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|  | | | **APPENDIX III - OFFSET NOTICE RESPONSE FORM**  (Please utilize one Response Form per Offset Notice) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***PART 1*** | | | ***GENERAL INFORMATION*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***OFFSET NOTICE DATE:*** | | | | | | *(yyyy-mm-dd)* | | | | | | | | | | | | | | | | | | | | | | | | |  | | ***FREEHOLD USE ONLY*** | | | | | | | | | | | | | | | | | | | | | |
| ***LESSEE NAME:*** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | | *DATE OF RECEIPT:* | | | | | | | | | | | | | | | | | | | | | |
| ***LESSEE ADDRESS:*** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | |
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| ***FREEHOLD FILE NO.:*** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | |  | | | | | | | | | | | | | | | | | | | | | |
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| ***LESSEE FILE NO.:****(optional)* | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |  | | *TWP* | | | | | | | *RGE* | | | | | | *M* | | | | *Sec* | | | | |
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| ***OFFSET FORMATION:*** | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |  | | *ALL* | | | | *SW* | | | | | | *SE* | | | | | *NW* | | | | *NE* | | |
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| ***OFFSET WELL UWI:***  *(list locations as applicable)* | | | | |  | | | | */* |  | | | *-* | | |  | | | | *-* | | |  | | *-* | |  | | *W* | | | | |  | | | | | | | *M /* | | | | | | | |  | | | |  | |
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| *Lessee* ***OR*** *Authorization Form Attached* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***PART 2*** | ***NOTICE SATISFIED BY PRODUCTION*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***UNIQUE WELL ID:*** | | | | | | | |  | | | */* |  | | | *-* | | |  | | | | *-* | |  | | *-* | |  | | | *W* | | | | |  | | | *M /* | | | | | |  | | | | | |  | | | |
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| ***ON PRODUCTION DATE:*** | | | | | | | |  | | | | | | | | | | | | | | | *(yyyy-mm-dd)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *new drill* ***OR***  *put back on production* ***OR*** *approved recompletion* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***DATA SUPPLIED TO SUPPORT THIS:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *production history*  *completion history*  *well logs with marked formation tops* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***PART 3*** | ***ELECTION TO PAY OR SURRENDER*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *If there is no provision in the Freehold Lease to allow for a compensatory royalty or surrender of all non-producing formations, Freehold will prepare and forward a Compensatory Royalty Agreement or a Partial Lease Continuation Agreement, as applicable, for Lessee’s execution.*  *Samples of these agreements can be obtained by contacting the Area Administrator.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *BOX 1*  *I elect to pay offset compensation* ***OR*** | | | | | | | | | | | | | | | | | *BOX 2*  *I elect to surrender ALL non-producing formations* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***PART 4*** | | ***REQUEST FOR REVIEW OF OFFSET NOTICE*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | *I request a technical review of the referenced offset notice.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***REASON:*** | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***DATA SUPPLIED TO SUPPORT THIS:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *well logs with marked formation tops* | | | | | | | | | | | | | | | | | | | | | *recent production data* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *DST, pressure data, or flow test data* | | | | | | | | | | | | | | | | | | | | | *geological discussion* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *other relevant information* | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *SIGNATURE:* | | | |  | | | | | | | | | | | | | | | | | | | | | | *Date* | | | | *(yyyy-mm-dd)* | | | | | | | | | | | | | | | | | | | | | | | |
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| *LAND CONTACT:* | | | |  | | | | | | | | | | *TITLE:* | | | | |  | | | | | | | | | | | | | | | | *PHONE:* | | | | | | |  | | | | | | | | | | | |
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| *TECHNICAL CONTACT:* | | | |  | | | | | | | | | | *TITLE:* | | | | |  | | | | | | | | | | | | | | | | *PHONE:* | | | | | | |  | | | | | | | | | | | |
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APPENDIX III - AUTHORIZATION FORM

To: Freehold Royalties Partnership

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Subject: | | |  | | Dated | |  | | | , 20 |  |
| Choose an item. File No(s): | | | |  | | | | | | | |
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|  | | | | | | | | | | | |
| I/We | |  | | | | | | as duly authorized representative(s) | | | |
| of |  | | | | | | | | (the “Lessee”) hereby appoint | | |
|  | | | | | | (the “Appointee”) to deal with | | | | | |

Freehold Royalties Partnership on behalf of and as agent for the Lessee for all matters relating solely to the Subject matter**.**

I/We further represent and warrant that I am/we are duly authorized to sign this Authorization Form and that by signing this Authorization Form, the Authorization Form is binding on the Lessee.

By signing this Authorization Form, I/we acknowledge and agree that the Lessee will be bound by all decisions, settlements, elections, conversations, and agreements that the Appointee has with Freehold Royalties Partnership

I/We further acknowledge and agree that for the purposes of the matter outlined above, Freehold is authorized to disclose any information necessary to the Appointee and such disclosure shall have the same effect as if it had been made directly to the Lessee.

I/We further acknowledge and agree that for the purposes of the matter outlined above, Freehold is authorized to give all notices to the Appointee and such notice will have the same force and effect as if it had been made directly to the Lessee.

I/We further understand that I/we may, at any time and on written notice to Freehold, terminate this Authorization Form and the Appointee’s ability to deal on the Lessee’s behalf. In the event that such termination occurs, Freehold will continue to deal directly with the Lessee, provided always that any prior agreements or settlements reached between Freehold and the Appointee shall continue to bind the Lessee notwithstanding that this Authorization Form is terminated.

|  |  |  |  |  |  |  |  |  |  |  |  |
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| **IN WITNESS WHEREOF**, I/we |  | | | | | | | | | | have |
| executed this Authorization Form at | |  | | | | | | Alberta this |  | day of | |
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