



FORM 1

FINAL REPORT

Geophysical Licensee _____

Geophysical Licence No. _____

Address _____

Program Commencement Date _____ Completion Date _____

Permittee _____

Geophysical Permit No. _____ Party No. _____

Address _____

Recording Commencement Date _____

Recording Completion Date _____ Model _____

Amplifier Make _____

No. of Traces: 24 _____ 48 _____ other _____

Source Internal _____ Receiver Internal _____

Source Type _____

No. of kilometres of Subsurface Coverage _____

Credit (in dollars) Applied For _____

I, the undersigned, certify that I am qualified to report on this program and have knowledge of and attest to the accuracy of the above report.

Signature of geologist, registered land surveyor or
registered professional engineer

Date

(Note: Must be accompanied by a map or maps on a scale of not smaller than 1:50,000 showing location of data recorded. A final report must be completed for each program.)