

extrapolated from the CONRAD models, and such a statement implies a rather extreme lack of knowledge of the contents of the CONRAD report. The technique of quote-out-of-context is used on page two of the MC report to attempt to invalidate the supportive evidence of the CONRAD's third model. What the CONRAD report actually stated was that the quantitative estimates obtained from the model of the individual firm could not be used as estimates of industry reaction, since the various types of firms in the industry were not represented in the model. The CONRAD report stated that the third model would substantiate the first model, the indicated reserve changes were of the same order of magnitude, and were changes in the same direction. The results obtained from the third model did substantiate the results of the first (or neoclassical) model.

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Surprisingly enough, after indicating that only the first CONRAD model was worthy of comment, much of the MC report is devoted to specific criticisms of minor points concerning the other models discussed in the CONRAD report.

On the question of uncertainty, the MC report is somewhat erroneous in stating that the CONRAD report assumes perfect knowledge. The report does not assume this, nor such an assumption implicit in the methodology.

Another out-of-context quote is provided on page 15, where Eisner's objections to Jorgensen's model are noted. The remainder of Eisner's article goes on to propose modifications in Jorgensen's model similar to those used by CONRAD (the CONRAD model is credited to the Eisner article quoted in the MC report).

The MC report appears completely confused on page 21, where the CONRAD report is taken to task for using a 12:1 reserve ratio in the model. The 12:1 reserve ratio is not, of course, used anywhere in the model. It is mentioned as historical background, but the data used in the model were actual reported reserves and production.

The MC report seems confused again on page 31 when it indicates that "this approach leads CONRAD to compare the price of a full barrel of reserves with the cost of only a fraction of a barrel." This is not true, but the MC report offers no explanation of its statement, no comment can be made.

There are two important points to be made concerning the "apparently incorrect information," cited in the MC report (Section IV). The first of these is that careful reading of the report would make it quite clear that all the items cited were presented as background information in the study and do not form the basis for any results derived therefrom.

The second of these is that, with one exception, the statements in the CONRAD report were true when the data was being collected and the report was being written. The use of 1968 data, which were obviously available when the report was written, in the study involved over a year of continuous effort to illustrate the "incorrectness" of statements in the CONRAD report cannot be interpreted in any other way than as an obvious attempt to discredit the CONRAD report, since anyone with any knowledge of petroleum industry would be aware of basic sources of the CONRAD statements.

Most of the discussions in Section V, entitled "Petroleum Economics," is repetitive of the same sort of out-of-context quoting of the rest of the MC report. The only relevant information presented here is that in reference to Professor McDonald's work on non-neutrality of a flat-rate corporate income tax. It is interesting to note that from the MC report of Professor McDonald's conclusion that a percentage depletion rate of 14% would provide the desired neutrality.

Professor McDonald's work, however, does examine the efficiency of percentage de-

pletion as a method for compensating the non-neutrality of the flat-rate corporate income tax. It is certainly possible, and a subject worthy of further study, that some more direct method of compensating investors for the risk elements in petroleum investments would provide the desired neutrality at a much lower cost to the economy.

IV. CONCLUSION

CONRAD would welcome some meaningful critiques of its work, with the ultimate objective of imposing the reliability of the conclusions. Unfortunately, the Mid-Continent report is totally useless for this purpose.

HARMON KILLEBREW, MOST VALUABLE PLAYER

Mr. JORDAN of Idaho, Mr. President, yesterday a native Idahoan, Harmon Killebrew, was named the recipient of baseball's most prestigious award—that of most valuable player. Selected by the baseball writers of America, the American League's MVP winners include the game's greatest stars—Ted Williams, Joe DiMaggio, Jimmie Foxx, Joe Gordon, Lefty Grove—just to mention a few. The addition of Harmon Killebrew to this distinguished roster is a fitting capstone to the truly outstanding season which Harmon enjoyed this year.

The records which Harmon has set, and will continue to set in the years to come are sufficient testimony to his skills as a major leaguer. What the record books do not indicate, however, is that Harmon is every bit the major leaguer off the field as well as on. The respect that Harmon enjoys by those who know him personally cannot be generated by athletic prowess alone and will continue long after his playing days are over. My congratulations to a man who is a credit to his home State in every sense of the word.

VIETNAM DEMONSTRATIONS IN WASHINGTON

Mr. BAKER, Mr. President, on the eve of the Vietnam demonstrations in Washington I am concerned. I am concerned for two reasons:

First, there is the real danger of violence. Most who come to Washington, I am sure, come in a conscientious effort to express their desire for peace and their hope that the war will be ended soon. Some, however, probably are not so motivated. I am especially disturbed by the fact that a number of those in leadership positions in the so-called mobilization were directly involved in the violence attendant to the Chicago Democratic National Convention in 1968, and disturbances and disorders around the country since.

I think the Federal authorities have acted wisely and have shown restraint in their preparations for the marches, but the possibility of police harassment, property damage, and personal injury is real.

Second, I do not believe the demonstrations will contribute to the cause of an early peace in Vietnam; on the contrary, I am afraid they will heighten the appearance of division in our country and prolong our efforts to negotiate and

to withdraw American troops from Vietnam.

I think the moratorium-mobilization festivities scheduled for November 13-15 are a mistake.

THE NEED TO ELIMINATE THE HAZARDS OF LEAD POISONING IN CHILDREN

Mr. KENNEDY, Mr. President, yesterday, I met with Congressman WILLIAM RYAN of New York, other Members of the House, and members of the Scientists' Institute for Public Information to discuss the urgency for the elimination of the hazards of lead poisoning in children.

Because this is a relatively little known malady mainly affecting the poorest citizens of the total population. It requires our attention to help bring an end to its devastation. Its victims number in the hundreds of thousands—mostly in the slums and ghettos of our large cities. Children get lead poisoning by swallowing bits of peeling paint and plaster from old deteriorating buildings whose walls have been covered by lead-based paints. For the most part buildings constructed within the past 20 years are not the source of this hazard. Usually it is in older buildings, those put up before World War II, that create the high risk areas for this tragic disease. Lead intoxication in children is insidious because high levels of lead in a child's body may not be detected or diagnosed until it is too late. Early symptoms of the disease are similar to those of the flu.

In more severe cases, patients suffer convulsions, lapse into comas and die. New York City's department of health reported between 20,000 and 30,000 cases of lead poisoning; while at the same time, less than 2,500 cases of poliomyelitis were reported for the year 1955, the year of the worst polio epidemic since 1940. These figures show that cases of lead poisoning are 10 times greater than those of that awesome affliction called polio. All of us will recall the publicity and the attention generated to fight the dread affects of polio; and we all remember the money and research invested to find a cure for that disease. But the public and medical awareness of lead poisoning in children are not yet nearly as visible as they were in the case of polio.

The list of hazards that confront our Nation's children is endless. For the child who lives in poverty, the hazards to health and a wholesome life are enormously more lethal than those fortunate enough to live in affluence. Children who live in our urban slums live with the danger of lead poisoning that needlessly weakens, maims, and destroys their lives. Lead poisoning strikes easily at the young child because he has a natural tendency to put in his mouth any available object. When that object is bits and pieces of peeling paint or fallen plaster in old buildings with lead-based painted walls, these youngsters are afflicted with the ravaging effects of lead intoxication. Children between 1 and 3 years of age are the sufferers in 85 percent of all reported cases. Two-year-olds account for more

than 50 percent of the deaths attributable to lead poisoning. About 200 children die from lead every year. Between 12,000 and 16,000 are treated and survive. This means that every year, due to inadequate detection and diagnosis, as many as 400,000 children may be poisoned.

Half of those who receive treatment are left mentally retarded. Only about one case in 25 of these is treated. Children with lead poisoning have been found to experience a marked drop in IQ and they show unsatisfactory school progress because of intellectual defects.

This is the tragedy that is most disheartening and debilitating—not only for the children and their families, but also for the future of our society.

Certainly, we can all feel and understand the agony that the loss of a child's life may bring. But a different pain of anguish and heartache is produced for the parents of children who suffer in mental ability due to lead poisoning. The care taking costs for one child who must live out his life as a mental defective due to lead poisoning is more than \$200,000.

Yet, less than \$1,000 can eliminate the hazards of this disease for that child.

That is the core of hope in the fight against lead poisoning. Lead intoxication is a man-made disease. It is subject to complete control. Mental retardation due to lead poisoning can be prevented. Research is not needed to find ways to do that.

What we do need, and what we need now, is forceful action to rid our neighborhoods of this menace. Dr. Victor Sidel, who is chief of the division of social medicine at Montefiore Hospital in New York City, proposes a vigorous approach to programs for eliminating lead poisoning hazards. He insists on the full use of community residents, neighborhood workers and others who have interests in these affected areas to help search out lead poisoning victims and areas of high risk.

Representative WILLIAM F. RYAN saw the urgency for legislation as far back as last March when he introduced in the House a package of reforms "aimed at combating this silent epidemic." That package realistically meets the three fundamental needs that must be attacked in the fight to end this problem. They are:

First. The need to identify and treat lead-poisoning victims.

Second. The need to seek out the presence of lead-based paints and to require property owners and landlords to remove such paints from all wall surfaces.

Third. Finally, the need to prevent lead poisoning from spreading, through the enforcement of housing codes.

To help reach these goals, I intend to introduce a bill, early next week, that is similarly designed. My bill provides Federal moneys to help cities carry out programs to identify those youngsters who are affected by lead-based paint poisoning. It will insure for cities and communities the procedures and techniques that will seek out those youngsters who are currently afflicted with high lead levels. The value of that kind of program has been dramatically demonstrated by Chicago's health department's program to seek out youngsters who live in dilapi-

dated housing and test them for lead levels. Because of that program, the number of reported cases of lead intoxication has climbed sharply.

In his package, Representative RYAN also provided for financial assistance to help cities and communities develop and carry out intensive local programs to eliminate the causes of lead-based paint poisoning. Recognizing that this is a critical need, my bill also provides for financial assistance to run programs that will rid our cities of the menace of lead poisoning. Every community that has old homes that used lead-based paints is a potential high-risk area for this dread disease. That is a simple, plain fact. It is a fact that makes us realize that the way to prevent lead poisoning is to eliminate the source of the danger.

My bill will provide for the elimination of all lead-based painted surfaces, through programs that will identify those homes that are so painted. After identifying those structures, the provisions of my bill require prompt removal of lead-based paints from all surfaces.

Finally, in recognition of the need to insure that the rehabilitation or renovation of housing shall include plans for eliminating the causes of lead-based paint poisoning—my bill provides for Federal assistance to communities to carry out such rehabilitation only on the condition that the community also carry out an effective plan for getting rid of the causes of lead-based paint poisoning.

The reported incidence of lead poisoning parallels public and medical interest and education on the subject. Official figures on lead poisoning almost certainly underestimate the true incidence of the disease.

I shall personally join the battle against childhood lead intoxication by stressing the need for education and awareness of the problem—both in the general public and in the medical community. The tragedies of lead poisoning and the hesitancy to diagnose it are too often due to the failure to be alert to its presence.

People simply do not look for it because lead based paints are not generally used on interior walls today. But we overlook the very real fact that hundreds of thousands of people, particularly along the eastern seaboard, live in substandard, deteriorating housing built before World War II that have wall surfaces coated with lead based paints.

I feel that one way to stimulate the necessary amount of concern and awareness to combat this problem is through the periodic publication of information about lead poisoning cases.

Through the Public Health Service in the Department of Health, Education, and Welfare, accurate and current information is available on communicable diseases. I want to explore through the Office of the Surgeon General, ways to provide similar kinds of information for the environmental diseases that are also devastating in their assault on the health of American citizens. Not only would it be helpful to have systematic reports on lead poisoning in children, we could also use reports on the incidence of rat bites, insect borne, asthma, and ground

water contamination due to the use of fertilizers. Some work has been done in these areas, but much more remains to be done. I am hopeful that through such publication of information on lead poisoning and other environmental diseases we can focus attention on these kinds of needs. In that way, we may be able to end the menace that causes each one of these dangers.

Lead poisoning in children is not an uncommon occurrence in the United States. Although slum areas in large cities appear to have by far the greatest incidence, this problem is not necessarily restricted to the poor; it has also been reported in children from economically and socially advantaged homes.

But we do know that it affects black and Puerto Rican children more frequently than it strikes white children. It is most likely to strike children in the same family. And, once a child has been poisoned by lead he has a substantial chance of being poisoned again.

In New York City reports show that several children were admitted to hospitals two and three times, each time with recurrent lead intoxication. In one case, repeated episodes left the child completely incapacitated. Others working in the field of lead poisoning have also stated that "we saw the same children over and over again being brought in for deleading and each time with evidence of more residual brain damage. We were seeing mental retardates and institutional vegetables created right under our eyes." The cost of lead poisoning is borne by the whole community in terms of wasted human resources, institutionalization of victims, and the resulting burdens on municipal health facilities and finances. The benefits accrue only to those owners of slum property who find it unprofitable to keep their properties in good repair.

The need to eliminate this hazard from the list of the many hazards that affect our Nation's children is very clear. My efforts will be designed to meet that need.

DEPOSIT RATES AND MORTGAGE CREDIT

The PRESIDING OFFICER. Under the previous order, the Chair lays before the Senate the unfinished business, which the clerk will state.

The ASSISTANT LEGISLATIVE CLERK. Calendar No. 510, S. 2577, a bill to provide additional mortgage credit, and for other purposes.

The Senate resumed the consideration of the bill.

The PRESIDING OFFICER. The consideration of this bill is subject to a time limitation. Who yields time?

Mr. BYRD of West Virginia. Mr. President, I suggest the absence of a quorum, and I ask unanimous consent that the time not be charged against either side.

The PRESIDING OFFICER. Without objection, it is so ordered. The clerk will call the roll.

The assistant legislative clerk proceeded to call the roll.

Mr. BYRD of West Virginia. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.