



COMMERCIAL STORAGE ACTIVITY REPORT – No. 1
(Schemes approved prior to October 2002, Production month)

PART 1: IDENTIFICATION

PRODUCTION PERIOD (Yr & Month): _____

Injection Scheme ID		Op Name:	ID:
Injection Facility ID		Owner Name:	ID:
Meter Station Tie-Reproducing Facility ID			
Reproducing Facility ID's			
Reproducing Battery ID's			

PART 2: NATURAL GAS ACTIVITY

INITIAL FILING

AMENDING

Activity	10³M³	Heat Content - GJ's
Balance – Inventory Opening		
Volumes Injected - Net		
Volumes Withdrawn – Gross		
Balance - Inventory Closing		

PART 3: CONTACT INFORMATION

Name: _____ **Telephone No:** _____ **Date:** _____

- **Balance – Inventory Opening Must Be Equal To Previous Month's Balance – Inventory Closing**
- **Forms are required to be submitted by the 11th workday or the 15th of each month, whichever is first to fall on a workday**
- **Forms can be faxed to (780) 422 8732 or mailed to Gas Royalty Calculation, 8th Floor, North Tower, Petroleum Plaza, 9945 – 108 Street, Edmonton, AB, T5K 2G6, Attention: Royalty Programs**
- **Telephone inquiries may be directed to the Team Lead, Royalty Programs**