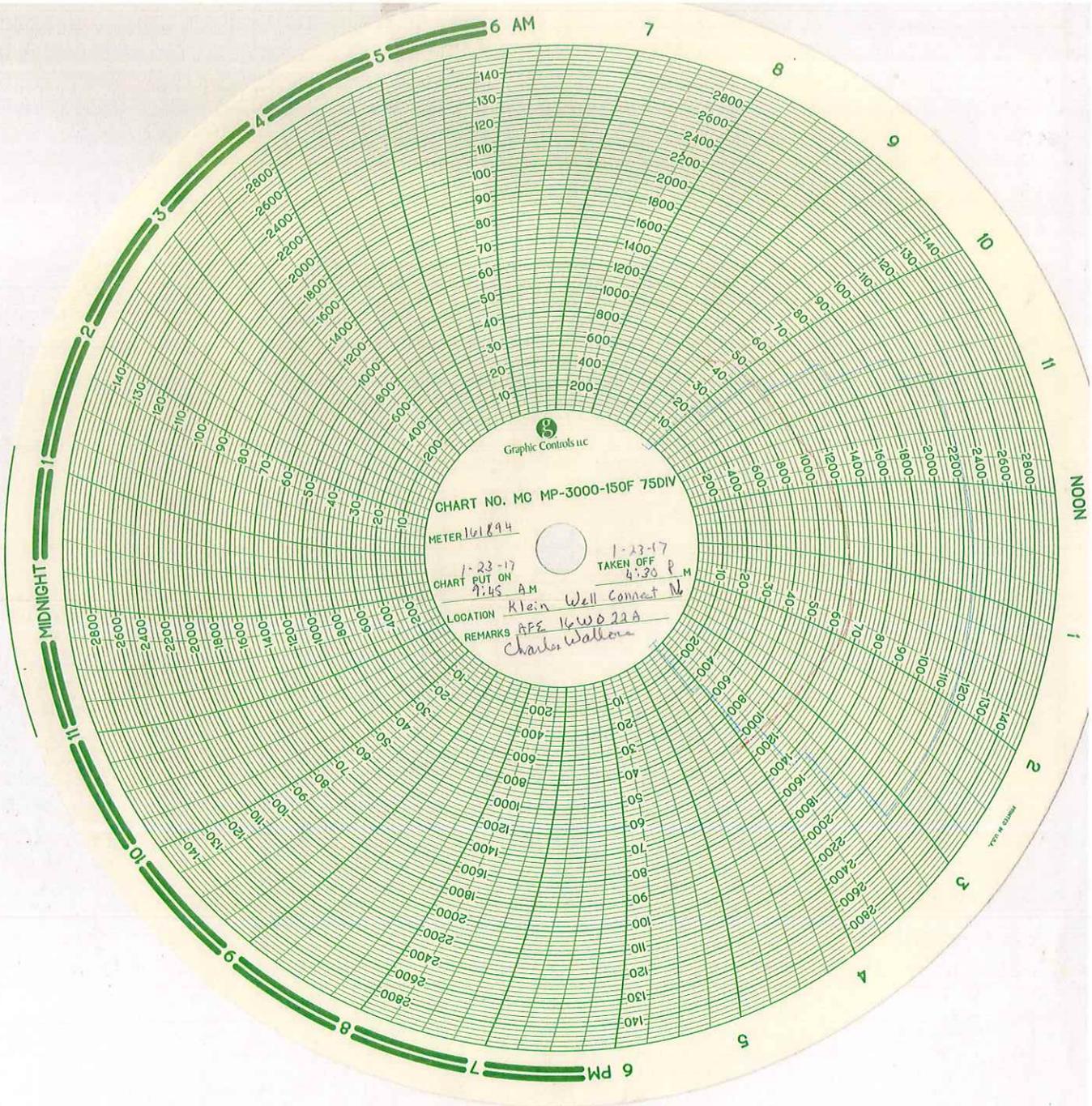


CHART NO. MC MP-3000-150F 75DIV

METER 161894

CHART PUT ON 1-23-17 9:45 AM

TAKEN OFF 1-23-17 4:30 P M

LOCATION Klein Well Connect N

REMARKS Off Woods 22A Charles Wallen

CR-2



Certificate of Calibration

PROCESS MEASUREMENT COMPANY
2475 W. 2ND AVE 34A DENVER, CO , 80223
303-937-7226 Fax: 303-936-2731
www.pmc-calibration.com

Prepared For:
PIPELINE SUPPLY AND SERVICE
9700 E 104TH AVE

Certificate Number
883189

Equipment Information

I.D.:	CR-2	As Found:	Fail	As Left:	Pass
Manufacturer:	CRYSTAL	Calibration Result:	ADJ.		
Model Number:	XP2I	Cal Date:	11/2/2016		
Serial Number:	364359	Cal. Due Date:	11/2/2017		
Description:	PRESSURE GAGE	Cal. Interval:	12 MONTHS		
Received Cond:	OPERABLE	Temp./RH:	71.9F / 21.8%		

Calibration Notes

Test Points

Description	Nominal	Tolerance -	Tolerance +	As Found	As Left	Unit	Notes
Pressure	1000.0	999.0	1001.0	1002.4	1000.4	PSI	A
	2000.0	1998.0	2002.0	2001.3	2001.8	PSI	
	3000.0	2997.0	3003.0	3000.8	3000.7	PSI	
	4000.0	3996.0	4004.0	3999.0	4000.5	PSI	
	5000.0	4995.0	5005.0	4999.8	5002.3	PSI	

Standards Used To Calibrate Equipment

Manufacturer	Model	Serial Number	ID Number	Cal. Due Date
AMPROBE	TR300	14040186	PMCD-064	5/16/2017
CHANDLER ENGINEERING CO	23-1	15586	PMCO-134	5/3/2017

Procedure	Rev	Date
SCP05-022	0	2/9/2015

Matthew Knowles
Certified By: **MATTHEW KNOWLES**
CALIBRATION TECHNICIAN

This instrument was calibrated to standards traceable to NIST, or an equivalent National Metrology Institute per the guidelines specified in Z540.1. Unless otherwise stated, the TUR for a given measurement result is 4:1 or greater. Test equipment used to calibrate this instrument are traceable to International System of Units through the National Institute of Standards and Technology (NIST) or equivalent National Metrology Institute. The data provided in this report only apply to the specific item(s) listed on this certificate. This document shall not be reproduced, except in full, without written approval from Process Measurement Company.

PSS-COMPANIES



9700 E. 104TH AVE, UNIT F- HENDERSON, CO 80640 - Phone (303)857-7986 - Fax (303)389-4945

CALIBRATION CERTIFICATE

CERTIFICATE NUMBER: CO

Details +/-: 1.0% ACCURACY

DATE CALIBRATED: 11/12/2016

DUE DATE: 11/12/2017

INDICATED TEMPERATURE RANGE: # 0 – 150°F

INDICATED PRESSURE RANGE: #0 – 3000 PSI

SERIAL NO: 202A-161894

MANUFACTURER: BARTON/ 12" RECORDER

TYPE OF INSTRUMENT CALIBRATED: TEMPERATURE / PRESSURE RECORDER

INSTRUMENT FINDINGS/STATUS: UNIT IS IN TOLERANCE/ INSTRUMENT MEETS OR EXCEEDS SPECIFICATIONS.

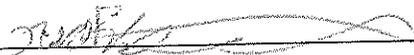
BASED ON INTERNATIONAL STANDARDS OF GRAVITY: (980.665 cm./sq.).

TYPE OF STANDARD USED TO CALIBRATE: REFINERY DEADWEIGHT TEST UNIT SPT. (35225-3) SERIAL No. 5268: KESSLER TEST THERMOMETERS; SERIAL NO. CALIBRATION DATE: SEPTEMBER 14, 2015

ALL STANDARD DIRECTLY TRACEABLE TO NATIONAL INSTITUTE OF STANDARDS & TECHNOLOGIES TEST NO: (N.I.S.T.) 2.6/172490 & 6.6/139577.

CALCULATED USING MASS VALUES, AREA, AO, AND STATED GRAVITY.
ROOM TEMPERATURE/HUMIDITY (AT TIME OF TEST): 66°F / 25%.

CALIBRATED BY: NICK BEDFORD

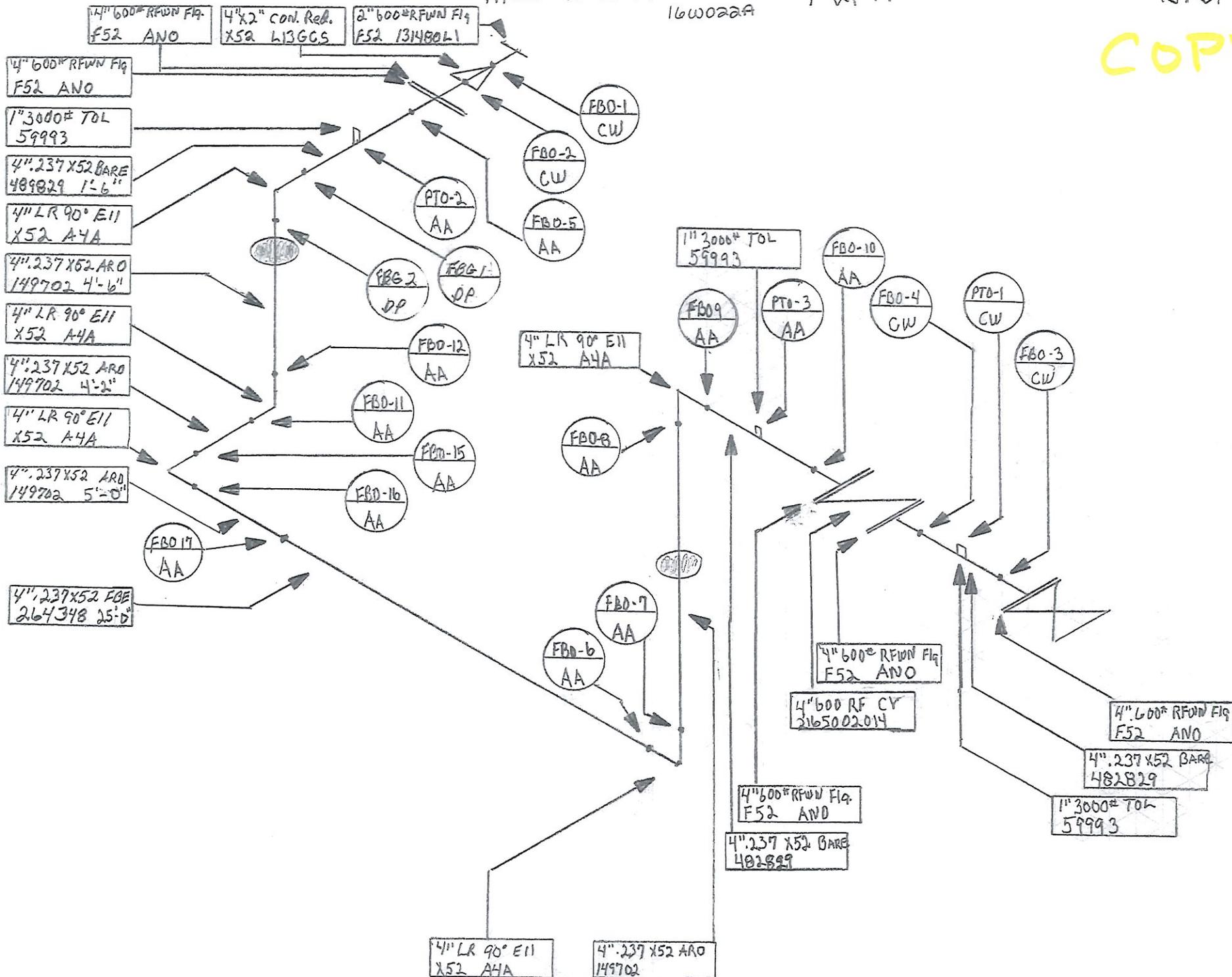


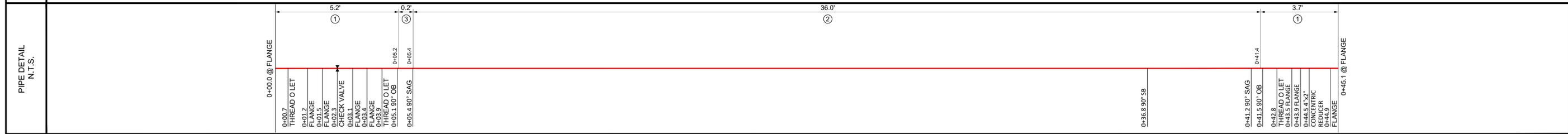
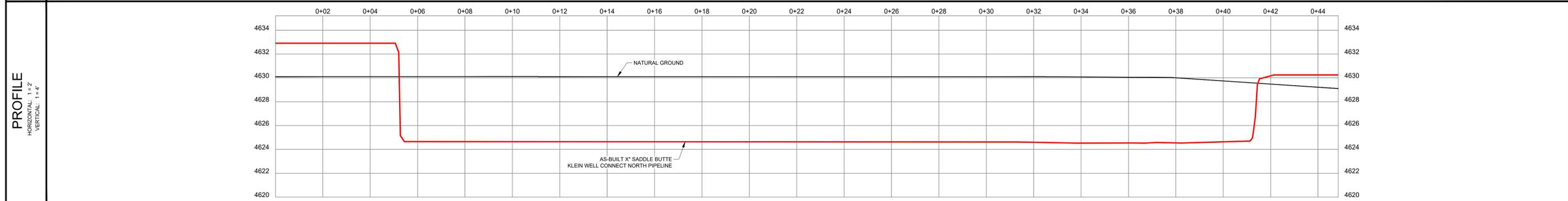
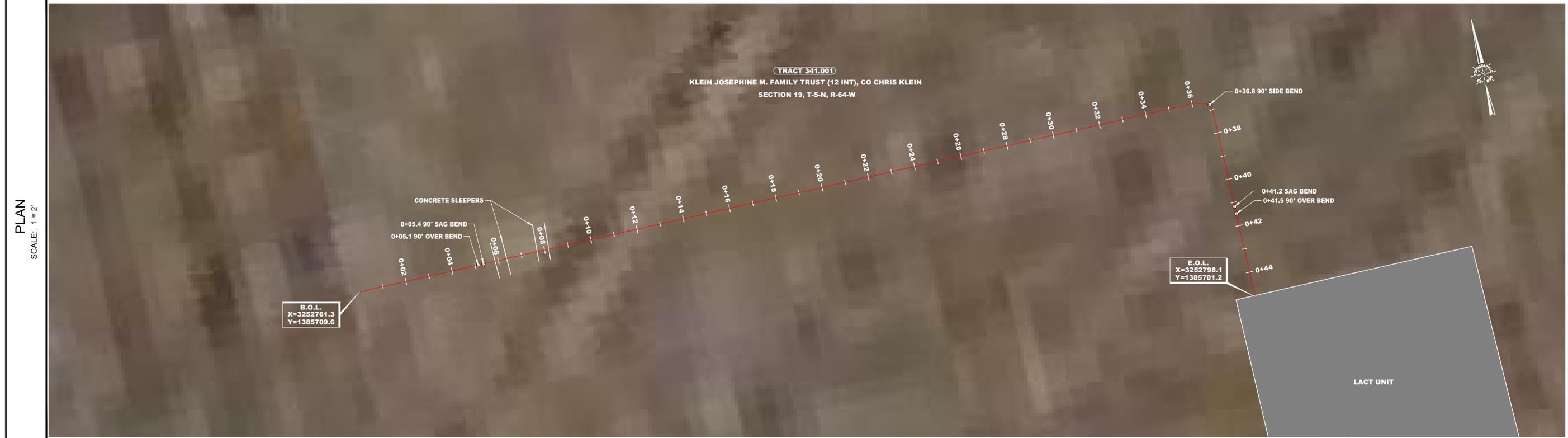
Klein North (Klein 19MN)
16W022A

1-21-17

J.G.

COPY





LEGEND

- CIL AS-BUILT PIPELINE
- - - FENCE LINE
- . - . SURVEY/SECTION LINE
- - - TRACT BORDER
- - - COUNTY LINE
- - - EXISTING PIPELINE
- - - ROAD WAY
- ▭ PERMANENT EASEMENT
- ▨ TEMPORARY WORKSPACE
- ▧ ADDITIONAL TEMPORARY WORKSPACE
- POINT OF INTERSECTION
- ⊙ TEST LEAD
- ⊗ BLOCK VALVE
- ⊕ BORE ENTRY/EXIT

GENERAL INFORMATION

ISSUED FOR REVIEW

M.A.O.P.: XXXX P.S.I.G., MINIMUM REQ. TEST PRESSURE - XXXXX PSIG
 ALL BEARINGS, DISTANCES, AND COORDINATE VALUES CONTAINED HEREON ARE GRID BASED UPON THE COLORADO STATE PLANE COORDINATE SYSTEM, NORTH ZONE OF THE NORTH AMERICAN DATUM 1983, U.S. SURVEY FEET

WARNING
 A REASONABLE ATTEMPT HAS BEEN MADE TO LOCATE ALL UNDERGROUND OBSTRUCTIONS BUT UTILITIES SHOWN HEREON ARE APPROXIMATE ONLY AND THERE MAY ALSO BE OTHER UNDERGROUND UTILITIES THAT ARE NOT SHOWN. IT IS STILL THE CONTRACTORS RESPONSIBILITY TO LOCATE ALL UNDERGROUND FACILITIES WITHIN WORKING AREA. CONTRACTOR MUST CONTACT ONE CALL UTILITY LOCATION SERVICES AND THE OWNERS OF THE UTILITIES TO VERIFY THEIR LOCATION.

THIS DOCUMENT IS FOR AS-BUILT PURPOSES ONLY AND IS NOT INTENDED TO BE FILED OF RECORD FOR EASEMENT OR ANY OTHER PURPOSE.

ORIGINAL DOCUMENT SIZE: 24" X 36"

REVISION		SUMMARY OF MATERIALS	
NO.	DESCRIPTION	DATE	DESCRIPTION
1	ADDRESS COMMENTS	03/24/17	4" x 0.237 X52, PAINTED
2	ADDRESS COMMENTS	03/31/17	4" x 0.237 X52, ERW, 14-16 MILS FBE/ 30 MILS ARO
3	ADDRESS COMMENTS	04/13/17	4" x 0.188 X52, ERW, 14-16 MILS FBE

SADDLE BUTTE ROCKIES MIDSTREAM, LLC.

AS-BUILT ALIGNMENT
 AS-BUILT KLEIN WELL CONNECT - NORTH
 4" PIPELINE
 0+00.0 TO 0+45.1

FILE: AB_KLEIN_WELL_CONNECT_NORTH_REV3
 DRAFT: SRJ
 CHECK: BR
 SHEET: 1 OF 1
 DATE: 3/10/17

REVISION: **3**

TOPOGRAPHIC
 LOYALTY INNOVATION LEGACY
 1400 EVERMAN PARKWAY, Ste. 197 - FT. WORTH, TEXAS 76140
 TELEPHONE: (817) 344-7512 - FAX: (817) 748-7548
 TEXAS FIRM REGISTRATION NO. 10042504
 WWW.TOPOGRAPHIC.COM