

NOTICE OF DISCHARGE OR PARTIAL DISCHARGE OF SECURITY INTEREST

FOR DEPARTMENT USE ONLY:

(Do not write above this line)

A. Full name of individual or corporation who is currently the secured party under the registered security notice(s) described in B:

B. 1. Registered security notice(s) wholly discharged with respect to all agreements against which it is (they are) registered (describe security notices by registration number and date of registration):

2. Registered security notice(s) discharged as to some but not all agreements affected by the security notice(s) (describe security notice(s) by registration number and date of registration):

Agreement(s) (type and number) affected by this discharge:

C. Dated this _____ day of _____

D. _____
Full name of secured party/assignee or agent

Signature

Printed name and capacity

Note: *There is no fee to register a discharge or partial discharge of a security notice.*

FORWARD COMPLETED FORM, IN DUPLICATE, TO:

Alberta Department of Energy

Tenure
9945 - 108 Street
Edmonton, AB
T5K 2G6

Website: <http://www.energy.gov.ab.ca/>

Phone (780) 427-7425

Fax (780) 422-1123

??? **QUESTIONS** ???

Please phone during business hours
8:15 - 4:30, Monday to Friday
Ask for "Tenure Registrations"