



# Cost Analysis and Reporting Enhancement (CARE) Transportation Costs - In-Situ Projects

Filed Quarterly

TRANSCST

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	Mode of Transportation	Origin	Destination	Product	Transported Volume (m3)	Transportation Costs (C\$)	Includes Diluent return? (Yes/No)

Notes: