



SURRENDER FORM (Oil Sands)

Applicant Name _____

Address _____

Applicant File Number(s) _____

We are the designated representative **OR** Attached is a letter of authorization from the designated representative as we are not the designated representative

Agreement(s) (type and number) being surrendered or affected by surrender

If surrender is a part only of location of the agreement(s), describe part

(Mer Rge Twp: Sec)

Surrender to be effective on:

_____ (YY-MM-DD)

We confirm that we have obtained the consent of all registered lessees.

Signature of Applicant	Title	Date	YY-MM-DD	Phone number

Note: This document and the applicable application form may be emailed. If emailed please do not mail originals.

FORWARD COMPLETED APPLICATION TO:

Alberta Department of Energy and Minerals

Oil Sands Tenure
North Petroleum Plaza
6th Floor, 9945-108 Street NW
Edmonton, AB T5K 2G6

OR

Information Centre
300, 801-6th Avenue SW
Calgary, AB T2P 3W2

Website: <https://www.alberta.ca/energy-and-minerals.aspx>

Email: OSTenure@gov.ab.ca

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QUESTIONS

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Please email ostenure@gov.ab.ca