

REPUBLIC OF MARSHALL ISLANDS

MOBILE OFFSHORE DRILLING UNIT
SAFETY CERTIFICATE

THE UNDERSIGNED CERTIFIES THAT THE SHIP
HAS BEEN DULY SURVEYED IN ACCORDANCE WITH THE
IMCO CODE FOR THE CONSTRUCTION AND EQUIPMENT
OF MOBILE OFFSHORE DRILLINGS UNITS (MODU)

Distinctive Identification (Name or number)	Type (Section 1.3 of the Code)	Port of Registry
OCEAN CLIPPER 1748 V7DZ8	Surface Type Drilling Unit	Majuro

Date on which keel was laid or unit was at a similar stage of construction or on which major conversion was commenced

01 January 1975

THIS IS TO CERTIFY:

- That the above-mentioned unit has been duly surveyed in accordance with the applicable provisions of the Code for the Construction and Equipment of Mobile Offshore Drilling Units.
- That the survey showed that the structure, equipment, fittings, radio station arrangements and materials of the unit and the conditions thereof are in all respects satisfactory and that the unit complies with the relevant provisions of the Code.
- That the life-saving appliances provide for a total number of 143 persons and no more as follows:
Six(06) rigid totally enclosed motor propelled and fire protected survival craft of aggregate capacity for 286 persons
Seven(07) survival craft, capable of floating and breaking free in the event of the unit becoming submerged of aggregate capacity for 150 persons.
One(01) rescue boat(s) each of capacity for Six(06) persons.

This Certificate is valid until the 11 July 2012 subject to annual surveys being carried out satisfactorily and this Certificate being endorsed accordingly on the reverse.

Completion date of the survey on which this certificate is based: 11 November 2002

Issued at Rio de Janeiro, Brazil on 22 March 2008

The undersigned declares that he is duly authorized by the Government of the Republic of Marshall Islands to issue this certificate.



Luiz O. Malcher
Malcher, Luiz O., Rio de Janeiro Port
 American Bureau of Shipping

SURVEYS

This is to certify that, at a survey required by section 1.6 of the Code, this unit was found to comply with the relevant provisions of the Code.

Annual Intermediate Survey

Place _____ Date _____
Surveyor, American Bureau of Shipping

Place _____ Date _____
Surveyor, American Bureau of Shipping

Place _____ Date _____
Surveyor, American Bureau of Shipping

Place _____ Date _____
Surveyor, American Bureau of Shipping

Place _____ Date _____
Surveyor, American Bureau of Shipping

Periodical MODU Renewal Survey Completed

Place _____ Date _____
Surveyor, American Bureau of Shipping

RENEWAL STATEMENT

The provisions of the Code being fully complied with by this unit, the validity of this certificate is extended until

_____ pending onboard receipt of full term certificate.

Place _____ Date _____

(Signature) Surveyor to the American Bureau of Shipping