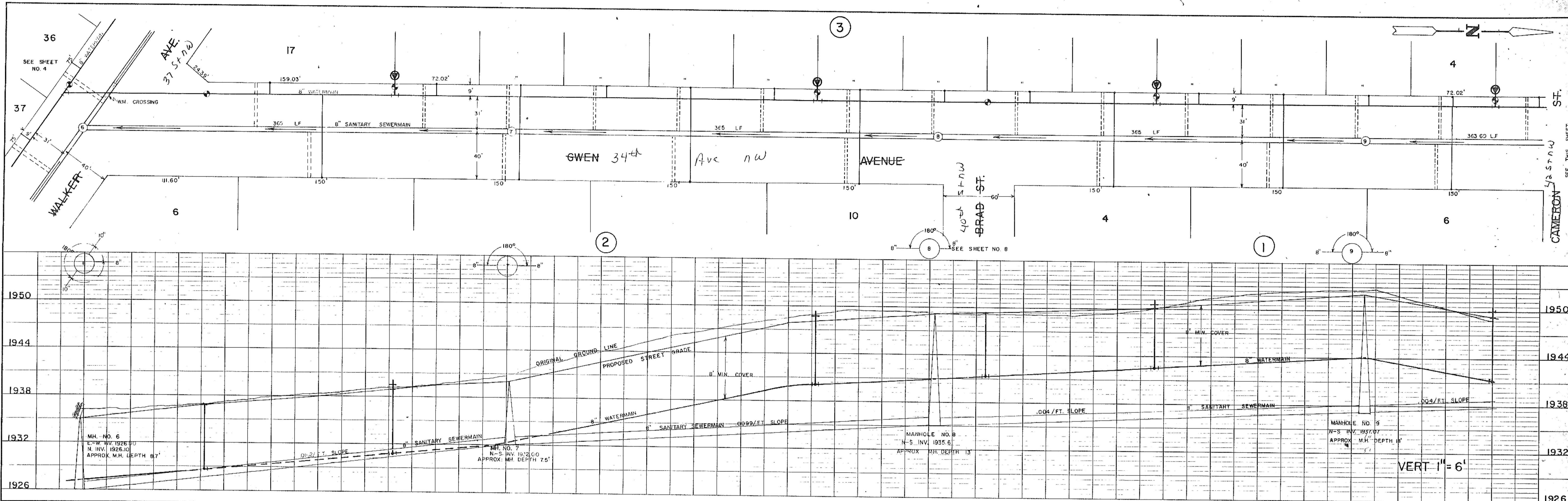


DATE: _____ BY: _____
 SURVEYED: _____ PLOTTED: _____
 NOTE BOOK: _____ NO. _____
 CHECKED: _____



DATE: _____ BY: _____
 SURVEYED: _____ PLOTTED: _____
 NOTE BOOK: _____ NO. _____
 CHECKED: _____

