

THIRD PARTY TIE-IN REQUEST FORM

PART 1: PRODUCER CONTACT INFORMATION

Date: _____

Company Name: _____

Company Address incl. Postal Code: _____

Contact Person: _____

Title: _____

Contact: _____ Office _____ Cell _____ Fax _____

E-mail: _____

Field Foreman Name / E-mail: _____ E-mail _____

Field Foreman Contact: _____ Office _____ Cell _____ Fax _____

Facilities Engineering Contact: _____ Office _____ Cell _____ Fax _____

Marketing Contact: _____ Office _____ Cell _____ Fax _____

Production Accounting Contact: _____ Office _____ Cell _____ Fax _____

PART 2: WELL DETAIL

Well Name: _____

Well UWI: _____

Field Name: _____ Field Code: _____

Pool Name: _____ Pool Code: _____

Licensee: _____

Well Ownership Percentages:

Company Name	Working Interest %

Service(s) Required:

Other (Explain): _____

- ☐ Gas Processing ☐ Transportation ☐ Compression ☐ Other
☐ Effluent Treating ☐ SWD ☐ Contract Op ☐ Prod Accounting
☐ Yes ☐ No ☐ ACL to Market Product

Take-in-Kind:

Construction Start Date: _____ Karve Facility or Battery Location: _____

Expected Production Date: _____

Delivery Method: ☐ Trucking ☐ Existing Flowline ☐ New Flowline

PART 3: PRODUCTION INFORMATION

Producing Zone:

Type: ☐ Gas ☐ Oil

Classification: ☐ Sweet ☐ Sour ☐ CBM

H₂S Content: _____ mol/kmol

Analysis:

Gas: ☐ Yes ☐ No ☐ Attached to Form

Oil: ☐ Yes ☐ No ☐ Attached to Form

Condensate: ☐ Yes ☐ No ☐ Attached to Form

Water: ☐ Yes ☐ No ☐ Attached to Form

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PART 4: WELL PERFORMANCE

Estimated Production Rate:

Gas ($10^3 \text{ m}^3/\text{d}$)

Water (m^3/d)

Oil API

Sulphur (%)

Well Shut-in Pressure (kPag):

Well Flowing Pressure (kPag):

Well Flowing Temperature ($^{\circ}\text{C}$):

PART 5: PIPELINE DESIGN

Pipeline Start Location:

Pipeline End Location:

Size (mm OD):

Wall Thickness (mm):

MOP (kPag):

Linepipe Grade:

Linepipe Category:

Pigging Facilities:

Tie-in Detail:

☐ 290

☐ Category 1

☐ Yes

☐ Above Ground Tie-in

☐ Below Ground Cold Cut

☐ 359

☐ Category 2

☐ No

☐ Below Ground Hot Tap

PART 6: WELLSITE PRODUCTION EQUIPMENT

Design Standard:

Wellsite/Facility ESD:

☐ CSA Z662

☐ Yes

☐ B31.3

☐ No

Process Equipment:

Metering:

Separator:

Lineheater:

Compression:

Dehydration:

☐ Yes

☐ Yes

☐ Yes

☐ Yes

☐ Yes

☐ No

☐ No

☐ No

☐ No

☐ No

Liquids Handling:

Water:

Condensate:

☐ Tank

☐ Tank

☐ Pipeline

☐ Pipeline

Materials:

Temperature Rating

☐ Standard Temperature

☐ Low Temperature

Metering (Gas):

Meter Run Size (mm OD):

Type of Meter: _____

Fuel Gas Source:

☐ Well

☐ Other Source _____

Cathodic Protection:

Insulation Kit at Tie-in Point:

Insulation Kit at Wellsite:

Cathodic Protection required from _____

Annual Pipeline Review / Assessment to be

completed by _____

☐ Yes

☐ Yes

☐ Yes

☐ Yes

☐ No

☐ No

☐ No

☐ No

Email form to: 3rdpartyrequests@karveenergy.com