

# APPLICATION FOR WELL LICENCE

In compliance with The Oil and Gas Act and the Drilling and Production Regulation, application is hereby made for a well licence for:

\_\_\_\_\_ (well name and location)  
 By: \_\_\_\_\_ Manitoba Corporation No. \_\_\_\_\_  
 (name of well owner)

\_\_\_\_\_ (address of well owner) ( ) - ( ) -  
 (telephone) (fax)

Surface Location: Lsd \_\_\_\_\_ Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ WPM

Ground Elevation: \_\_\_\_\_ metres above sea level

**Surface Co-ordinates**

\_\_\_\_\_ metres  North of South  South of North boundary of Section \_\_\_\_  
 \_\_\_\_\_ metres  East of West  West Of East boundary of Section \_\_\_\_

**Directional or Horizontal Well Bottomhole Co-ordinates**

\_\_\_\_\_ metres  North of South  South of North boundary of Section \_\_\_\_  
 \_\_\_\_\_ metres  East of West  West Of East boundary of Section \_\_\_\_

Surface Owner: \_\_\_\_\_ Occupant: \_\_\_\_\_

Royalty Owner(s): \_\_\_\_\_

Freehold Oil and Gas Rights Leased By: \_\_\_\_\_  
 (Name of Oil and Gas Lease Agent and Corporation)

Crown Reservation or Lease No.: \_\_\_\_\_

Type of Well: Oil and Gas \_\_\_\_\_ Other \_\_\_\_\_  
 (specify)

Projected Total Depth: \_\_\_\_\_ metres in the \_\_\_\_\_ Formation

	Casing Size O.D. mm	Weight Kg/m	Grade	From	To	Estimated Cemented Interval
1.				Surface		To Surface
2.						
3.						

Drilling Contractor: \_\_\_\_\_ Rig No. \_\_\_\_\_

Expected Spud Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 YYYY MM DD

Responsible Agent of Company at Well: \_\_\_\_\_ ( ) - \_\_\_\_  
 (telephone)

\_\_\_\_\_  
 (Date) M/d/yyyy (Signature of applicant)

For assistance in completing this form contact Paulette Seymour at (204) 945-6575 or Dan Surzyshyn at (204) 945-8102.

For Department Use Only