

DAY	MONTH	YEAR

APPLICANT'S REFERENCE _____

1. IDENTIFICATION

Applicant BA Code _____ Applicant Name _____

2. PARTICIPANT INVOLVEMENT REQUIREMENTS

1. Personal consultation, confirmation of nonobjection, and notification requirements have been met: Public YES NO
 Industry YES NO
2. There are outstanding objections/concerns related to this application YES NO
- 3a. Distance to nearest surface development _____ km
- 3b. Distance to nearest residence _____ km

3. EMERGENCY RESPONSE PLANNING

1. The applicant will meet ERCB requirements for emergency response planning YES
- 2a. The facility requires a new emergency response plan YES NO
- 2b. The facility requires an amendment to an existing emergency response plan YES NO

4. APPLICATION TYPE

Category Type: _____ Description: _____

- New Licence Licence Amendment Temporary Facility

Maximum H₂S Content of Inlet Gas: _____ ppm _____ mol/kmol _____ %

Licence Amendment (LA) Type

- | | | |
|---|--|---|
| <input type="checkbox"/> 1-Change category and/or type | <input type="checkbox"/> 7-Add regenerative sweetening | <input type="checkbox"/> 12-Add new flare/incinerator stack |
| <input type="checkbox"/> 2-Install/remove compression | <input type="checkbox"/> 8-Add nonregenerative sweetening | <input type="checkbox"/> 13-Increase sulphur recovery efficiency |
| <input type="checkbox"/> 3-Change maximum licensed inlet rates | <input type="checkbox"/> 9-Change maximum continuous sulphur emissions | <input type="checkbox"/> 14-Decrease sulphur recovery efficiency |
| <input type="checkbox"/> 4-Change H ₂ S content of inlet gas | <input type="checkbox"/> 10-Extend expiry date | <input type="checkbox"/> 15-Change acid gas disposal method |
| <input type="checkbox"/> 5-Install/remove injection/disposal pumps | <input type="checkbox"/> 11-Change status to permanent | <input type="checkbox"/> 16-Degrandfather sulphur recovery facility |
| <input type="checkbox"/> 6-Change product/product recovery rates | | |

Location	Latitude (NAD 83)	Longitude (NAD 83)
LE LSD SEC TWP RGE _____ W ____ M	_____	_____

Existing Facility Licence No.	Linking Facility Licence No.	Temporary/Extended Facility Expiry
F _____	F _____ Direct to Sales <input type="checkbox"/>	DAY MONTH YEAR ____ _

ERCB-Designated Field or Strike Area

(Schedule 2 continued on next page)

5. DESIGN CRITERIA

Total Inlet Rates	Raw Gas	Oil/Bitumen	Condensate	Water	Sulphur
	_____ 10 ³ m ³ /d	_____ m ³ /d	_____ m ³ /d	_____ m ³ /d	_____ t/d
Total Continuous Emissions Rates	NO _x	CO ₂	Flaring/Incineration	Venting	
	_____ kg/h	_____ t/d	_____ 10 ³ m ³ /d	_____ 10 ³ m ³ /d	

6. TECHNICAL INFORMATION

1. The proposed facility is part of an experimental, primary, or commercial crude bitumen scheme YES NO
- 1a. If YES, Scheme Approval No. _____
2. Equipment spacing requirements will be met YES NO
3. The facility will meet all current and applicable engineering and safety standards YES NO
4. Gas will be continuously flared, incinerated, or vented YES NO
- 4a. If YES, the gas flaring, incinerating, or venting will comply with the requirements of *Directive 060* YES NO
5. The facility meets the ERCB *Noise Control* requirements (*Directive 038*) YES NO
6. ERCB storage requirements will be met (*Directive 055*) YES NO
7. ERCB oilfield waste management requirements will be met (*Directive 058*) YES
8. ERCB production measurement requirements will be met YES NO
9. NO_x air emissions meet the *Alberta Ambient Air Quality Objectives* YES NO
10. Approval from or registration with Alberta Environment is required YES NO
11. Alberta Environment requires an environmental impact assessment YES NO
12. The proposed facility will include compressors (new licence only). If Yes, attach completed Schedule 2.4. YES NO
13. The proposed facility will include pumps (new licence only). If Yes, attach completed Schedule 2.4. YES NO
14. The proposed facility site requires *Historical Resources Act* clearance (Freehold land only) YES NO
- 14a. If YES, clearance has been granted for the facility site YES NO
15. The licensee is the only working interest participant. If NO, attach a completed Schedule 2.1 YES NO
16. The facility meets the ERCB environmental requirements YES NO