

WELL OPERATION APPROVAL APPLICATION

Oil and Gas Resources Branch

Department of Energy, Mines and Resources, Government of Yukon Suite 400, 211 Main Street, Whitehorse, Yukon Y1A 2B2 Email: oilandgas@gov.yk.ca

A. Applicati	on information							
Date of appl (YYYY/MM/DD)]	Purpose of application ☐ Abandonment ☐ Re-abandonment	Su	t all that apply) uspension ompletion	☐ Workover	☐ Change of service		
B. Licensee	information							
Identification	code of license	ee (ID code)	Full	legal name of li	icensee			
Contact name					Capacity	Capacity		
Address				City/town	Terr./pro	v. Postal code		
Phone	e Fax Email							
C. Official s	ervice address							
Official service address of applicant				City/Town	Terr./pro	v. Postal code		
Legal name	of the authorize	d authority at the officia	al servic	e address (if dif	ferent from the	applicant):		
Name of contact person at the official service address					Capacit	city		
Main office p	Mobile	Fax		Email	Email			
D. Contract	or information							
		ations contractor						
Name of contact person					Capacity	apacity		
Address					Terr./prov.	Postal code		
Phone Fax				Email				
E. Well info	mation							
				Il licence #		Unique Well Identifier (UWI)		
Surface loca	ation							
Unit Section Grid area			Latitude		Longitude			

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Surface coordinates								
North/south distance	North/south designation	n East	/west	distar	ice	East/\	west designation	
Pool		Field	d					
Well type ☐ Disposal ☐ Observation ☐	Injection Storage	☐ Productio	on		□ Ехр	oerimental		
Well classification ☐ Development ☐	Exploratory outpost [☐ Explorato	ry wilc	dcat				
Objective zone(s)								
Objective formation				Fluid (oil/gas/water)			True vertical depth (metres)	
								-
								-
Hydrogen sulfide information	on for the proposed we	ell						
Sour well? ☐ Yes ☐ No	o If yes, complete tab	ole below.						
Hydrogen sulfide release ra	te well prognosis by po	otential hyd	drogen	n sulf	ide horizo	n. Attach	justification for the)
scenarios and associated ga	s rates and composition	ns.						
Formation name			Hydrog sulfide		•		Suspended/ producing case (m³/s	
			Sumue	; /0	ser vicing	case (III /s)	producing case (iii /s	,
								-
Maximum budua wan ayilida	volence vote (DD)							
Maximum hydrogen sulfide release rate (RR) Completion/servicing case (m³/s)					Suspond	nd/producine	g case (m³/s)	
NA	•	ing case (iii 7:	ارد		Suspende	su/producing	g case (III/s)	
Maximum hydrogen sulfide	e KK							
Maximum hydrogen sulfide								
concentration encountered in	well:parts	per million			moles	per kilomo	ole%	6
Calculated emergency plan	ning zone (EPZ)							
		Completion	/servici	ng cas	se (km)	Suspended	/producing case (km)	
Maximum calculated EPZ								
Number of occupied dwelling and/or places of business insi								
Distance to nearest populated area/dwelling: km Distance to nearest public facility: l Distance to nearest occupied dwelling: km Distance to nearest urban centre: l								
Distance to nearest surface development: km						e: km		
Blowout prevention (Oil and	I Gas Drilling and Prod	uction Reg	ulation	ns pa	rts 4, 6, s	chedule E	Ξ)	
☐ Yes ☐ No Class	3:							

Timing of operations	Estimated total cost					
Proposed commencement date (YYYY/MM/DD):	_					
Proposed rig release date (YYYY/MM/DD):	_					
F. First Nations						
Yukon First Nations traditional territory (select all that apply)						
☐ Carcross/Tagish First Nation ☐ 0	Champagne and Aishihik First Nations					
☐ Kluane First Nation ☐ H	Kwanlin Dün First Nation					
☐ Liard First Nation ☐ I	Salmon/Carmacks First Nation					
☐ First Nation Of Na-Cho Nyäk Dun ☐ F	Ross River Dena Council					
Selkirk First Nation	☐ Ta'an Kwäch'än Council					
☐ Teslin Tlingit Council ☐ ☐	r'ondëk Hwëch'in					
☐ Vuntut Gwitchin First Nation ☐ \	White River First Nation					
Trans-Boundary First Nation traditional territory (select all that ap	pply)					
☐ Inuvialuit regional corporation ☐ ☐	Fetlit Gwich'in Council					
Other:						
G. Disclosure and consultation						
Indicate whether notification requirements, consultation, and confirm						
If the answer is no for any group, attach a report detailing the rea						
First Nations: Yes No Public: Yes N	o Industry: ☐ Yes ☐ No					
Indicate if there are outstanding objections or concerns related to this application. If yes, attach a report detailing the outstanding objections and concerns.						
The applicant is a good standing member of a spill response co-op:						
Specify the co-op:						
Benefits agreement						
☐ Completed or obtained ☐ Required ☐ Not required						
H. Signature						
Indicate the name and capacity of the person signing for the applicant	t.					
Name of signatory	Capacity					
Signature	Date (YYYY/MM/DD)					
Checklist of attachments	List of acronyms					
☐ Application fee (OGLAR Schedule B)	OGA – Oil and Gas Act					
Proof of financial assurance. (OGLAR section 13)	OGDPR - Oil and Gas Drilling and					
☐ Well operation program	Production Regulations					
Safety plan (OGDPR Part 12 section 153(2))	OGLAR - Oil and Gas Licence					
☐ Environmental protection plan (OGDPR Part 12 section 153(3))	Administration Regulations					
☐ Consultation and notification report (OGA section 14)						
☐ Well deposit is in good standing (OGDPR section 8)						
☐ Hydrogen sulfide release calculations, EPZ determination and associated maps						
☐ Deviations from the <i>Oil and Gas Drilling and Production Regulations</i> .						
Provide detailed justification for each proposed deviation.						

This information is collected by the Oil and Gas Resources Branch under the authority of the Oil and Gas Act and section 29 of the Access to Information and Protection of Privacy Act. If you have questions about the collection and use of this information, please contact the Oil and Gas Resources Branch at oilandgas@gov.yk.ca.