

4 October 2016

Mr. Mike Turco
General Manager
Fort Bend Subsidence District
301 Jackson Street, Suite 639
Richmond, TX 77469

RE: Form 1295 for Professional Services Agreement Contract No.: FBSD-2016.001

Dear Mr. Turco:

Please find enclosed, per your instructions, the original notarized Certificate of Interested Parties for processing / acknowledging by the Fort Bend Subsidence District per state law.

If you have any questions concerning the further processing of this Form 1295, please contact me by email: psalter@intera.com or by phone: 512.425.2093.

Sincerely,

INTERA Incorporated



Patricia Salter
Contracts Manager

Enclosures (1)



CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

INTERA Incorporated Austin, TX United States

Certificate Number: 2016-120308

Date Filed: 10/05/2016

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Fort Bend Subsidence District

Date Acknowledged:

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

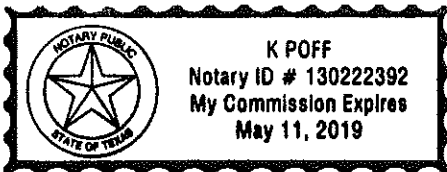
FBSD-2016.001 Investigation of Brackish Groundwater Resources & Subsidence Risk Analysis within District

Table with 4 columns: Name of Interested Party, City, State, Country (place of business), and Nature of interest (Controlling/Intermediary). Rows include Malone, Robert; Markland, Eric; Deeds, Neil; Lantz, Ronald; Aly, Alaa; Ardito, Cynthia; Kelley, Van; Lavenue, A. Marsh.

5 Check only if there is NO Interested Party. []

6 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said CONTRACTS MANAGER, this the 5th day of October, 2016, to certify which, witness my hand and seal of office.

Signature of officer administering oath: [Signature] Printed name of officer administering oath: K Poff Title of officer administering oath: Notary Public