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|  | **CERTIFICATION OF RESTORATION APPLICATION FORM – PART 1**  BC Energy Regulator, 6534 – 100th Ave.  Fort St. John, B.C. V1J 8C5  Phone: (250) 794-5200  Facsimile: (250) 794--5390 | Date Received |

THIS IS AN AUDITABLE DOCUMENT

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| ***Form must be submitted under the authorities of the Petroleum and Natural Gas Act R.S.B.C. 1996, c. 361, s.84, Drilling and Production Regulation, s.48(2), and the Environmental Management Act S.B.C. 2003, c. 53, in hardcopy, to the BC Energy Regulator, at the address noted above.*** This form nay only be completed by a professional or technologist registered as a member in good standing with an organization operating under an act of the British Columbia legislature. | | | | | |
| **ADMINISTRATION** | | | | | **A** |
| Well Permit No.**:** | | | | | |
| Well Name: | | | Well Location: | | |
| Permit Holder: | | | Surface Landowner: | | |
| Construction Date: | | | Abandonment/Decommissioning Date: | | |
| Type of Activity: | Wellsite | Test Hole | | Production Facility | |

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| **WELLSITE INFORMATION** | | | | | | | **B** |
| **Check all that apply if Wellsite is checked above** | | | | | | | |
| Well type: | D&A | Oil | Gas | Disposal | Source Water Well | Other – | |
| Producer Well: | | Fluid was piped from the site. | | | Fluid was trucked from the site. | | |
| Disposal Well: | | Fluid was piped to the site. | | | Fluid was trucked to the site. | | |

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| **PRODUCTION FACITITY INFORMATION** | | | **C** |
| **Check all that apply if Production Facility is checked above** | | | |
| Single Well Battery | Multi-Well Battery | Oil Treater | |
| Pumping Station | Compressor Station | Dehydrator | |
| Line Heater | Waste Disposal Facility | Waste Processing Facility | |
| Water Disposal Facility | Water Injection Station | Fluid was piped to the site | |
|  |  | Fluid was trucked to the site | |

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| **RECORDS REVIEW** | | | | | | | | | | | | | | | | | | | | | | | | | | **D** | | |
| **Company File Review** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Reviewed by: | | | | | | | | | | | | | | | | | | | | | Review Date: | | | | | | | |
| The personal information requested on this form is collected under the authority of and used for the purpose of administering the *Petroleum and Natural Gas Act and the Environmental Management Act.* Under certain circumstances, some information may be released subject to the provisions of the *Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection, use or disclosure of this information, contact the Corporate Services Branch, Records Administrator, in Fort St. John at the address above. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **DRILLING INFORMATION (Wells and Oil Production Sites)** | | | | | | | | | | | | | | | | | | | | | | | | | | **E** | | |
| Were drilling records reviewed? | | | | | | YES | | NO | | | | If NO, why not? | | | | | | | | | | | | | | | | |
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| Drilling Date: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Onsite Sump?  YES  NO | | | | | | | | | | | | | Remote Sump?  YES  NO | | | | | | | | | | | | | | | |
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| Sump Location(s) – Attach Diagram: | | | | | \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ / \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_NTS or DLS\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_W6M | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_ / \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_NTS or DLS\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_W6M | | | | | | | | | | | | | | | | | | | | | |
| Mud Type: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mud/Fluid Disposal Method(s): | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mud/Fluid Disposal Location(s): | | | | | | | | | | | | | | | | | | | | | | | | | | |
| For associated Landspread or Mix/Bury/Cover disposals, has the drilling waste disposal been assessed as required by the BCER document entitled “**Assessing Drilling Waste Disposal Areas for Regulatory Compliance**”? | | | | | | | | | | | | | | | | | | | | | | | | YES NO | | |
| Did this assessment require intrusive sampling? | | | | | | | | | | | | | | | | | | | | | | | | YES NO | | |
| Attach appropriate checklist, or if intrusive sampling was required, provide details regarding any investigative and remedial actions.  (When initiated, completion date, attach assessment and remediation details if available): | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Were remedial actions reported to the Regulatory Agency? | | | | | | | | | | YES NO N/A UNKNOWN | | | | | | | | | | | | | | | | |
| If YES, identify Regulatory Agency and Date: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **PRODUCTION/STORAGE INFORMATION (Wells, Production Facilities)** | | | | | | | | | | | | | | | | | | | | | | | | | **F** | |
| Was production/storage information obtained? | | | | | | | | | | YES | | | | NO | | | | | If NO, why not? | | | | | | | |
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| Describe all past or present associated infrastructure known to have occupied the site and attach a site diagram  (this includes tankage, pipeline infrastructure, process skids, and access roads): | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Flare Pits | | YES NO UNKNOWN | | | | | | | | | | | | | | | | | | | | | | | | |
| Details | | | | | | | Capacity | | | | | | | | Location | | | | | | | | | | | |
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| Storage Tanks | | YES NO UNKNOWN | | | | | | | | | | | | | If YES, how many tanks? | | | | | | | | | | | |
| Contents | | | | | | | Capacity | | | | | | | | Location | | | | | | | | | | | |
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| Herbicides Used | | YES NO UNKNOWN | | | | | | | | | | | | | | Details: | | | | | | | | | | |
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| Other (includes waste storage/handling/chemical storage, buried pits and landfills, etc): | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **ENVIRONMENTAL INFORMATION (ALL)** | | | | | | | | | | | | | | | | | | | | | | | | | **G** | |
| Spills/Releases | | YES NO UNKNOWN | | | | | | | | | | | | | | | | | | | | | | | | |
| (If YES, include a brief description including spill material, volume and date. If multiple spills have occurred, attach a completed summary of the information requirements in this section for each spill): | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Location and Extent (m2): | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Volume Recovered: | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contaminant Type: | | | Hydrocarbon | | | | | Salt | | | | Metals | | | | | Sterilants | | | | Other – | | | | | |
| Were remedial actions taken? | | | YES NO UNKNOWN | | | | | | | | | | | | | | If NO, explain: | | | | | | | | | |
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| Remedial Action (when initiated, target completion date, attach assessment and remediation details if available): | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Was confirmatory testing done following remediation? | | | | | | | | | YES | | | | NO | | | | | If YES, attach detains. If NO, explain: | | | | | | | | |
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| Has the site, at any time, exceeded a priority threshold as defined in Section 3.3 of the [Upstream Oil and Gas Site Classification Tool](https://www.bc-er.ca/files/operations-documentation/Remediation-Reclamation-and-Restoration/ogc-site-classification-tool-document-march-release-v20-2020.pdf)?  YES NO | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **LAND INFORMATION (ALL)** | | | | | | | | | | | | | | | | | | | | | | | | | **H** | |
| Landowner/Occupant complains from company file review? | | | | | | | | | | YES | | | | | NO | | | | If YES, identify issue(s) of concern: | | | | | | | |
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| **HISTORICAL AERIAL PHOTOGRAPH REVIEW** | | **I** |
| For producing wells and batteries the following aerial photographs are required, where they are available: one pre-disturbance; one post-disturbance; one photograph for every 2 to 3 year interval while the site was active.  For dry and abandoned wells, one aerial photograph of the active site, where it is available, is required.  For above ground facilities and spills, aerial photos of the site before, during (where they are available), and after the spill cleanup or facility removal are required.  For all aerial photographs, please use a scale of 1:5000 or 1:7500 to show detail. This scale will likely require an enlargement of the original aerial photograph | | |
| Reviewed by: | Review Date: | |

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| Photo ID: | Year: | Scale: |
| Evidence of Former Infrastructure or Areas of Potential Contamination: | | |
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| **INTERVIEWS** | | | | | **J** |
| *Include interviews held with Past and Present Operators and Landowners* | | | | | |
| Name of Landowner Interviewed: | | | Current | Previous | |
| Landowner Phone No. : | Is the interview information specifically for this site? | | YES | NO | |
| Interviewed by: | | Interview Date: | | | |
| Details of the Landowner’s comments: (*Request information on previous complaints, former facilities, presence and details of spills, pits, waste storage/handling, vegetation control etc*.) | | | | | |
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| Name of Operator Interviewed: | | | | Current | Previous |
| Operator’s Position: | | | Operator Phone No.: | | |
| Is the interview information | Specific to this site | General Area | Type of Operation | | |
| Interviewed by: | | | Interview Date: | | |
| Details of the Operator’s comments: (*Request information on previous complaints, former facilities, presence and details of spills, pits, waste storage/handling, vegetation control etc*.) | | | | | |
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| **SITE VISIT** | | | | | | | | **K** |
| Date: | | | | Assessor: | | | | |
| Surrounding Land Use: | | | | | | | | |
| N: | | | | | | | | |
| S: | | | | | | | | |
| E: | | | | | | | | |
| W: | | | | | | | | |
| Topography: | | | | | | | | |
| Vegetation: | | | | | | | | |
| Proximity to: (fill in distance and measurement to all that apply) | | | | | | | | |
| Residence: | | | Water Well: | | Surface Waterbody (i.e. dugout, stream): | | | |
| Equipment or tankage present (or visual signs of former facilities)? | | | | | | YES | NO | |
| What was observed? | | | | | | | | |
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| Visual Signs of open or potentially buried earthen pits? | | | | | | YES | NO | |
| What was observed? | | | | | | | | |
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| Evidence of past spills (includes cumulative releases and well centre impacts) | | | | | | YES | NO | |
| What was observed? | | | | | | | | |
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| Adjacent land affected by operations on the site? | | | | | | YES | NO | |
| If YES, what has been done to rectify of mitigate the impacts? | | | | | | | | |
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| Vegetation stress apparent? | | | | | | YES | NO | |
| Details (location, evidence): | | | | | | | | |
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| Is there any indication that groundwater may have been affected by the operations on the site? | | | | | | YES | NO | |
| If YES, what has been done to rectify of mitigate the impacts? | | | | | | | | |
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| Does site visit information conflict with specific file or air photo review information? | | | | | | YES | NO | |
| If YES, explain: | | | | | | | | |
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| Site Photographs: (*photos must include all areas of known infrastructure, bare or stained soil and stressed vegetation*): | | | | | | | | |
| Photo | Description | | | | | | | |
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| **CONCLUSIONS** | | | **L** |
| From the review of available information, is there any evidence to indicate that contamination is likely present in either soils or groundwater? | YES | NO | |
| If YES, indicate the nature of the evidence and, if in your professional opinion, there are any site-specific factors that would minimize or limit any perceived environmental risks associated with this site. Is there any other information about this location that you would like the Regulator to consider when evaluating whether this site should require further investigation. | | | |
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| **DECLARATION** | | | | | **M** | |
| I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*(Print Name)* solemnly declare that the information provided above is true and that no relevant information has been omitted, I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same legal force and effect as if made under oath. | | | | | | |
| Signature: | | Title: | | Date: | | |
| Mailing Address: | | | | | | |
| City: | | Province: | | Postal Code: | | |
| Phone: | | Fax: | | Email: | | |
| Operator Contact Information if different from above: | | | | | | |
| Mailing Address: | | | | | | |
| City: | | Province: | | Postal Code: | | |
| Phone: | | Fax: | | Email: | | |

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| **ATTACHMENTS** | | **N** |
|  | Original aerial photographs | |
|  | List of available aerial photographs | |
|  | Photographs of the site from the Site Visit | |
|  | Drilling Waste Checklist or Intrusive Sampling Results | |
|  | Diagram of Sump Location | |
|  | Summary of Investigative or Remedial Actions | |
|  | Site Plan (Lease Survey Plan with Field Notifications) | |
|  | Site Profile | |