



**Perforations**

Interval (m KB)	Comments

**Other information**

Lost circulation/overpressure zones

Equipment left on-site (describe)

Provision for re-entry (describe and attach sketch)

Other downhole completion/suspension

Additional comments

**Certification by licensee's representative**

**I certify on basis of personal knowledge of operations undertaken at the above named well that the information provided on this form is true and correct.**

Name	Job designation
Signature	Date
Phone	Email

**Instructions: complete all pages**

Submit the completed form and supporting documents to the chief operations officer.

The following supporting documents are required:

- Tour sheets
- Detailed daily operations reports
- Downhole schematic **diagram in full colour**
- All well logs related to the operations

If there is any conflict or inconsistency between this form and any provision of the *Yukon Oil and Gas Act* or its regulations, the *Yukon Oil and Gas Act* and its regulations prevail.

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