



Cost Analysis and Reporting Enhancement (CARE) Diluent Supplied to a Stream - In-Situ Projects

DILUENT

Filed Quarterly

Stream : _____

OSR Project Numbers and Names: _____ [List OSR# (Project Name) applicable to the stream]

Operator Name: _____ [Enter Name of Operator]

Operator ID: _____ [Enter Operator ID]

For the Period: _____ YYYY MM DD to _____ YYYY MM DD

Month of Supply	Diluent Type	Diluent Density	Diluent Pool Location	Volume (m3)	Price (C\$/m3)	Arms Length Transaction (%)	Mode of Transportation	Transportation Cost (C\$)

Notes: