including the Alabama, Tombigbee, and Cahaba River systems. Recent collections of the species have been restricted to the lower Alabama River below R.F. Henry Lock and Dam to the confluence of the Tombigbee River, as well as to the lower Cahaba River near its confluence with the Alabama River; however, incidents of such collections are extremely rare. The last capture of an Alabama sturgeon was on April 3, 2007, by biologists at the Alabama Department of Conservation and Natural Resources (ADCRN). The species was last observed on April 23, 2009, by ADCRN biologists. The Alabama sturgeon is one of the rarest species of fish in the nation and may be close to extinction.

Restoring an endangered or threatened animal or plant to the point where it is again a secure, self-sustaining member of its ecosystem is a primary goal of our endangered species program. To help guide the recovery effort, we prepare recovery plans for most listed species. Recovery plans describe actions considered necessary for conservation of the species, establish criteria for downlisting or delisting, and estimate time and cost for implementing recovery measures.

The Act requires the development of recovery plans for listed species, unless such a plan would not promote the conservation of a particular species. Section 4(f) of the Act requires us to provide a public notice and an opportunity for public review and comment during recovery plan development. The draft of this recovery plan was available for public comment from April 12 through June 11, 2012 (77 FR 21993). We considered the information received via public comments as well as from peer reviewers in our preparation and approval of this final recovery plan. We also edited some sections of the draft recovery plan to reflect these comments; however, no substantial changes were made to the draft plan.

Recovery Plan Components

The objective of this plan is to provide a framework for the recovery of the Alabama sturgeon so that protection under the Act is no longer necessary. Delisting of the species is not currently foreseeable due to extreme curtailment of range and extensive modification to the riverine habitats. Therefore, this recovery plan establishes criteria for downlisting the Alabama sturgeon from endangered to threatened.

Downlisting of the Alabama sturgeon may be considered when the following criteria are met: (1) A population consisting of approximately 500 sexually mature Alabama sturgeon is shown to be surviving and naturally reproducing in the Alabama/Cahaba Rivers; (2) population studies show that the Alabama sturgeon population is naturally recruiting (consisting of multiple age classes), sustainable over a period of 20 years (2–3 generations), and no longer requires hatchery augmentation; and (3) an agreement is in place that ensures adequate flows are being delivered down the Alabama River for successful development of sturgeon larvae and passage of the fish both upstream and downstream at dams on the Alabama River.

Authority

The authority for this action is section 4(f) of the Endangered Species Act, 16 U.S.C. 1533 (f). Dated: July 8, 2013. Leopoldo Miranda, Acting Regional Director, Southeast Region.

DEPARTMENT OF THE INTERIOR

Bureau of Land Management

Notice of Public Meeting, Eastern Montana Resource Advisory Council

AGENCY: Bureau of Land Management, Interior.

ACTION: Notice of Public Meeting.

SUMMARY: In accordance with the Federal Land Policy and Management Act (FLPMA) and the Federal Advisory Committee Act of 1972 (FACA), the U.S. Department of the Interior, Bureau of Land Management (BLM) Eastern Montana Resource Advisory Council (RAC) will meet as indicated below.

DATES: The next regular meeting of the Eastern Montana RAC will be held on September 5, 2013 in Billings, Montana. The meeting will start at 8:00 a.m. and the public comment period will start at 11:00 a.m. and run for one hour. The meeting will adjourn at around 3:30 p.m.

ADDRESSES: The meeting location will be announced in a news release.

For further information contact: Mark Jacobsen, Public Affairs Specialist, BLM Eastern Montana/Dakotas District, 111 Garryowen Road, Miles City, Montana, 59301, (406) 233–2831, mark.jacobsen@blm.gov. Persons who use a telecommunications device for the deaf (TDD) may call the Federal Information Relay Service (FIRS) at 1–800–677–8339 to contact the above individual during normal business hours. The FIRS is available 24 hours a day, 7 days a week to leave a message or question with the above individual. You will receive a reply during normal business hours.

Supplementary information: The 15-member council advises the Secretary of the Interior through the BLM on a variety of planning and management issues associated with public land management in Montana. At these meetings, topics will include: Eastern Montana—Dakotas District, Miles City and Billings Field Office manager updates, Field Office Resource Management Planning updates, individual council member briefings and other topics that the council may raise. All meetings are open to the public and the public may present written comments to the council. Each formal RAC meeting will also have time allocated for hearing public comments. Depending on the number of persons wishing to comment and time available, the time for individual oral comments may be limited. Individuals who plan to attend and need special assistance, such as sign language interpretation, or other reasonable accommodations should contact the BLM as provided above.

Dated: July 24, 2013.

Diane M. Friez,
Eastern Montana—Dakotas District Manager.

DEPARTMENT OF THE INTERIOR

Bureau of Ocean Energy Management

Information Collection: Forms for Oil Spill Financial Responsibility for Offshore Facilities; Proposed Collection for OMB Review; Comment Request

ACTION: 60-day notice.

SUMMARY: To comply with the Paperwork Reduction Act of 1995 (PRA), the Bureau of Ocean Energy Management (BOEM) is inviting comments on the proposed revision of forms associated with a collection of information that we will submit to the Office of Management and Budget (OMB) for review and approval. The information collection request (ICR) concerns the forms used for paperwork requirements under 30 CFR 553, Oil Spill Financial Responsibility for Offshore Facilities.
DATES: Submit written comments by October 7, 2013.

ADDRESSES: Please send your comments on this ICR to the BOEM Information Collection Clearance Officer, Arlene Bajusz, Bureau of Ocean Energy Management, 381 Elden Street, HM–3127, Herndon, Virginia 20170 (mail); or arlene.bajusz@boem.gov (email); or 703–787–1209 (fax). Please reference ICR 1010–0106 in your comment and include your name and return address.

FOR FURTHER INFORMATION CONTACT: Arlene Bajusz, Office of Policy, Regulations, and Analysis at (703) 787–1209 (fax). Please reference ICR 1010–0106 in your comment and include your name and return address.

SUPPLEMENTARY INFORMATION:

OMB Control Number: 1010–0106.

Title: 30 CFR 553, Oil Spill Financial Responsibility for Offshore Facilities.

Forms: BOEM–1016 through 1023 and BOEM–1025.

Abstract: On May 1, 2013, BOEM released a notice inviting public comment on the information collection renewal of requirements for BOEM’s Oil Spill Financial Responsibility (OSFR) regulations under 30 CFR 553 (78 FR 25472). The BOEM uses the information collected under these regulations to verify compliance with section 1016 of the Oil Pollution Act of 1990, as amended (OPA), and to confirm that applicants can pay for cleanup and damages resulting from oil spills and other hydrocarbon discharges that originate from Covered Offshore Facilities (COFs). Since May, BOEM has proposed revising the forms used with this collection and is providing the 60-day public comment period for the revisions with this notice.

BOEM is splitting the function of some forms and revising others to clarify the responsibilities and financial obligations of responsible parties and applicants, as described in the Outer Continental Shelf Lands Act, and to better align the terminology and liability with the provisions of OPA. These revisions will better protect the Federal Government from potential disputes and litigation by clarifying that the primary relationship is between the responsible party and guarantor and that the designated applicant/operator is intended to function primarily in an administrative capacity. The revisions will also better align BOEM’s process with that of the U.S. Coast Guard’s National Pollution Fund Center, thereby reducing the burden on industry in complying with potentially conflicting guidance on oil spill responsibility, particularly with respect to offshore facilities that also function as vessels.

Below is a description of each affected form, as well as any change in the burden. The revised forms are also printed at the end of this notice. Until OMB approves these revisions, the current forms remain in use and can be located at http://www.boem.gov/About-BOEM/Procurement-Business-Opportunities/BOEM-OCS-Operation-Forms/BOEM-OCS-Operation-Forms.aspx.

Form BOEM–1016, Designated Applicant Information Certification. This form remains essentially the same except for updating the choices of forms and clarifying the administrative role of the designated applicant. No change in the 1-hour burden is expected.

Form BOEM–1017, Appointment of Designated Applicant. This form remains essentially the same except for changing the title, clarifying the administrative role of the designated applicant, and adding a column to record depth ranges, when applicable. No change in the 9-hour burden is expected.

Form BOEM–1018, Self-Insurance Information. The original form posed potential confusion because it served two purposes, both to provide evidence of self-insurance (for responsible parties) and as an indemnity (executed by persons other than the responsible party). Thus, the form has been split into two forms (BOEM–1018 and BOEM–1023). BOEM–1018 focuses on self-insurance only and is reworded to more closely align with the requirements of OPA, adding an agreement to update/renew expiring or terminated instruments and a signature section. No change in the 1-hour burden is expected.

Form BOEM–1019, Insurance Certificate. The language and agreements in this form have been reworded for compliance with OPA, to clarify that the insurer is responsible for OPA liabilities of the responsible parties, and to add an agreement to update/renew expiring or terminated instruments. No change in the 120-hour burden is expected.

Form BOEM–1020, Surety Bond. The language and agreements in this form have been reworded for compliance with OPA, to clarify that the Surety is responsible for OPA liabilities of the responsible parties, and to add an agreement to update/renew expiring or terminated instruments. No change in the 24-hour burden is expected.

Forms BOEM–1021, Covered Offshore Facilities, and BOEM–1022, Covered Offshore Facility Changes. These forms remain essentially the same except for rewording of the subtitles to match the other forms and adding a provision for rights-of-way. There is no change in the 1-hour burden for BOEM–1022; however, based on respondent input we are increasing the burden for BOEM–1021 from 3 to 6 hours.

Form BOEM–1023, Financial Guarantee. This new form replaces the indemnity agreement (previously part of BOEM–1018) with a provision that an affiliated firm, such as a corporate parent, may promise to satisfy any claims against the responsible parties. It also adds an agreement to update/renew expiring or terminated instruments and a signature section. The hour burden is estimated as 1.5 hours.

Form BOEM–1025, Independent Designated Applicant Information Certification. This new form allows a designated applicant, who is not also a responsible party, to continue to agree to be jointly and severally liable under OPA until BOEM promulgates regulations that will repeal this requirement. We estimate the burden hour to be 1 hour.

We will protect information from respondents considered proprietary under the Freedom of Information Act (5 U.S.C. 552) and its implementing regulations (43 CFR part 2) and under regulations at 30 CFR 550.197. “Data and information to be made available to the public or for limited inspection.” No items of a sensitive nature are being collected. Responses are mandatory.

Frequency: On occasion or annual basis.

Description of Respondents: Holders of leases, permits, and rights of use and easement in the Outer Continental Shelf and in State coastal waters and those who will appoint designated applicants to process their OSFR paperwork. Other respondents will be the designated applicants’ insurance agents and brokers, bonding companies, and guarantors.

Public Disclosure Statement: The PRA (44 U.S.C. 3501, et seq.) provides that an agency may not conduct or sponsor a collection of information unless it displays a currently valid OMB control number. Until OMB approves a collection of information, you are not obligated to respond.

Comments: Before submitting an ICR to OMB, PRA section 3506(c)(2)(A) requires each agency “. . . to provide notice . . . and otherwise consult with members of the public and affected agencies concerning each proposed collection of information . . . “. Agencies must specifically solicit comments to: (a) Evaluate whether the proposed collection of information is necessary for the agency to perform its duties, including whether the information is useful; (b) evaluate the
accuracy of the agency’s estimate of the burden of the proposed collection of information; (c) enhance the quality, usefulness, and clarity of the information to be collected; and (d) minimize the burden on the respondents, including the use of automated collection techniques or other forms of information technology.

Agencies must also estimate the non-hour cost burdens to respondents or recordkeepers resulting from the collection of information. Therefore, if you have costs to generate, maintain, and disclose this information, you should comment and provide your total capital and startup cost components or annual operation, maintenance, and purchase of service components. You should describe the methods you use to estimate major cost factors, including system and technology acquisition, expected useful life of capital equipment, discount rate(s), and the period over which you incur costs. Capital and startup costs include, among other items, computers and software you purchase to prepare for collecting information, monitoring, and record storage facilities. You should not include estimates for equipment or services purchased: (i) Before October 1, 1995; (ii) to comply with requirements not associated with the information collection; (iii) for reasons other than to provide information or keep records for the Government; or (iv) as part of customary and usual business or private practices.

We will summarize written responses to this notice and address them in our submission for OMB approval. As a result of your comments, we will make any necessary adjustments to the burden estimates in our submission to OMB.

Public Availability of Comments:
Before including your address, phone number, email address, or other personal identifying information in your comment, you should be aware that your entire comment—including your personal identifying information—may be made publicly available at any time. While you can ask us in your comment to withhold your personal identifying information from public review, we cannot guarantee that we will be able to do so.

Dated: July 31, 2013.
Deanna Meyer-Pietruszka,
Chief, Office of Policy, Regulations, and Analysis.

BILLING CODE 4310-MR-P
U.S. Department of the Interior
Bureau of Ocean Energy Management

OMB Control No.: xxxxxxxx
Expiration Date: xxxxxxxx

PAPERWORK REDUCTION ACT STATEMENT

BUREAU OF OCEAN ENERGY MANAGEMENT
OIL POLLUTION ACT OF 1990
OIL SPILL FINANCIAL RESPONSIBILITY FOR OFFSHORE FACILITIES

The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that the Bureau of Ocean Energy Management (BOEM) collects this information to:

1. Provide a standard method for establishing eligibility for oil spill financial responsibility (OSFR) for offshore facilities;
2. Identify and maintain a record of those offshore facilities that have a potential oil spill liability;
3. Establish and maintain a continuous record, over the liability term specified in Title I of the Oil Pollution Act of 1990, of financial evidence and instruments established to pay claims for oil spill cleanup and damages resulting from operations conducted on offshore facilities and the transportation of oil from offshore platforms and wells;
4. Establish and maintain a continuous record of Responsible Parties, as defined in Title I of the Oil Pollution Act of 1990, and their agents or Authorized Representatives for oil spill financial responsibility for offshore facilities; and
5. Establish and maintain a continuous record, over the liability term specified in Title I of the Oil Pollution Act of 1990, of persons to contact and U.S. Agents for Service of Process for claims associated with oil spills from offshore facilities.

The BOEM will routinely use the information to:

1. Ensure compliance of offshore lessees and owners and operators of offshore facilities with Title I of the Oil Pollution Act of 1990;
2. Establish eligibility of applicants for OSFR; and
3. Establish a reference source of names, addresses, and telephone numbers of Responsible Parties for offshore facilities and their Authorized Representatives and Guarantors for claims associated with oil pollution from designated offshore facilities.

Responses are mandatory (33 U.S.C. 2716). No confidential or proprietary information is required to be submitted. The BOEM considers oil spill financial responsibility demonstrations, including supporting audited financial statements, to be public information open for review under the Freedom of Information Act (5 U.S.C. 552).

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid Office of Management and Budget (OMB) Control Number.

The public reporting burden for an application for certification of oil spill financial responsibility is listed below. The burden includes the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the application. The average burden for each of the forms and required information that could comprise a submission is:

Form BOEM-1016, Designated Applicant Information Certification ....................... 1 hour
Form BOEM-1017, Appointment of Designated Applicant ................................ 9 hours
Form BOEM-1018, Self-Insurance Information ................................................... 1 hour
Form BOEM-1019, Insurance Certificate ......................................................... 120 hours
Form BOEM-1020, Surety Bond ...................................................................... 24 hours
Form BOEM-1021, Covered Offshore Facilities.................................................. 6 hours
Form BOEM-1022, Covered Offshore Facility Changes ...................................... 1 hour
Form BOEM-1023, Financial Guarantee ........................................................... 1.5 hours
Form BOEM-1025, Independent Designated Applicant Information Certification 1 hour

Comments regarding the burden estimate or any other aspect of this form should be directed to the Information Collection Clearance Officer, Bureau of Ocean Energy Management, 381 Eelden Street, Herndon, VA 20170.

(Month/year)
DESIGNATED APPLICANT INFORMATION CERTIFICATION

CERTIFICATION OF OIL SPILL FINANCIAL RESPONSIBILITY
IN ACCORDANCE WITH THE REQUIREMENTS OF THE OIL POLLUTION ACT OF 1990
(TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES)

1. Designated Applicant: ______________________________
   COMPANY LEGAL NAME
   __________________________________________________
   ADDRESS
   __________________________________________________
   CITY
   __________________________________________________
   STATE
   __________________________________________________
   ZIP CODE
   __________________________________________________
   CONTACT PERSON
   __________________________________________________
   AREA CODE and TELEPHONE NUMBER
   __________________________________________________
   CONTACT PERSON’S TITLE
   __________________________________________________
   AREA CODE and FAX NUMBER
   __________________________________________________
   E-MAIL ADDRESS

2. Summary of Evidence of Oil Spill Financial Responsibility:

<table>
<thead>
<tr>
<th>Type of Evidence</th>
<th>Amount (in U.S. Dollars)</th>
<th>Effective Date of Evidence</th>
<th>Expiration Date of Evidence</th>
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<tr>
<td>• Self-insurance (BOEM-1018)</td>
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<tr>
<td>• Financial Guarantee (BOEM-1023)</td>
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<td>• Surety Bonds (BOEM-1020)</td>
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<td>• Insurance (BOEM-1019)</td>
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<td>• Other</td>
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<td>TOTAL AMOUNT</td>
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3. The Designated Applicant, for all of the Responsible Parties whose Designated Applicant authorizations (form BOEM-1017) are on file or attached, agrees to establish and maintain oil spill financial responsibility (OSFR), under the Oil Pollution Act of 1990, as amended, 33 U.S.C. § 2701 et seq., for all said Responsible Parties. This OSFR will be maintained continuously for those leases, permits, rights of use and easement, and pipeline segments identified in form(s) BOEM-1017 on file or attached. I will immediately notify the Responsible Parties of any claims that I receive. I will immediately notify the BOEM OSFR program if information on this form changes. I certify the information contained herein, including all the information on the attached forms, is complete, true, and correct to the best of my information and knowledge.

______________________________
NAME OF AUTHORIZED REPRESENTATIVE

______________________________
TITLE OF AUTHORIZED REPRESENTATIVE

______________________________
SIGNATURE

______________________________
DATE

4. The Designated Applicant’s U.S. Agent for Service of Process is:

______________________________
NAME

______________________________
ADDRESS

______________________________
BOEM COMPANY NUMBER

______________________________
CITY

______________________________
STATE

______________________________
ZIP CODE

______________________________
AREA CODE and TELEPHONE NUMBER

______________________________
AREA CODE and FAX NUMBER

______________________________
E-MAIL ADDRESS

FORM BOEM-1016 (Month/year)
Previous Editions are Obsolete.
## APPOINTMENT OF DESIGNATED APPLICANT

### CERTIFICATION OF OIL SPILL FINANCIAL RESPONSIBILITY

**IN ACCORDANCE WITH THE REQUIREMENTS OF THE OIL POLLUTION ACT OF 1990**

**TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES**

1. **Designated Applicant:**
   - **COMPANY LEGAL NAME:**
   - **BOEM COMPANY NUMBER:**
   - **ADDRESS:**
   - **BOEM COMPANY REGION:**
   - **CITY:**
   - **STATE:**
   - **ZIP CODE:**

2. **Responsible Party:**
   - **COMPANY LEGAL NAME:**
   - **BOEM COMPANY NUMBER:**
   - **ADDRESS:**
   - **BOEM COMPANY REGION:**
   - **CITY:**
   - **STATE:**
   - **ZIP CODE:**

   **CONTACT PERSON:**
   - **CONTACT PERSON’S TITLE:**
   - **AREA CODE and TELEPHONE NUMBER:**
   - **AREA CODE and FAX NUMBER:**
   - **E-MAIL ADDRESS:**

3. I, the undersigned, serving as the Authorized Representative of the Responsible Party named in section 2, do hereby appoint and authorize the Designated Applicant identified in section 1 to act on behalf of the Responsible Party to obtain a certification of oil spill financial responsibility (OSFR) for each covered offshore facility at the locations described in section 5, and to establish and maintain OSFR on the Responsible Party’s behalf for these specified covered offshore facilities in accordance with 30 CFR Part 553 and in the amounts specified by the Bureau of Ocean Energy Management (BOEM). On behalf of the Responsible Party, I explicitly agree that the Responsible Party be strictly liable, jointly and severally, together with the other Responsible Parties for each covered offshore facility described in section 5, for all oil spill removal costs and damages in accordance with the Oil Pollution Act of 1990, as amended, 33 U.S.C. § 2701 et seq.

   This appointment is effective beginning on __________ . I agree, on behalf of the
   Responsible Party, that the Responsible Party will notify the BOEM oil spill financial responsibility program in writing when this appointment is canceled; that the Responsible Party will concurrently appoint a substitute Designated Applicant; and that the Responsible Party shall be bound by the actions of the Designated Applicant hereby appointed until such time as BOEM receives such notice and a substitute Designated Applicant so appointed.

   **NAME OF AUTHORIZED REPRESENTATIVE:**
   **SIGNATURE:**
   **TITLE OF AUTHORIZED REPRESENTATIVE:**
   **DATE:**

4. **The Responsible Party’s U.S. Agent for Service of Process is:**
   - **NAME:**
   - **ADDRESS:**
   - **BOEM COMPANY NUMBER:**
   - **CITY:**
   - **STATE:**
   - **ZIP CODE:**

   **AREA CODE and TELEPHONE NUMBER:**
   **AREA CODE and FAX NUMBER:**
   **E-MAIL ADDRESS:**

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**FORM BOEM-1017 (Month/Year)**

Previous Editions are Obsolete.
5. Locations of Covered Offshore Facilities:

<table>
<thead>
<tr>
<th>STATE OR OCS REGION</th>
<th>LEASE NUMBER</th>
<th>ALIQUOT PORTION (If Applicable)</th>
<th>DEPTH RANGE (If Applicable)</th>
<th>AREA NAME</th>
<th>BLOCK NUMBER</th>
<th>PERMIT NUMBER</th>
<th>RUE OR ROW NUMBER</th>
<th>PIPELINE SEGMENT NUMBER</th>
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SELF-INSURANCE INFORMATION

RESPONSIBLE PARTY SELF-INSURANCE CERTIFICATION OF OIL SPILL FINANCIAL RESPONSIBILITY IN ACCORDANCE WITH THE REQUIREMENTS OF THE OIL POLLUTION ACT OF 1990

(TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES)

1. I, the undersigned, as the Authorized Representative of the Responsible Party (described in section 6), certifies that the Responsible Party is acting in the capacity of a Self-Insurer, in accordance with the requirements of 30 CFR 553.41.

2. The amount of coverage for which evidence of oil spill financial responsibility is being established by the Responsible Party using self-insurance is:

   | LOWER LIMIT | UPPER LIMIT (MUST BE COMPLETED) |
   | $ 0         | $                       |

3. This coverage is effective: __________ DATE and expires on the first calendar day of the fifth month after the close of the Self-Insurer's fiscal year, which ends: __________ DATE.

4. The Responsible Party providing evidence of oil spill financial responsibility in the form of Self-Insurance is:

   COMPANY LEGAL NAME: ____________________________
   BOEM COMPANY NUMBER: ____________________________
   ADDRESS: _______________________________________
   CITY: ____________________________ STATE: ________ ZIP CODE: __________
   CONTACT PERSON FOR CLAIMS: ______________________
   AREA CODE AND TELEPHONE NUMBER: __________
   AREA CODE AND FAX NUMBER: __________ E-MAIL ADDRESS: __________

5. The undersigned certifies on behalf of the Responsible Party that the requirements set forth in 30 CFR Part 553 and specifically §§ 553.21 through 553.28 have been met.

   The undersigned further agrees that the Responsible Party, pursuant to the requirements of 30 CFR 553.15, will notify the BOEM oil spill financial responsibility program in the event the Responsible Party is no longer able to maintain evidence of oil spill financial responsibility as a Self-Insurer in the amounts stated in section 2 above.
6. The Responsible Party, as Self-Insurer, acting through the Designated Applicant must, no later than the first calendar
day of the fifth month after the close of your fiscal year, submit either a renewal of this Self-Insurance or other
acceptable evidence of financial responsibility.

<table>
<thead>
<tr>
<th>NAME OF AUTHORIZED REPRESENTATIVE OF RESPONSIBLE PARTY</th>
<th>SIGNATURE</th>
</tr>
</thead>
<tbody>
<tr>
<td>TITLE OF AUTHORIZED REPRESENTATIVE OF RESPONSIBLE PARTY</td>
<td>DATE</td>
</tr>
</tbody>
</table>

7. The Self-Insurer’s U.S. Agent for Service of Process is:

<table>
<thead>
<tr>
<th>NAME</th>
<th>BOEM COMPANY NUMBER</th>
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<tbody>
<tr>
<td>ADDRESS</td>
<td></td>
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<tr>
<td>CITY</td>
<td>STATE</td>
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<tr>
<td>ZIP CODE</td>
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</tbody>
</table>

| AREA CODE AND TELEPHONE NUMBER            | AREA CODE AND FAX NUMBER | E-MAIL ADDRESS |

8. In witness whereof, the Designated Applicant and the Self-Insurer have executed this instrument on the _________
day of ____________, ____________.

MONTH       YEAR

Designated Applicant for the Responsible Parties named herein:

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<th>SIGNATURE OF AUTHORIZED REPRESENTATIVE OF DESIGNATED APPLICANT</th>
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<tr>
<td>NAME OF AUTHORIZED REPRESENTATIVE OF DESIGNATED APPLICANT</td>
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<tr>
<td>TITLE OF AUTHORIZED REPRESENTATIVE OF DESIGNATED APPLICANT</td>
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</table>
INSURANCE CERTIFICATE
CERTIFICATION OF OIL SPILL FINANCIAL RESPONSIBILITY
IN ACCORDANCE WITH THE REQUIREMENTS OF THE OIL POLLUTION ACT OF 1990
(TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES)

1. Designated Applicant: ___________________________________________ COMPANY LEGAL NAME BOEM COMPANY NUMBER

2. The amount of insurance coverage established by the named Insurers as evidence of oil spill financial responsibility (OSFR) for the Responsible Parties, identified in form(s) BOEM-1017 on file or attached, (hereafter the Insured), as represented by the Designated Applicant, in compliance with the Oil Pollution Act of 1990, as amended, 33 U.S.C. §§ 2701-2672 (hereafter the Act) and with Title 30 Code of Federal Regulations (CFR), part 553, for any one incident is:

FROM $_________________________ TO $_________________________
STARTING AMOUNT ABOVE ANY DEDUCTIBLE OR EXCESS AMOUNT UPPER LIMIT OF THIS INSURANCE LAYER

The following insurance option has been selected to provide this coverage:
☐ Full Option—Insurance is provided for the first full $________ million without deductible.
☐ Deductible Option—Insurance is provided for the amount of $________ million less the deductible amount of $________.
☐ Excess Option—Insurance is provided for the amount of $________ million in excess of the amount of $________ million.

3. This coverage is effective: ___________ at ________ and expires: ___________ at ________
DATE CENTRAL STANDARD TIME DATE CENTRAL STANDARD TIME

4. The Insurer may at any time cancel this insurance certificate by written notice of intent to cancel sent by certified mail to the Designated Applicant with copies (plainly indicating the original notice was sent by certified mail) to all Responsible Parties and to the BOEM oil spill financial responsibility program by certified mail. This instrument will remain in force and the undersigned will remain liable until the expiration date or until the earlier of (1) thirty calendar days after BOEM and the Designated Applicant receive a notification of your intent to cancel this insurance certificate; (2) BOEM receives other acceptable OSFR evidence from the Designated Applicant; or (3) all the COFs to which this Insurance Certificate applies have been permanently abandoned either in compliance with 30 CFR part 250 or the equivalent state requirements. The undersigned agrees that any termination of this Insurance Certificate will not affect the liability of the Insurer for any claims that arise from an incident (i.e., oil discharge or substantial threat of the discharge of oil) that occurs on or before the effective date of termination of this Insurance Certificate.

5. The named Insurers agree that any suit or claim for which the Responsible Parties identified in form(s) BOEM-1017, on file or attached, represented by the aforementioned Designated Applicant may be liable under Title I of the Act may be brought directly against the named Insurers for claims up to the amount of insurance coverage asserted by the U.S. government or by other claimants when a Responsible Party denies or fails to pay a claim on the basis of insolvency or a Responsible Party has petitioned for bankruptcy under Title 11 of the U.S. Code.

6. The undersigned further agrees not to use any defense except those that would be available to a Responsible Party for whom the insurance was provided or that the incident leading to the claim for removal costs or damages was caused by willful misconduct of a Responsible Party covered by this insurance.

FORM BOEM-1019 (Month/Year)
Previous Editions are Obsolete.
7. The undersigned Responsible Party further agrees, pursuant to the requirements of 30 CFR 553.15, to notify the BOEM oil spill financial responsibility program in the event the Responsible Party is no longer able to maintain evidence of oil spill financial responsibility to the extent stated in section 2 above.

8. The Designated Applicant must, no later than the first calendar day of the fifth month after the close of the Insurer’s fiscal year or expiration if earlier, submit either a renewal of this insurance or other acceptable evidence of financial responsibility.

9. Insurance agent or broker for this Insurance Certificate:

<table>
<thead>
<tr>
<th>COMPANY NAME</th>
<th>BOEM COMPANY NUMBER</th>
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<tr>
<td>ADDRESS</td>
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<td>CITY</td>
<td>STATE</td>
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<tr>
<td>COUNTRY (If not U.S.A.)</td>
<td>ZIP CODE</td>
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<tr>
<td>AREA CODE and TELEPHONE NUMBER</td>
<td>AREA CODE and FAX NUMBER</td>
</tr>
</tbody>
</table>

10. As an Authorized Representative of the insurance agent or broker identified above, I certify that the information contained in this Insurance Certificate is accurate and correct, that quota shares total 100 percent for this Insurance Certificate, and that this Insurance Certificate and the named Insurers, complies with the requirements stated in 30 CFR 553.29. The identified insurance agent or broker agrees to maintain and provide to the Designated Applicant and BOEM, on demand, any delegations of authority to a broker or an underwriter of another insurer or underwriting manager to bind a named Insurer to all risks and liabilities specified in Title I of the Act.

<table>
<thead>
<tr>
<th>NAME</th>
<th>SIGNATURE</th>
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<tr>
<td>TITLE</td>
<td>DATE</td>
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</table>

11. The named Insurers, listed below, certify that the Insured is insured by the named Insurers for the offshore facilities, as specified below, against liability for removal costs and damages to which the Insured could be subjected under Title I of the Oil Pollution Act and 30 CFR 553 within the insurance layer specified.

The following offshore facility coverage option has been selected:

- [ ] General Option—All covered offshore facilities for which the named Designated Applicant serves in that capacity.
- [ ] Schedule Option—All covered offshore facilities on the Designated Applicant’s attached information form and schedule of properties forms, effective ________________ DATE

FORM BOEM-1019 (Month/Year)
Previous Editions are Obsolete.
12. The named Insurers designate the following U.S. Agent for Service of Process for this Insurance Certificate:

<table>
<thead>
<tr>
<th>NAME</th>
<th>BOEM COMPANY NUMBER</th>
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<td>ADDRESS</td>
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<th>CITY</th>
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<td>( )</td>
<td>AREA CODE and TELEPHONE NUMBER</td>
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</table>

13. In witness whereof, the Designated Applicant for the Responsible Parties and the named insurers have executed this instrument on the ______ day of ________,' MONTH YEAR,

Designated Applicant for the Responsible Parties named herein:

________________________________________________________
SIGNATURE OF AUTHORIZED REPRESENTATIVE OF DESIGNATED APPLICANT

________________________________________________________
NAME OF AUTHORIZED REPRESENTATIVE OF DESIGNATED APPLICANT

________________________________________________________
TITLE OF AUTHORIZED REPRESENTATIVE OF DESIGNATED APPLICANT

Named Insurers:

________________________________________________________
COMPANY NAME

________________________________________________________
ADDRESS

________________________________________________________
CITY | STATE | ZIP CODE
<table>
<thead>
<tr>
<th>FORM ID NUMBER</th>
<th>INSURER'S NAME</th>
<th>QUOTA SHARE</th>
<th>AUTHORIZED SIGNATURE</th>
<th>NAME AND TITLE OF BINDING OFFICIAL</th>
<th>INSURANCE RATING</th>
<th>INSURANCE RATING SERVICE</th>
<th>DATE OF RATING (MM/YY)</th>
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**SUBTOTAL OF QUOTA**

If additional space is required, additional copies of this page may be attached as continuation pages.

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**FORM BOEM-1019** (Month/Year)

Previous Editions are Obsolete.

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<table>
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<tr>
<th>FORM ID NUMBER</th>
<th>INSURER'S NAME</th>
<th>QUOTA SHARE</th>
<th>AUTHORIZED SIGNATURE</th>
<th>NAME AND TITLE OF BINDING OFFICIAL</th>
<th>INSURANCE RATING</th>
<th>INSURANCE RATING SERVICE</th>
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**SUBTOTAL FROM PREVIOUS PAGE**

If additional space is required, additional copies of this page may be attached as continuation pages.

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**TOTAL QUOTA SHARE**  (MUST EQUAL 100%)

**FORM BOEM-1019** (Month/Year)

Previous Editions are Obsolete.
SURETY BOND

CERTIFICATION OF OIL SPILL FINANCIAL RESPONSIBILITY
IN ACCORDANCE WITH THE REQUIREMENTS OF THE OIL POLLUTION ACT OF 1990
(TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES)

1. Designated Applicant: _______________________________ COMPANY LEGAL NAME _______________ BOEM COMPANY NUMBER

2. Surety Company Bond Number: _______________________________

3. The Designated Applicant and Responsible Parties, identified in form(s) BOEM-1017 on file or attached, and ________________, a company created under the laws of _________________ and authorized to do business in the United States, as Surety (hereinafter called Surety), are held and firmly bound unto the United States of America and other claimants for damages and removal cost liability under the Oil Pollution Act of 1990, 33 U.S.C. § 2701 et seq. (hereinafter called Act), in the sum of $ _________________, for which payment, we bind ourselves and our heirs, executors, administrators, successors, and assigns, jointly and severally, under the terms and conditions of Part 553 of Title 30 of the Code of Federal Regulations. This bond is hereby provided on behalf of the Responsible Parties to comply with the requirements of 33 U.S.C. § 2716(c) and is offered to satisfy any claim made under OPA.

4. The liability of the Surety will not be discharged by any payment or succession of payments hereunder, unless and until such payment or payments will amount in the aggregate to the penalty of the bond. In no event will the Surety's obligation hereunder exceed the amount of the penalty, provided the Surety furnishes timely written notice to the Bureau of Ocean Energy Management (BOEM) oil spill financial responsibility (OSRP) program of all claims filed, judgments rendered, and payments made by the Surety under this bond.

5. This bond is effective the __________ day of ______________, 12:01 a.m., Eastern Standard Time as stated herein and will continue in force until terminated as hereinafter provided. The Surety may at any time terminate this bond by written notice of intent to cancel sent by certified mail to the Designated Applicant with copies (plainly indicating the original notice was sent by certified mail) to all Responsible Parties and to the BOEM oil spill financial responsibility program by certified mail. This surety bond will remain in force and the undersigned will remain liable until termination on the earlier of: (1) thirty calendar days after BOEM and the Designated Applicant receive a notification of an intent to cancel this Surety Bond; (2) BOEM receives other acceptable OSFR evidence from the Designated Applicant; or (3) all the COFs to which this Surety Bond applies have been permanently abandoned either in compliance with 30 CFR part 250 or equivalent state requirements. The Surety will not be liable in connection with an incident occurring after the termination of this bond as herein provided, but termination will not affect the liability of the Surety in connection with an incident occurring before the termination becomes effective.

6. The undersigned agree that any suit or claim for which the Responsible Parties identified in form(s) BOEM-1017, on file or attached, represented by the aforementioned Designated Applicant may be liable under Title I of the Act may be brought directly against the Surety for claims up to the amount of the penalty asserted by the U.S. government or by other claimants when a Responsible Party denies or fails to pay a claim on the basis of insolvency or a Responsible Party has petitioned for bankruptcy under Title 11 of the U.S. Code.

7. The undersigned further agrees not to use any defense except those that would be available to a Responsible Party for whom the Surety was provided or that the incident leading to the claim for removal costs or damages was caused by willful misconduct of a Responsible Party covered by this Surety Bond.
8. The undersigned further agrees that the Responsible Party, pursuant to the requirements of 30 CFR 553.15, will notify the BOEM oil spill financial responsibility program in the event the Responsible Party is no longer able to maintain evidence of oil spill financial responsibility to the extent stated in section 3 above.

9. The Designated Applicant must, no later than the first calendar day of the fifth month after the close of your Financial Guarantor’s fiscal year or termination if earlier, submit either a renewal of this Surety Bond or other acceptable evidence of financial responsibility.

10. In witness whereof, the Designated Applicant and the Surety have executed this instrument on the __________ day of __________, __________.

MONTH  YEAR

Designated Applicant:

SIGNATURE OF AUTHORIZED REPRESENTATIVE

NAME OF AUTHORIZED REPRESENTATIVE

TITLE OF AUTHORIZED REPRESENTATIVE

Surety:

COMPANY NAME

ADDRESS

CITY  STATE  ZIP CODE

SIGNATURE OF AUTHORIZED REPRESENTATIVE

NAME OF AUTHORIZED REPRESENTATIVE

TITLE OF AUTHORIZED REPRESENTATIVE
COVERED OFFSHORE FACILITIES

CERTIFICATION OF OIL SPILL FINANCIAL RESPONSIBILITY
IN ACCORDANCE WITH THE REQUIREMENTS OF THE OIL POLLUTION ACT OF 1990
(TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES)

1. Designated Applicant:

2. The following list comprises all of the locations of covered offshore facilities to be covered by my certification of oil spill financial responsibility.

3. Locations of covered offshore facilities:

<table>
<thead>
<tr>
<th>STATE OR GCS REGION</th>
<th>LEASE NUMBER</th>
<th>ALIQUOT PORTION (IF Applicable)</th>
<th>AREA NAME</th>
<th>BLOCK NUMBER</th>
<th>PERMIT NUMBER</th>
<th>RUE or ROW NUMBER</th>
<th>PIPELINE SEGMENT NUMBER</th>
<th>POTENTIAL WORST CASE OIL- SPILL DISCHARGE (in Barrels)</th>
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3. Locations of covered offshore facilities (continued):

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<tr>
<th>STATE OR OCS REGION</th>
<th>LEASE NUMBER</th>
<th>ALIQUOT PORTION (If Applicable)</th>
<th>AREA NAME</th>
<th>BLOCK NUMBER</th>
<th>PERMIT NUMBER</th>
<th>RUE or ROW NUMBER</th>
<th>PIPELINE SEGMENT NUMBER</th>
<th>POTENTIAL WORST CASE OIL-SPILL DISCHARGE (in Barrels)</th>
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If additional space is required, additional copies of this page may be attached as continuation pages.

FORM BOEM-1021 (Month/Year)  PAGE 2 OF 2
Previous Editions are Obsolete.
**COVERED OFFSHORE FACILITY CHANGES**

**CERTIFICATION OF OIL SPILL FINANCIAL RESPONSIBILITY**

**IN ACCORDANCE WITH THE REQUIREMENTS OF THE OIL POLLUTION ACT OF 1990**

*(TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES)*

1. Designated Applicant: 

   **COMPANY LEGAL NAME**

   **BOEM COMPANY NUMBER**

2. The following list comprises all of 

   **NUMBER** changes to locations of covered offshore facilities

   or potential worst case oil spill discharges listed in the previously submitted certification of oil spill financial responsibility of 

   **DATE**.

   

   **NAME OF AUTHORIZED REPRESENTATIVE**

   **SIGNATURE OF AUTHORIZED REPRESENTATIVE**

   **TITLE**

   **DATE**

3. Changes to locations of covered offshore facilities or potential worst case oil-spill discharges:

   

   **STATE**

   **LEASE NUMBER**

   **ALIQUOT PORTION (IF Applicable)**

   **AREA NAME**

   **BLOCK NUMBER**

   **PERMIT NUMBER**

   **RUE OR ROW NUMBER**

   **PIPELINE SEGMENT NUMBER**

   **POTENTIAL WORST CASE OIL-SPILL DISCHARGE (In Barrels)**

   **TYPE OF CHANGE**

   *(A/D/N)*

---

*A = Addition, D = Deletion, and N = New Potential Worst Case Oil Spill*

If additional space is required, additional copies of this page may be attached as continuation pages.
FINANCIAL GUARANTEE

CERTIFICATION OF OIL SPILL FINANCIAL RESPONSIBILITY
IN ACCORDANCE WITH THE REQUIREMENTS OF THE OIL POLLUTION ACT OF 1990
(TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES)

1. Designated Applicant: ____________________________________________________________

   COMPANY LEGAL NAME ___________________________ BOEM COMPANY NUMBER ___________

2. The Responsible Parties, identified in form(s) BOEM-1017 on file or attached, and ____________________________:

   a. ____________________________, created under the laws of ____________________________,

   TYPE OF ENTITY ____________________________ STATE ____________________________

   and authorized to do business in the United States, as Guarantor, (hereinafter called Guarantor), agree to be jointly
   and severally liable to the United States of America and other claimants for damages and removal costs under the
   Oil Pollution Act of 1990, as amended, 33 U.S.C. § 2701 et seq. (hereinafter called OPA), in the sum indicated in
   section 4, for which payment our heirs, executors, administrators, successors, and assigns will also be liable, under
   the terms and conditions of Title 30 part 553 of the Code of Federal Regulations (CFR).

   This Guarantee is hereby provided on behalf of the Responsible Parties to comply with the requirements of 33
   U.S.C. 2716(c) and is offered to satisfy any claim made under OPA.

3. For the purpose of this application, the undersigned is acting in the capacity of a Financial Guarantor in
   accordance with the requirements of 30 CFR 553.32.

4. The amount of coverage for which evidence of oil spill financial responsibility (OSFR) is being established
   is: ____________________________

   $ ____________________________

5. This coverage is effective: _______________ and expires on the first calendar day of the fifth month after the
   close of the Financial Guarantor’s fiscal year, which ends: ____________________________

6. The Financial Guarantor may at any time give notice of intent to cancel this Guarantee by written notice
   sent by certified mail to the Designated Applicant with copies (plainly indicating the original notice was sent
   by certified mail) to all Responsible Parties and to the BOEM oil spill financial responsibility program by
   certified mail. This instrument will remain in force and the undersigned will remain liable until the expiration
   date above or until the earlier of: (1) thirty calendar days after Bureau of Ocean Energy Management
   (BOEM) and the Designated Applicant receive from the instrument issuer a notification of intent to cancel;
   (2) BOEM receives other acceptable OSFR evidence from your Designated Applicant; or (3) all the COFs
to which the instrument applies are permanently abandoned in compliance with 30 CFR Part 250 or
   equivalent state requirements. The undersigned agrees that termination of this instrument will
   not affect the liability of the Financial Guarantor for claims arising from an incident (i.e., oil discharge or
   substantial threat of the discharge of oil) that occurs on or before the effective date of termination of this
   Guarantee.

FORM BOEM-1023 (Month/Year)
Previous Editions are Obsolete.

PAGE 1 OF 4
The undersigned agrees that any suit or claim for which any Responsible Parties identified in form(s) BOEM-1017, on file or attached, represented by the aforementioned Designated Applicant may be liable under Title I of the Act may be brought directly against the Financial Guarantor for claims up to the amount of the penalty asserted by the U.S. government or other claimants when a Responsible Party denies or fails to pay a claim on the basis of insolvency or a Responsible Party has petitioned for bankruptcy under Title 11 of the U.S. Code.

The undersigned further agrees not to use any defenses except those that would be available to a Responsible Party for whom the Guarantee was provided or that the incident (i.e., oil discharge or a substantial threat of the discharge of oil) leading to the claim for removal costs or damages was caused by willful misconduct of a Responsible Party for whom the Designated Applicant demonstrated OSFR.

7. Financial Guarantor providing evidence of oil spill financial responsibility in the form of a Guarantee.

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<tr>
<th>COMPANY LEGAL NAME</th>
<th>BOEM COMPANY NUMBER</th>
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<td>CITY</td>
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<td>ZIP CODE</td>
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<tr>
<td>CONTACT PERSON FOR CLAIMS</td>
<td>CONTACT PERSON'S TITLE</td>
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<tr>
<td>AREA CODE AND TELEPHONE NUMBER</td>
<td>AREA CODE AND FAX NUMBER</td>
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<tr>
<td>E-MAIL ADDRESS</td>
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</table>

8. The undersigned, as an Authorized Representative of the above-named Financial Guarantor, certifies on behalf of the Financial Guarantor that the requirements set forth in 30 CFR Part 553, and specifically §§ 553.20, 553.23-28, 553.30 and 553.40 have been met, and further agrees that, the Financial Guarantor, pursuant to the requirements of 30 CFR 553.15, will notify the BOEM oil spill financial responsibility program in the event that the Financial Guarantor is no longer able to maintain evidence of oil spill financial responsibility to the extent stated in section 4 above.

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<th>NAME</th>
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<td>DATE</td>
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9. The Financial Guarantor’s U.S. Agent for Service of Process is:

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<th>NAME</th>
<th>BOEM COMPANY NUMBER</th>
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<td>E-MAIL ADDRESS</td>
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</table>
10. The liability of the Financial Guarantor will not be discharged by any payment or succession of payments made, unless and until such payment or payments will amount in the aggregate to the amount of the Guarantee. In no event will the Financial Guarantor’s obligation exceed the amount of the Guarantee, provided the Financial Guarantor furnishes timely written notice to the BOEM oil spill financial responsibility program of all claims filed, judgments rendered, and payments made by the Financial Guarantor under this Guarantee.

11. The Designated Applicant must, no later than the first calendar day of the fifth month after the close of your Financial Guarantor’s fiscal year or expiration if earlier, submit either a renewal of this Financial Guarantee or other acceptable evidence of financial responsibility.

12. In witness whereof, the Designated Applicant for the Responsible Parties and the Financial Guarantor have executed this instrument on the __________ day of __________________.

Designated Applicant for the Responsible Parties named herein:

______________________________________________________________
SIGNATURE OF AUTHORIZED REPRESENTATIVE

______________________________________________________________
NAME OF AUTHORIZED REPRESENTATIVE

______________________________________________________________
TITLE OF AUTHORIZED REPRESENTATIVE

Financial Guarantor:

______________________________________________________________
SIGNATURE

______________________________________________________________
NAME

______________________________________________________________
TITLE
<table>
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<th>BOEM ID NUMBER</th>
<th>RESPONSIBLE PARTIES COVERED BY THIS AGREEMENT</th>
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INDEPENDENT DESIGNATED APPLICANT INFORMATION CERTIFICATION

CERTIFICATION OF OIL SPILL FINANCIAL RESPONSIBILITY
IN ACCORDANCE WITH THE REQUIREMENTS OF THE OIL POLLUTION ACT OF 1990
(TYPE OR PRINT ALL INFORMATION EXCEPT SIGNATURES)

This form is intended for use by Designated Applicants that are not also Responsible Parties, as defined in BOEM Regulations at 30 CFR part 553.

1. Designated Applicant: ________________________________________________________________________________
   COMPANY LEGAL NAME

   ________________________________
   BOEM COMPANY NUMBER

   ________________________________________________________________________________
   ADDRESS

   ________________________________
   BOEM COMPANY REGION

   ________________________________________________________________________________
   CITY

   ________________________________
   STATE

   ________________________________
   ZIP CODE

   ________________________________________________________________________________
   CONTACT PERSON

   ________________________________
   AREA CODE AND TELEPHONE NUMBER

   ________________________________
   AREA CODE AND FAX NUMBER

   ________________________________________________________________________________
   CONTACT PERSON'S TITLE

   ________________________________________________________________________________
   E-MAIL ADDRESS

2. Summary of Evidence of Oil Spill Financial Responsibility:

   As an Authorized Representative of the Designated Applicant, I explicitly agree that the Designated Applicant will be jointly and severally liable for claims, under the Oil Pollution Act of 1990, as amended, 33 U.S.C. § 2701 et seq., with the Responsible Parties for the covered offshore facilities covered by this certification.

   __________________________________________________________
   NAME OF AUTHORIZED REPRESENTATIVE OF DESIGNATED APPLICANT

   __________________________________________________________
   SIGNATURE

   __________________________________________________________
   TITLE OF AUTHORIZED REPRESENTATIVE OF DESIGNATED APPLICANT

   __________________________________________________________
   DATE
DEPARTMENT OF THE INTERIOR
Bureau of Ocean Energy Management
[MMAA1040000]

Environmental Documents Prepared for Oil, Gas, and Mineral Operations by the Gulf of Mexico Outer Continental Shelf (OCS) Region

AGENCY: Bureau of Ocean Energy Management (BOEM), Interior.

ACTION: Notice of the Availability of Environmental Documents Prepared for OCS Mineral Proposals by the Gulf of Mexico OCS Region.

SUMMARY: BOEM, in accordance with Federal Regulations that implement the National Environmental Policy Act (NEPA), announces the availability of NEPA-related Site-Specific Environmental Assessments (SEAs) and Findings of No Significant Impact (FONSI). These documents were prepared during the period April 1, 2013, through June 30, 2013, for oil, gas, and mineral-related activities that were proposed in the Gulf of Mexico, and are more specifically described in the Supplementary Information Section of this notice.

FOR FURTHER INFORMATION CONTACT: Bureau of Ocean Energy Management, Gulf of Mexico OCS Region, Attention: Public Information Office (GM 250E), 1201 Elmwood Park Boulevard, Room 250, New Orleans, Louisiana 70123-2394, or by calling 1–800–200–GULF.

SUPPLEMENTARY INFORMATION: BOEM prepares SEAs and FONSI for certain proposals that relate to exploration, development, production, and transport of oil, gas, and mineral resources on the Federal OCS. These SEAs examine the potential environmental effects of proposed activities and present BOEM conclusions regarding the significance of those effects. The SEAs are used as a basis for determining whether or not approval of the proposals constitutes a major Federal action that significantly affects the quality of the human environment in accordance with NEPA Section 102(2)(C). A FONSI is prepared in those instances where BOEM finds that approval will not result in significant effects on the quality of the human environment. The FONSI briefly presents the basis for that finding and includes a summary or copy of the SEA.

This notice constitutes the public notice of availability of environmental documents as required under the NEPA Regulations.

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<tr>
<th>Activity/operator</th>
<th>Location</th>
<th>Date</th>
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<td>Shell Offshore Inc., Exploration Plan, SEA R–5856 ………………….</td>
<td>Central Planning Area of the Gulf of Mexico, located 82 miles south of the nearest Louisiana shoreline.</td>
<td>05–Apr–13.</td>
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<td>Chevron U.S.A. Inc., Exploration Plan, SEA R–5845 ………………….</td>
<td>Central Planning Area of the Gulf of Mexico, located 221 miles south of the nearest Louisiana shoreline.</td>
<td>08–Apr–13.</td>
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<td>Fairfield Nodal, Geological &amp; Geophysical Survey, SEA L12–003</td>
<td>Main Pass &amp; Mississippi Canyon in the Central Planning Area of the Gulf of Mexico.</td>
<td>11–Apr–13.</td>
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