

# FORM 2 - CO<sub>2</sub> TAX TAX ASSESSMENT PER PRODUCT

Half-year period:

Field/install:

Norwegian share:

Product:

| Month | Fuel<br>(Sm <sup>3</sup> /1) | Flare<br>(Sm <sup>3</sup> /1) | Vent<br>(Sm <sup>3</sup> /1) | Total<br>(Sm <sup>3</sup> /1) | Tax rate | Tax amount<br>(NOK) |
|-------|------------------------------|-------------------------------|------------------------------|-------------------------------|----------|---------------------|
| 1     |                              |                               |                              |                               |          |                     |
| 2     |                              |                               |                              |                               |          |                     |
| 3     |                              |                               |                              |                               |          |                     |
| 4     |                              |                               |                              |                               |          |                     |
| 5     |                              |                               |                              |                               |          |                     |
| 6     |                              |                               |                              |                               |          |                     |
| Sum   |                              |                               |                              |                               |          |                     |
|       |                              |                               |                              | Prior payment(s)              |          |                     |
|       |                              |                               |                              | Difference                    |          |                     |
|       |                              |                               |                              | Interest                      |          |                     |
|       |                              |                               |                              | Total                         |          |                     |

Date/sign: \_\_\_\_\_

Revised FORM 2 to be completed when correcting prior accounts.  
Specification of accrued interest to be enclosed.