

Government CARBON SEQUESTRATION AGREEMENT **APPLICATION FORM**

Part 1	Administrat	ive Information			
Applicant Name				Department Use Only:	
Project Name				Date of Receipt:	
DOE Client ID					
Evaluation Agreement No.					
Part 2	Applica	ation Type			
Applying for a new Carbon Sequestra	tion Agreement				
Requesting to modify the location of a Sequestration Agreement	-	Carbon Sequestratic	on Agreement	No:	
Part 3	Application	Requirements			
Proponent confirms attaching the following pdf do		•	ement Applicati	on:	
Hub Development Plan		e to Support Land Area R			
General Overview (as per template)	For each formation	in each geographic area:			
Project Configuration and Execution		Demonstrated that the areal extent and formation(s) requested in the application are congruent with the ultimate sequestration pore volume required to meet project needs.			
Project Location					
Proponents Operational Capacity	Included results of any investigations conducted since the execution of the evaluation agreement.				
Carbon Credit Management	Included relevant technical evidence (such as, but not limited to detailed structure, isopach/isochore maps, cross-sections, logs, pressure/injectivity testing, caprock analyses,				
Business Model	fluid testing etc.)				
Class 3 Cost Estimate	Spatial Data For	mat			
Audited Financial Statements	Other Elements				
Economic Evaluation Template	Insurance Policy				
Part 4	Poguostod Lan	ds and Formatic	n		
 Complete list of the legal land descripti Key well identification: 		ice (occlion, townonip,	range, mena	un).	
• Rey weindenuncation. Part 5	Submissio	n Instructions			
 Complete application and supporting doc 			ncapture ener	av@aov ab ca	
Mapped application area boundaries muApplicant must specify the spatial reference	st be represented by a nce of the data provide	i polygon. Areas submi ed (TTM, VTM, etc.).	tted as points	or line features will not be accepted	
It is recommended that applicants package all files in .ZIP format to help mitigate issues related to sending large files through email.					
Part 6 Signature and Contact Information					
In my capacity as Chief Financial Officer (CFO), or delegate, of , I have reviewed the financial and economic information submitted in this application, and the supporting information that I considered necessary, as of the date indicated below. Based on this due diligence review, I make the following attestations:					
 The nature and extent of the audited fination on the associated financial requirements Significant risks having a bearing on the assumptions, have been disclosed. The information is compliant with relevant of the audited financial requirements. 	s have been identified financial and econom nt financial manageme	and are supported, with ic, the sensitivity of the ent legislation and polic	h the following financial requ	observations. irements to changes in key	
authorities are in place or are being sou					
CFO, or Delegate Name	Title		Signature	Date: (YYYY-MMM-DD)	
APEGA Member Name	ID Number		Signature	Date: (YYYY-MMM-DD)	
Applicant Name	Title	S	Signature	Date: (YYYY-MMM-DD)	
		Phone 1:		Email:	
Name of Application Contact	Title	Phone 2:		Fax:	