

PART 1: CLIENT INFORMATION

1.1 _____ 1.2 _____
ASSIGNEE CLIENT ID ASSIGNEE CLIENT NAME

1.3 DATE PREPARED _____
YR. MO. DY.

1.4 _____ 1.5 _____
CONTACT PERSON TELEPHONE

PART 2: TERMINATION OF REASSIGNMENT OF VOLUMES

2.1 _____ 2.2 _____
ASSIGNOR CLIENT ID ASSIGNOR CLIENT NAME

2.3 STREAM ID _____
PROV TYPE CODE

2.4 ERCB FACILITY ID _____ 2.5 PRODUCTS _____
PROV TYPE CODE Per Original RMF2

2.6 EFFECTIVE DATE _____
YR. MO. DY.

PART 3: ALLOCATION PERCENTAGE

3.1 PERCENTAGE OF ORIGINAL ALLOCATION FROM RMF2 _____

3.2 PERCENTAGE OF ORIGINAL ALLOCATION TO REVERT TO ASSIGNOR 100.00000

PART 4: CERTIFICATION

COMPLETION OF THIS FORM ACKNOWLEDGES ROYALTY RESPONSIBILITY WILL BE TRANSFERRED FROM THE ASSIGNEE TO THE ASSIGNOR. ASSIGNOR HAS BEEN CONTACTED AND INFORMED THAT REASSIGNMENT OF ROYALTY RESPONSIBILITY HAS BEEN TERMINATED AS OF EFFECTIVE DATE.

4.1 _____ 4.2 _____
AUTHORIZED SIGNATURE DATE

4.3 _____ 4.4 _____
NAME OF AUTHORIZED PERSON TITLE OF AUTHORIZED PERSON

4.5 _____ 4.6 _____
ASSIGNOR CONTACT NAME ASSIGNOR CONTACT TELEPHONE