

WATER LICENCE APPLICATION FORM

Application for: (check one)

☐ New ☒ Amendment ☐ Renewal ☐ Assignment

LICENCE NO:

(for NWB use only)

1. NAME AND MAILING ADDRESS OF APPLICANT/LICENSEE

Committee Bay Resources Ltd.
Suite 220, 9797-45th Ave.
Edmonton, Alberta, Canada
T6E 5V8

Phone: (780)-437-6624

Fax: (780)-439-7308

e-mail: alanv@committeebay.com

2. ADDRESS OF CORPORATE OFFICE IN CANADA (if applicable)

Phone _____

Fax: _____

e-mail: _____

3. LOCATION OF UNDERTAKING (describe and attach a topographical map, indicating the main components of the undertaking)

Committee Bay area, Nunavut (please see attached maps)

Latitude: 66°00'00" Longitude: 95°00'00" NTS Map No. 55 I,J, K,N, P,O Scale 1:250,000

4. DESCRIPTION OF UNDERTAKING (attach plans and drawings)

1. Domestic water supply for a 25-35 person camp by way of a non-submersible pump on or beside a nearby lake to provide approximately 2-4m³ per day during peak period of March 1 to Sept 30, 2008. Plus domestic water supply for a 15 person camp (Bullion, Ingot, Crater) by way of a land based pump on or beside a nearby lake to provide approximately 2m³ per day during peak period of March 1 to Sept 30, 2006.

2. Water for diamond drilling in the area of the exploration program outlined on the attached 1:250,000 NTS maps. – New drill sites of 2008 season.

5. TYPE OF UNDERTAKING (A supplementary questionnaire must be submitted with the application for undertakings listed in "bold")

☐ Industrial

☐ **Mine Development**

☐ **Advanced Exploration**

☒ **Exploratory Drilling**

☐ **Remote/Tourism Camps**

☐ **Municipal**

☐ Power

☒ Other (describe): Exploration Camps

6. WATER USE

☒ To obtain water

☐ To modify the bed or bank of a watercourse

☐ To alter the flow of , or store, water

☐ To cross a watercourse

☐ To divert a watercourse

☐ Flood control

☐ Other (describe): _____

7.	<p>QUANTITY OF WATER INVOLVED (litres per second, litres per day or cubic metres per year, including both quantity to be used and quality to be returned to source)</p> <p>2-4m³ per day per active camp (during peak period of March 1 – Sept 30); two camps only active at one time for a max of 6m³ per day</p> <p>7-8 gallons per minute for one drill (while drilling only), three to four drills likely active at one time for a max of 28-32 gallons per minute when drilling. Accounting for recirculation of water and hours of active drilling per day, a max of 30m³ per day will be used, per drill. We estimate 180 drill days in the 2008 exploration season.</p>									
8.	<p>WASTE (for each type of waste describe: composition, quantity, methods of treatment and disposal, etc.) See attached environmental procedures plan</p> <table style="width: 100%; border: none;"> <tr> <td><input checked="" type="checkbox"/> Sewage</td> <td><input checked="" type="checkbox"/> Waste oil</td> </tr> <tr> <td><input checked="" type="checkbox"/> Solid Waste</td> <td><input checked="" type="checkbox"/> Greywater</td> </tr> <tr> <td><input type="checkbox"/> Hazardous</td> <td><input type="checkbox"/> Sludge</td> </tr> <tr> <td><input checked="" type="checkbox"/> Bulky Items/Scrap Metal</td> <td><input checked="" type="checkbox"/> Other (describe) <u>drilling water</u></td> </tr> </table>	<input checked="" type="checkbox"/> Sewage	<input checked="" type="checkbox"/> Waste oil	<input checked="" type="checkbox"/> Solid Waste	<input checked="" type="checkbox"/> Greywater	<input type="checkbox"/> Hazardous	<input type="checkbox"/> Sludge	<input checked="" type="checkbox"/> Bulky Items/Scrap Metal	<input checked="" type="checkbox"/> Other (describe) <u>drilling water</u>	
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9.	<p>PERSONS OR PROPERTIES AFFECTED BY THIS UNDERTAKING (give name, mailing address and location; attach if necessary)</p> <p>Land Use Permit</p> <table style="width: 100%; border: none;"> <tr> <td>DIAND</td> <td><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td> <td>If no, date expected _____</td> </tr> <tr> <td>Regional Inuit Association</td> <td><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td> <td>If no, date expected _____</td> </tr> <tr> <td>Commissioner</td> <td><input type="checkbox"/> Yes <input type="checkbox"/> No</td> <td>If no, date expected _____</td> </tr> </table>	DIAND	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If no, date expected _____	Regional Inuit Association	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If no, date expected _____	Commissioner	<input type="checkbox"/> Yes <input type="checkbox"/> No	If no, date expected _____
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10.	<p>PREDICTED ENVIRONMENTAL IMPACTS OF UNDERTAKING AND PROPOSED MITIGATION MEASURES (direct, indirect, cumulative impacts, etc.)</p> <table style="width: 100%; border: none;"> <tr> <td>NIRB Screening</td> <td><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td> <td>If no, date expected _____</td> </tr> </table>	NIRB Screening	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If no, date expected _____						
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11.	<p>CONTRACTORS AND SUB-CONTRACTORS (name, address and functions)</p> <p>Connors Drilling, 2007 West Trans Canada Hwy, Kamloops, B.C. V1S 1A7 Ph:250-374-3366</p>									
12.	<p>STUDIES UNDERTAKEN TO DATE (list and attach copies of studies, reports, research, etc.)</p> <p>Water quality tests were performed during the 2007 program to test for colliform bacteria, none was detected. See Environmental procedures plan attached.</p>									

13. THE FOLLOWING DOCUMENTS MUST BE INCLUDED WITH THE APPLICATION FOR THE REGULATORY PROCESS TO BEGIN

Supplementary Questionnaire (where applicable: see section 5) ☒ Yes ☐ No If no, date expected _____

Inuktitut/English Summary of Project ☒ Yes ☐ No If no, date expected _____

Application fee \$30.00 (c/o Receiver General for Canada) ☒ Yes ☐ No If no, date expected _____

14. PROPOSED TIME SCHEDULE

☐ Annual (or) ☒ Multi Year

Start Date: March 1, 2007 Completion Date: September, 2010

Alan Vosburgh

Name (Print)

Logistics Manager

Title (Print)

Signature

Date

Dec 12/07

For Nunavut Water Board use only

APPLICATION FEE

Amount: \$ _____ Receipt No.: _____

WATER USE DEPOSIT Amount: \$ _____ Receipt No.: _____