|  | **APPLICATION FOR AN OPERATIONS AUTHORIZATION** |  |
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| **INSTRUCTIONS:** |  |  |
| Send one electronic copy of this form and supporting technical documentation by email to orogo@gov.nt.ca. If you wish to communicate with OROGO in hard copy, please do so using the courier address found at [www.orogo.gov.nt.ca](http://www.orogo.gov.nt.ca). |
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|  | **APPLICATION** |  |
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|  |       |  |
|  | (Name of Operator) |  |
|  | Hereby applies for authorization under Section 10 of the *Oil and Gas Operations Act* andPart 2 of the *Oil and Gas Drilling and Production Regulations* using equipment and procedures described in the application.Changes in equipment or procedures, outside the scope of this application, require approval in order that this authorization remains valid.  |  |
|  | LicenceType |        | Operating Licence No. | NWT-OL-      |  |
|  | Region |  | Field |       |  |
|  | Anticipated date of commencement: |       | Proposed Duration       |  months |  |
|  | Scope of Work |  |
|  |       |  |
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| --- | --- | --- |
|  | ***“I certify that the information provided on this form is true and correct”*** |  |
|  | Name |       | Phone |       |  |
|  | Title |       | E-Mail |       |  |
|  | Operator |       |  |  |
|  | Signature |  | Date |       |  |
|  |  | *Responsible Officer of Company* |  |  |