

Conservation and Reclamation INFORMATION LETTER

Wellsite Reclamation Certificate Application Form Revised 2001

Use of the new *Wellsite Reclamation Certificate Application Form* will be mandatory for sites assessed after July 1, 2001. After this date, earlier versions of the application form will not be accepted.

The following major changes have been made:

Section I: Addition of a question pertaining to wellsites on public land and cancellation of the disposition. **This question must be answered beginning April 1, 2001 if you are operating on public land.** Please indicate your answer in a covering letter if you are not using the revised *Wellsite Reclamation Certificate Application Form* prior to July 1, 2001.

Note: If a request is made to retain this disposition PRIOR to it being cancelled, either by the disposition holder or a company wishing assignment of this holding, that request will take precedence over the request on the *Wellsite Reclamation Certificate Application Form*.

Section I: Addition of one question on GPS co-ordinates at well centre, if the information is available.

Section I: Addition of one question on the type of a gas well (sour or sweet) on the site for the safety of the Inspector. Please indicate your answer in a covering letter if you are not using the revised *Wellsite Reclamation Certificate Application Form* prior to July 1, 2001.

Section III: Addition of one question (Question 4) on the date the well facility was abandoned. This will flag sites that have been abandoned for some time before an application was made.

Section III: Removal of the question relating to contaminant remediation

work done: "If Yes, provide information on the types of substances and the dates and nature of the remediation work".

Section III: Addition of a question (Question 9) on conducting a Phase 1 Environmental Site Assessment.

Note that Phase 1 Environmental Site Assessments only have to be done on sites assessed **after** July 1, 2001. For information, see the document *Phase 1 Environmental Site Assessment Guideline for Upstream Oil and Gas Sites* and Information Letter *Guidance for Use of the Phase 1 Environmental Site Assessment Guideline for Upstream Oil and Gas Sites (D&R/IL/01-1)* which can be found on the website at www.gov.ab.ca/env/protenf/soilgrndwater/ under *Publications*.

Section III: Revision of a question (Question 16) on waste buried on site to now focus on non-oilfield waste. Oilfield waste is the responsibility of the Alberta Energy and Utilities Board. For example, burial of cement returns does not need to be reported here.

Section III: Addition of a question (Question 18) requesting an EPEA Approval number be provided, if one exists.

Section III: Addition of a question (Question 19) to determine if any work has been conducted on the site since the last inquiry. If yes, details of what was done should be provided in the Detailed Site Assessment Report. If no work has been done, an explanation should be given.

The *Wellsite Reclamation Certificate Application Form* must be fully completed prior to submission, including the site diagram on page 5 of the application.

CONTACTS

The following can be reached toll free by calling 310-0000 and then dialing the number shown below.

For Green Area public lands:

Alberta Sustainable Resource Development
Land Administration Division
3rd Floor, 9915 - 108 Street
EDMONTON, Alberta T5K 2G8

Phone: (780) 427-3570
Fax: (780) 422-4251
e-mail reclaim@gov.ab.ca

For White Area public lands:

Alberta Sustainable Resource Development
Public Lands
Room 200, J. G. O'Donoghue Building
7000 - 113 Street
EDMONTON, Alberta T6H 5T6

Phone: (780) 427-6597
Fax: (780) 422-4244
Website: www.gov.ab.ca/navigation/sustain/publiclands/index.html

For all other lands:

Alberta Environment
Environmental Sciences Division
4th Floor, 9820-106 Street
EDMONTON, Alberta T5K 2J6

Phone: (780) 427-5883
Fax: (780) 422-4192
e-mail: land.management@gov.ab.ca

WELLSITE RECLAMATION CERTIFICATE APPLICATION FORM – REVISED 2001

I. GENERAL INFORMATION

Applicant (Operator): _____

Address: _____

Phone Number: _____

Agent/Consultant: _____

Address: _____

Phone Number: _____

Landowner Name(s): _____

Address: _____

Phone Number: _____

Occupant: Yes No

Name: _____

Address: _____

Phone Number: _____

Public Land Crown Disposition No. _____

Upon issuance of the Reclamation Certificate, do you want your public land disposition cancelled? Yes No

If No, provide a complete explanation of why you still require the disposition in the Detailed Site Assessment or a covering letter.

Private Land County/MD/ID/SA _____

Company File No: _____

Applicant is EUB Licensee? Yes No

If No, explain _____

EUB Well/Battery Name: _____

EUB Unique Well/Facility Identifier(s): _____

EUB License No(s): _____

Complete Surface Legal Land Description(s): (lease, access road, facility)

GPS Co-ordinates at Well Centre: _____

- Oil Wellsite
- Sweet Gas Wellsite
- Disposal Well
- Prepared Wellsite (Not Drilled)
- Sour Gas Wellsite
- D & A Wellsite
- Battery
- Other EUB Facility

Associated Facilities (must be certified)

- Campsite
- Access Road
- Other (Describe) _____
- Borrow Site
- Log Deck/Storage (Green Area)
- Remote Sump

II. OTHER INFORMATION REQUIRED

1. Private Land: Have you performed a final inspection in the presence of the landowner/occupant: Yes No

Public Land: Have you performed a final inspection in the presence of the occupant: Yes No

Date of final inspection: _____

2. Landowner/Occupant Comments: _____

3. Have you provided the landowner/occupant a copy of this application? Yes No If No, state reason: _____

4. For public land, have all disposition conditions been met? Yes No If No, state reason: _____

5. Indicate the company representative we should contact for information to complete the application; notify of the reclamation inquiry; and give any documentation to.

Name: _____ Phone Number: _____ Fax Number: _____

Address, if different than Applicant above: _____

e-mail address: _____

NOTE: Material hand delivered by the Inspector to any operator representative in the field will be deemed to have been delivered to the operator on that date.

Provide a current Certificate of Title (private land only); if located in Special Areas, provide a search from the Special Areas Board indicating the lessee's name and address. Provide 5 (five) copies of a survey plan, with the area to be certified outlined in yellow. The survey plan must cover one quarter section. Details on the plan (or in the Detailed Site Assessment Report) must be sufficient to show the relationship of the site to the immediately surrounding area, in particular the following (where applicable): surface drainage and direction; slope direction; distance from waterbodies, streams, and sensitive areas; land use; bush; roads; trails; buildings; and fence lines. Survey plans must be readable, especially site dimensions, distances and bearings.

Note: A duplicate copy of the application and supporting documentation is required (however, only 5 copies of survey plan are required).

III. SITE HISTORY

Attach supporting information to this form when available. Older sites may not have all the required information. The more information you are able to provide the less time will be needed at the inquiry to identify potential problems. If you do not have any supporting information, please put Not Available on the form. **Sites constructed after April 30, 1994 must supply all the information.**

1. Survey Date: _____
2. Construction Date: _____
 Ground Conditions: Wet Dry Frozen
3. Pre-construction Assessment Done? Yes No
4. Abandonment Date: _____
5. Sump Backfill Date: _____
 Ground Conditions: Wet Dry Frozen
 Sump Location: On-Lease Remote None
 Remote sump location: _____
 Drilling mud (type, volume): _____
 Drilling waste disposal method: _____
 Disposal location: _____
6. Site Recontour Date: _____
 Ground Conditions: Wet Dry Frozen
7. Access Disturbed? Yes No
 Access Developed? Yes No
 If Yes: Low Profile High Profile Pit Run Crush
8. Seeding Date: _____
 Attach species mix list (if available).
9. a) Has a Phase 1 Environmental Site Assessment been conducted as per the *Phase I Environmental Site Assessment Guideline for Upstream Oil and Gas Sites*?
 Yes No
 If No, why not? _____

 b) Contaminant remediation work done? Yes No N/A
10. Herbicides/Sterilants: Provide details of chemicals used, dates, rates of applications, and remedial action: _____

11. Fertilizers: Identify types and rates: _____
 Date last used: _____
12. Soil Amendments: Identify types, amounts, rates, date(s) of application and method of incorporation: _____
 Accepted by landowner: Yes No
13. Identify brush disposal method/location: _____
14. Underground facilities removed (storage tanks, pipelines, etc.)?
 Yes No If No, explain _____
15. Water supply well drilled on Lease Area? Yes No
 If Yes, supply the driller's name and address _____

16. Non-oilfield waste (e.g., concrete, gravel or debris) buried on-site?
 Yes No
 If Yes, what material is buried? _____
 and at what depth: _____ metres
Attach written acceptance from all registered landowners.
17. Facilities or features (e.g., water well, access road, well pad, fences, others) to remain in place? Yes No
 If Yes, facilities or features are stable and non-hazardous?
 Yes No
Attach releases from all registered landowners for all facilities or features to remain.
18. Is this well part of an oil production site with an *Environmental Protection and Enhancement Act* approval under Division 3 of the *Activities Designation Regulation*? Yes No
 If Yes, Approval No.: _____
 If Yes, have you complied with all conditions of the approval?
 Yes No
19. Has any work been done at the site since the last inquiry?
 Yes No N/A
 If Yes, provide details in Detailed Site Assessment Report.
 If No, explain why.

IV. DATA

Data must be obtained for landscape, surface soil and vegetation components and compared to pre-disturbance (or representative adjacent) conditions based on the criteria outlined in the *Reclamation Criteria for Wellsites and Associated Facilities - 1995 Update* document. **Please include your Detailed Site Assessment Report with this form.** Data are required for the lease, the access road and for each associated facility that is being applied for.

Person(s) who Conducted the Assessment: _____ **Company:** _____

Date(s) Assessment Conducted: _____ **Phone Number:** _____

1. Land Use Category: Cultivated Grassland Forest (White) Forest (Green) Peat

2. Construction Period: Before 1983 1983 to April 30, 1994 After April 30, 1994
 Site Two-Lifted? Yes No

3. Management Plan Goals Achieved? Yes Not Applicable
 If Yes, attach details of the Management Plan and the measured success.

4. Access Road Length: <100 m >100 m No disturbance

NOTE in the sections below, "lease" refers only to a wellsite; use "other site type" boxes for each associated facility, add more boxes if you are applying for more than one associated facility

5. Meets Landscape Criteria? (if No, highlight in the Detailed Site Assessment Report and provide justification for accepting the site):

Parameter	Lease		Access		Other Site Type (Please identify)	
Drainage	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Erosion	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Contour	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Stability	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Gravel and Rocks	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Debris	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Plant Health	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Bare Areas	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No

6. Surface Soil Quantity (provide details in Detailed Site Assessment Report):
 Meets Criteria? Lease: Yes No Access: Yes No Other Site Type: Yes No
 If No, highlight in the Detailed Site Assessment Report and provide justification for accepting the site.

7. Surface Soil Quality (provide details in Detailed Site Assessment Report):
 Meets Criteria? Lease: Yes No Access: Yes No Other Site Type: Yes No
 If No, highlight in the Detailed Site Assessment Report and provide justification for accepting the site.

8. Loss of Organic Matter Content (% admixing):
 Target: 30% 40%
 Control Dominant Class 0-10% >10%-20% >20%-30% >30%-40% >40%-50% >50%
 Site Dominant Class 0-10% >10%-20% >20%-30% >30%-40% >40%-50% >50%

9. Soil Profile Assessment (provide details in the Detailed Site Assessment Report):

Meets Criteria? Lease: Yes No Access: Yes No Other Site Type: Yes No

If No, highlight in the Detailed Site Assessment Report and provide justification for accepting the site.

10. Vegetation (provide details in the Detailed Site Assessment Report):

Site Crop/Vegetation Type: _____

Control Crop/Vegetation Type: _____

Meets Criteria? Lease: Yes No Access: Yes No Other Site Type: Yes No

If No, highlight in the Detailed Site Assessment Report and provide justification for accepting the site.

V. DECLARATION

The Declaration must be signed by the operator or his consultant/agent (the Inspector has the right to request written proof that the person signing the application is an agent of the operator).

I, _____ of _____ certify that, to the best of my knowledge, all the above
(print name) (operator)

information is accurate and that all other conditions described in the document *Reclamation Criteria for Wellsites and Associated Facilities - 1995 Update* have been met, and that there are no other soil chemical or physical conditions that resulted from the licensed operator's use of this land that may adversely affect soil or vegetation or groundwater on or near the site described above.

NAME (SIGNATURE) POSITION DATE

Please assemble the application in this order:

Original – Clip together with a binder clip

- Cheque for \$300.00 payable to the Minister of Finance
- Cover letter
- Application
- Signed releases if applicable
- Detailed Site Assessment Report
- Pictures if applicable
- Copy of current title/or Special Areas Search (private land)
- Survey plan (one copy) outlined in yellow

Copy – clip together with a binder clip

- same order
- Survey plans (4 copies) outlined in yellow

Clip original application and duplicate copy together with a larger clip thus ensuring that they do not get separated.

Do not staple information together or put into a bound cover of any kind.

Return this application and the supporting documentation, including the Detailed Site Assessment Report, in duplicate to:

For all lands in the Green Area administered under the Public Lands Act

Alberta Sustainable Resource Development, Public Lands Division, 3rd Floor, 9915 - 108 Street, EDMONTON, Alberta T5K 2G8; **e-mail** reclaim@env.gov.ab.ca

For all lands in the White Area administered under the Public Lands Act

Alberta Sustainable Resource Development, Public Lands Division, Room 200, 7000 - 113 Street, EDMONTON, Alberta T6H 5T6.

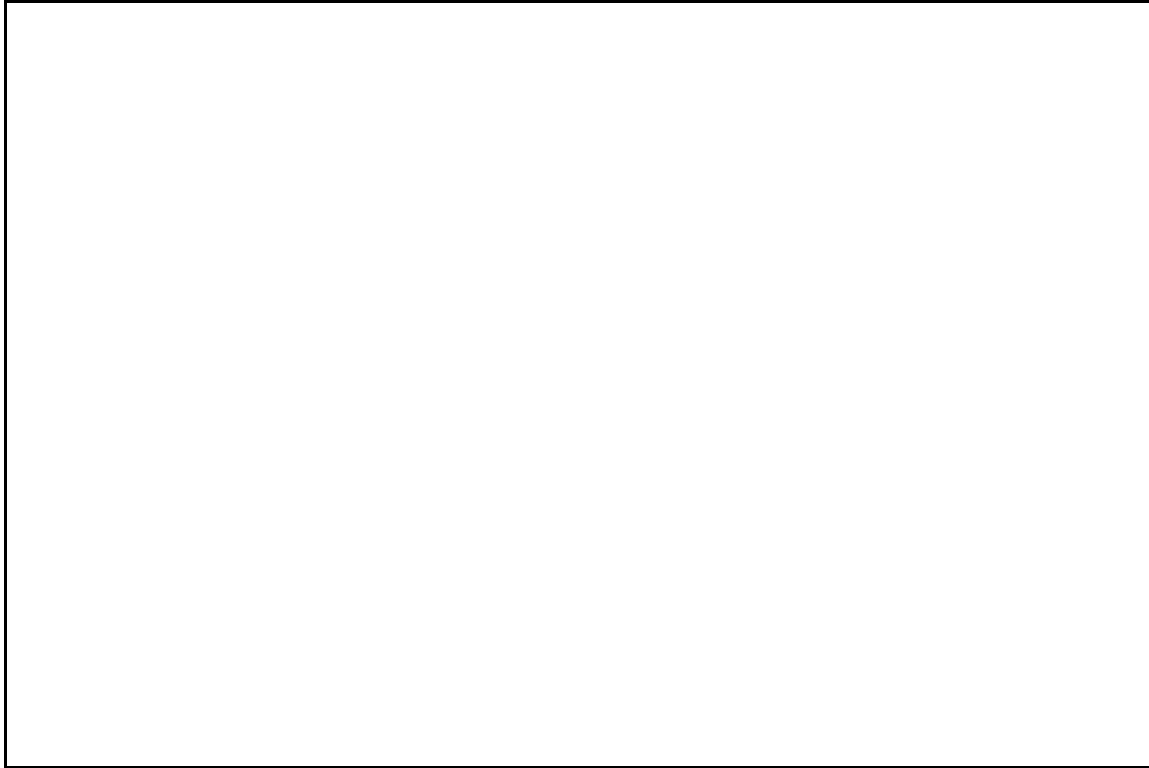
For all other lands

Alberta Environment, Regulatory Approvals Centre, Main Floor, 9820 - 106 Street, EDMONTON, Alberta T5K 2J6






Well/Battery/Facility Name: _____ Location: _____

SITE SKETCH (Do not duplicate if in Detailed Site Assessment Report)

CONSTRUCTION
PHASE



Please indicate the following on the sketch:

Drainage/direction		Wellhead	$\oplus wh$	Berms	<i>berm</i>	Cut/fill	
Spoil	<i>sp</i>	Spills		Trenches	<i>tr</i>	Access	<i>ac</i>
Topsoil Pile	<i>tsp</i>	Subsoil Pile	<i>ssp</i>		sump	Flare Pit	

OPERATIONS PHASE

Please indicate the following on the sketch:

Wellhead	$\oplus wh$
Topsoil Location	<i>tsp</i>
Subsoil Location	<i>ssp</i>
Teardrop	

