Subsurface Safety Valve: Manu. and Type

18. I hereby certify that the foregoing is true and correct

SIGNED JIM L. Jacobs

(This space for Federal or State office use)

APPROVED BY _______ TITLE ______ DATE _______

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

*See Instructions on Reverse Side

FARMINGTON NESOUNCE MIEA

FEB 28 1989