|  |  |
| --- | --- |
| Part I: Identification | |
| Unique well identifier: | Well licence: |
| Licensee: | Field name: |
| Name of injection formation or pool: | Injection interval: Top (m): Bottom (m): |
| Well class: Ia  Ib  II  III  IV | |
| Injected/disposed fluids:  Does the fluid contain H2S?: Yes  No | Source of fluids:  *(Name the industrial facilities, gas plants, etc.* *No source is required for injection/disposal of fresh water or steam. Specify "Province of Alberta" for water produced from recovery of oil, bitumen, gas, coalbed methane, or geothermal where fluids originate from an Alberta source.)* |
| Expected daily injection/disposal volume (m3): | Expected maximum injection pressure (kPa): |

|  |  |
| --- | --- |
| Part II: Casing Integrity Assessment | |
| Finish drilling date (dd/mm/yyyy): | |
| Casing inspection log run:  No  Yes  (log summary and interpretation attached) | Corrosion rate: Acceptable  Unacceptable |
| Casing-tubing annulus full of corrosion-inhibiting fluid:  Yes  No | Monitoring frequency: |
| Casing pressure integrity test:  No  Yes  (test summary attached) | Date of test (dd/mm/yyyy): |
| Casing vent flow: No  Yes  Repaired | Casing failure: No  Yes  Repaired |

|  |  |
| --- | --- |
| Part III: Cementing | |
| Cement top (m):  *(If cement returns were obtained and maintained, indicate "surface". If not, indicate depth of cement top.)* | Method of assessment:  *(For a cement top other than “surface,” indicate the method used to evaluate the top, e.g., temperature logging, cement integrity logging, or calculations).* |

|  |  |
| --- | --- |
| Part IV: Hydraulic Isolation Assessment | |
| Hydraulic isolation logging: | Method of assessment: |
| Logs and interpretation attached  To be conducted | |
| Logged interval: | Wellhead pressure during logging (kPa):  *(For a tracer or temperature survey this would represent the injection pressure under which the survey was run. For cement integrity logs this would represent the static casing pressure under which the log was run.)* |
| Top (m): Bottom (m): | |

|  |  |
| --- | --- |
| Part V: Certification | |
| I hereby certify that the data given above and on the attached documentation is correct, that interpretations have been made by personnel qualified to make such Interpretations, and that injection/disposal operations will be conducted as per AER *Directive 051* or as otherwise approved by a representative of the AER. | |
| Signature: | Title: |
| Company: | Phone number: |
| Address: | Email: |