

**CONTINUATION APPLICATION FORM**

Sections referred to are from the *Petroleum and Natural Gas Tenure Regulation* unless otherwise noted. Copies of this form, and the *Continuation Application Guide*, *Technical Guidelines* and *Continuations FAQ* are available on the Internet at <http://www.energy.gov.ab.ca> under Our Business → Tenure → Tenure Administration.

**Part 1 Administrative Information**

Applicant Company _____ Address _____ _____	<b>Department Use Only:</b> Date of Receipt: _____  Fax Received: _____
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**If faxing the application:**

No data to follow (It is not necessary to mail the signed original application form) **OR**

Data being sent by courier or mail (Please reference PNG Crown Agreement Number)

**Amendment to previous application** Previous Application Date: \_\_\_\_ \_\_\_\_ \_\_\_\_ (e.g. 2007-MAR-23) Parts of Form Amended: \_\_\_\_

**Advance Ruling requested** (must be received *at least* two months before expiry)

**Geological Discussion attached** (see *Technical Guidelines*)

**Return seismic lines**

**Rental payment is not required with this application**

**Part 2 PNG Crown Agreement Information**

Use separate columns for EACH agreement. Use additional pages if more than 4 agreements.

Agreement Number				
Applicant File No. (Optional)				
Expiry Date (YYYY-MMM-DD)				
Applicant is designated representative <b>OR</b> Authorization is attached	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Applying for entire agreement <b>OR</b> Applying for portion of agreement (indicate land M-RR-TTT:SS and any portions)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Part 3 Extensions**

Requesting an extension under *Section 16(8)* until: \_\_\_\_ \_\_\_\_ \_\_\_\_ (YYYY-MMM-DD)  Explanation attached  
*(must be under Section 16 continuation at expiry)*

Requesting an extension under *Section 18(6)* until: \_\_\_\_ \_\_\_\_ \_\_\_\_ (YYYY-MMM-DD)  Explanation attached  
*(must presently be under Section 18 notice)*

Requesting an extension under *Section 8(1)(h)* of the *Mines and Minerals Act* until: \_\_\_\_ \_\_\_\_ \_\_\_\_ (YYYY-MMM-DD)  Explanation attached

**Part 4 Signature and Contact Information**

Applicant Name (Printed)	Title	Signature	Date: (YYYY-MMM-DD)
Technical Contact(s):	Title of Technical Contact(s):	Phone:	Fax:
		Phone:	Fax:
		Phone:	Fax:

<p style="text-align: center;"><b>FORWARD COMPLETED APPLICATION TO:</b>  <b>Alberta Department of Energy</b></p> <p>Tenure 9945 - 108 Street                  Edmonton, AB T5K 2G6</p> <p style="text-align: center;">OR</p> <p style="text-align: center;">300, 801 - 6<sup>th</sup> Avenue SW                  Calgary, AB T2P 3W2</p>	<p>Website: <a href="http://www.energy.gov.ab.ca">http://www.energy.gov.ab.ca</a></p> <p>Phone: (780) 427-7425 Fax: (780) 422-1123</p> <p style="text-align: center;"><b>???</b> <b>QUESTIONS</b></p> <p style="text-align: center;">Please phone during business hours                  8:15 - 4:30, Monday to Friday                  Ask for "Continuations"</p>
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ALL DATA SUBMITTED WITH YOUR APPLICATION IS KEPT CONFIDENTIAL

**CONTINUATION APPLICATION FORM**

Reference first PNG Crown Agreement listed on Page 1, Part 2 \_\_\_\_\_

**Part 5 Units, Gas Storage Agreements and Offset Compensation**  
**For Continuation under Section 15 (1)(b), (c) and (d)**

	Zone(s)	Name, Number or Land Description
<input type="checkbox"/> Unit Agreement OR Production Allocation Unit Agreement – Section 15(1)(b)	_____	_____
<input type="checkbox"/> Obligation to pay offset compensation – Section 15(1)(c)	_____	_____
<input type="checkbox"/> Gas Storage Agreement – Section 15(1)(d)	_____	_____

**Failure to provide all relevant data may result in continuation being denied**

**Part 6 Qualifying Wells for Section 16**  
**Rig released less than 3 months before expiry OR drilling at expiry**

**Each well can only be used once as a qualifying well.** If more than two qualifying wells, use another copy of this page.

Applicant is the well licensee **OR**  Applicant is not the well licensee. Authorization form is attached

	Well 1	Well 2
Qualifying Well - Location or Unique ID	___ / ___ - ___ - ___ - ___ W ___ / ___	___ / ___ - ___ - ___ - ___ W ___ / ___
Spud Date (YYYY-MMM-DD)	_____	_____
Rig Release Date (YYYY-MMM-DD)	_____	_____
If picking up to 5 sections, provide land description of sections:	_____	_____
If continuing by mapping, provide mapping and identify the zone that is being mapped:	<input type="checkbox"/> Mapping attached Zone: _____	<input type="checkbox"/> Mapping attached Zone: _____

**Part 7 Technical Data for Section 15 and 17 Continuations**  
**Productive and Potentially Productive Wells and Pools**

**New data being submitted separately by another company:**

Applicant authorizes the Department to use incoming data from the following company or companies: \_\_\_\_\_ in support of this application.

Data submitted by another company must be accompanied by their authorization to use the data to support this application.

**Data previously submitted, within the past 12 months:**

Applicant authorizes the Department to refer to data previously submitted by our company on \_\_\_\_ \_\_\_\_ (YYYY-MMM-DD) in support of PNG Crown Agreement Number \_\_\_\_\_

Applicant requests Department refer to data previously submitted by another company: \_\_\_\_\_ on \_\_\_\_ \_\_\_\_ (YYYY-MMM-DD) in support of PNG Crown Agreement Number \_\_\_\_\_

Authorization from other company is attached.

**List ALL productive or potentially productive zones for which you are providing technical data.**

Use a separate column for each zone. If more than three zones to be identified in Part 7, please use another copy of this page.

Zones			
<b>Type of continuation requested</b>	<input type="checkbox"/> Section 15(1)(a) – well data <input type="checkbox"/> Section 15(1)(e) – mapping <input type="checkbox"/> Section 17 – mapping/testing	<input type="checkbox"/> Section 15(1)(a) – well data <input type="checkbox"/> Section 15(1)(e) – mapping <input type="checkbox"/> Section 17 – mapping/testing	<input type="checkbox"/> Section 15(1)(a) – well data <input type="checkbox"/> Section 15(1)(e) – mapping <input type="checkbox"/> Section 17 – mapping/testing
Data provided for zone (Completing this checklist is OPTIONAL, for Company use)	<input type="checkbox"/> Well logs <input type="checkbox"/> Recent production data <input type="checkbox"/> DST or flow test data <input type="checkbox"/> Geological discussion <input type="checkbox"/> Isopach mapping <input type="checkbox"/> Structural mapping <input type="checkbox"/> Cross Sections <input type="checkbox"/> Discussion of seismic data <input type="checkbox"/> Interpreted seismic mapping <input type="checkbox"/> Interpreted seismic sections <input type="checkbox"/> Shot point maps <input type="checkbox"/> Synthetics <input type="checkbox"/> Other:	<input type="checkbox"/> Well logs <input type="checkbox"/> Recent production data <input type="checkbox"/> DST or flow test data <input type="checkbox"/> Geological discussion <input type="checkbox"/> Isopach mapping <input type="checkbox"/> Structural mapping <input type="checkbox"/> Cross Sections <input type="checkbox"/> Discussion of seismic data <input type="checkbox"/> Interpreted seismic mapping <input type="checkbox"/> Interpreted seismic sections <input type="checkbox"/> Shot point maps <input type="checkbox"/> Synthetics <input type="checkbox"/> Other:	<input type="checkbox"/> Well logs <input type="checkbox"/> Recent production data <input type="checkbox"/> DST or flow test data <input type="checkbox"/> Geological discussion <input type="checkbox"/> Isopach mapping <input type="checkbox"/> Structural mapping <input type="checkbox"/> Cross Sections <input type="checkbox"/> Discussion of seismic data <input type="checkbox"/> Interpreted seismic mapping <input type="checkbox"/> Interpreted seismic sections <input type="checkbox"/> Shot point maps <input type="checkbox"/> Synthetics <input type="checkbox"/> Other:
<b>Wells not listed in Part 6</b>	___ / ___ - ___ - ___ - ___ W ___ / ___	___ / ___ - ___ - ___ - ___ W ___ / ___	___ / ___ - ___ - ___ - ___ W ___ / ___