

STAMP AND RETURN

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING (1) LOCKBOX #358315		FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE PAGE NO. <u>1</u> OF <u>FCC/MELLON</u> AUG 31		APPROVED BY OMB 3060-058 STATE USE FCC USE ONLY	
SECTION A - Payer Information					
(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) Wilkinson Barker Knauer, LLP				(3) TOTAL AMOUNT PAID (dollars and cents) \$940.00	
(4) STREET ADDRESS LINE NO. 1 2300 N Street, N.W., Suite 700					
(5) STREET ADDRESS LINE NO. 2					
(6) CITY Washington				(7) STATE DC	(8) ZIP CODE 20037-1128
(9) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 202-783-4141				(10) COUNTRY CODE (IF NOT IN U.S.A.)	
If payer name and the applicant name are different, complete Section B. If more than one applicant, use continuation sheets (Form 159-C)					
SECTION B - Applicant Information					
(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card) Schlumberger Resource Management Service					
(12) STREET ADDRESS LINE NO. 1 1600 Alabama Highway 229					
(13) STREET ADDRESS LINE NO. 2					
(14) CITY Tallahassee				(15) STATE AL	(16) ZIP CODE 36078
(17) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 334-283-6555				(18) COUNTRY CODE (IF NOT IN U.S.A.)	
SECTION C - Payment Information					
(19A) FCC Call Sign/Other ID	(20A) Payment Type Code (PTC) EGC	(21A) Quantity 1	(22A) Fee Due for (PTC) in Block 20A \$940.00	FCC Use Only	
(23A) FCC CODE 1 F9C26112495		(24A) FCC CODE 2 13EA98587			
(19B) FCC Call Sign/Other ID	(20B) Payment Type Code (PTC)	(21B) Quantity	(22B) Fee Due for (PTC) in Block 20B	FCC Use Only	
(23B) FCC CODE 1		(24B) FCC CODE 2			
(19C) FCC Call Sign/Other ID	(20C) Payment Type Code (PTC)	(21C) Quantity	(22C) Fee Due for (PTC) in Block 20C	FCC Use Only	
(23C) FCC CODE 1		(24C) FCC CODE 2			
(19D) FCC Call Sign/Other ID	(20D) Payment Type Code (PTC)	(21D) Quantity	(22D) Fee Due for (PTC) in Block 20D	FCC Use Only	
(23D) FCC CODE 1		(24D) FCC CODE 2			
SECTION D - Taxpayer Information (Required)					
(25) PAYER TIN 0521264167		(26) Complete this block only if applicant name in B-11 is different from payer name in A-2 APPLICANT TIN 0 510204865			
SECTION E - Certification					
(27) CERTIFICATION STATEMENT I, Jeffrey S. Cohen, certify under penalty of perjury that the foregoing and supporting information (PRINT NAME) are true and correct to the best of my knowledge, information, and belief. SIGNATURE <u>Jeffrey S. Cohen</u>					
SECTION F - Credit Card Payment Information					

Wilkinson Barker Knauer, LLP
2300 N Street N.W., Suite 700
Washington, D.C. 20037-1128

16-3
540 00012

58726

Date 08/29/00

\$940.00

PAY Nine Hundred Forty and 00/100 Dollars

TO THE
ORDER
OF

FEDERAL COMMUNICATIONS COMMISSION

RIGGS BANK, N.A.
LINCOLN OFFICE
WASHINGTON, D.C. 20006

AUTHORIZED SIGNATURE

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