

Ministry of Energy and Resources
610 - 1945 Hamilton Street
Regina, Saskatchewan
Canada S4P 2C7
ER.servicedesk@gov.sk.ca
1-855-219-9373

Submission of Preliminary Plans

A minimum of two weeks prior to commencement of operations, submit: a cover letter, one original print of a 1:50,000 scale project map, and land listings. The location and justification for special shotholes, explosive depths, or explosive sizes may be attached separately. If the Field Contractor is unknown at the time of submission, this information must be submitted prior to commencement of the field program.

Licence Holder: _____ Exploration Licence No.: _____

Office Contact: Name _____ Phone No.: _____
Email Address _____

Field Contractor: _____ Exploration Licence No.: _____

Client: _____

Program Name: _____ Projected Line kms _____

Location: Twps. _____ Rgs. _____ West of _____

Mineral Disposition #'s _____ Resource Objective (eg. OIL & GAS, POTASH etc.) _____

Proposed Dates of: Commencement _____ Completion _____

Type of Seismic Program Proposed (dynamite, vibroseis, etc.) _____

"I recognize that no holder of an Exploration Licence shall conduct any seismic exploration on lands without the consent of the owner and any occupant of those lands."

Authorized Official of the Licence Holder (please print)

Date

Signature

For Ministry Use Only:

PRIOR TO COMMENCEMENT, THE CONTRACTOR MUST SUBMIT "NOTICE OF INTENT" FORMS TO:

SASKTEL (telecommunication cables): @ email: sasktelfacility.crossings@sasktel.com

TRANSGAS LTD. (pipelines): @ email: applications@transgas.com

SASKENERGY: @ email: safeworkplanning@saskenergy.com

WATER SECURITY AGENCY: @ email: groundwater@wsask.ca

SASKPOWER (electrical): @ _____

HERITAGE CONSERVATION BR.:@ email: arms@gov.sk.ca

MINISTRY OF HIGHWAYS: @ _____

MINISTRY OF AGRICULTURE: @ _____
(crown lands)

MINISTRY OF ENVIRONMENT: @ _____
(environmentally sensitive areas)

OTHER: (--FIRST NATIONS RESERVES, ETC--) @ _____

MUNICIPALITIES: R.M.# _____
R.M.# _____
R.M.# _____
R.M.# _____

Program Submission Number: _____ Commencement Date _____

Signature _____ Date _____

