

2. LICENSEE REPRESENTATIVE CONTACT INFORMATION – If different from Block 1.

Name: Boyd Werner

Address: Box 820 Yellowknife NT X1A 2N6

Phone: 867 446 2654

Fax: N/A

e-mail: boyd.w@batnurstinlet.com

(Attach authorization letter.)

3. NAME OF PROJECT

Is the name of the project the same as that considered in the existing water licence?

X Yes No

Indicate the name of the project including the name of the location: Batnurst Inlet Lodge Ltd

4. LOCATION OF UNDERTAKING

Is the location of the undertaking the same as that considered in the existing water licence?

X Yes No

Project Extents

NW: Latitude: (° ' " N)

Longitude: (° ' " W)

NE: Latitude: (° ' " N)

Longitude: (° ' " W)

SE: Latitude: (° ' " N)

Longitude: (° ' " W)

SW: Latitude: (° ' " N)

Longitude: (° ' " W)

Camp Location(s)

Latitude: (66 ° 50' 23.95" N)

Longitude: (108 ° 01' 59.60" W)