Form 45-106F1 Report of Exempt Distribution (Non-investment fund issuer)

ITEM 1 – REPORT TYPE				
✓ New report				
Amended report If amended, provide	e Submission ID of report that is	being amended:	(Examp	le: EDR1234567890-123)
ITEM 2 – PARTY CERTIFYING T	HE REPORT			
Indicate the party certifying the report (see National Instrument 81-106 Investment Fund) Issuer (Other than an investment fund) Underwriter				section 1.1 of
ITEM 3 – ISSUER NAME AND O	THER IDENTIFIERS			
			. ,	
Provide the following information about the Full legal name	ie issuer, or if the issuer is an in	ivestment fund, about the f	rund.	
CRESTVIEW EXPLORATION INC.				
Previous full legal name If the issuer's na	me changed in the last 12 mont	hs, provide most recent pr	evious legal name.	
N/A				
Website (if applicable)				
www.crestviewexploration.com				
If the issuer has a legal entity identifier, p	rovide below. Refer to Part B of	the instructions for the de	rinition of "legal entity identifie	r".
Legal entity identifier				
Did two or more co-issuers distribute a significant control of the	agle cognitive. I No Ves			
		(-) -f (b((-))	- th th th	h
If two or more issuers distributed a single of Full legal name(s) of co-issuer(s)	security, provide the full legal na	ame(s) of the co-issuer(s) o	other than the issuer named a	bove.
ITEM 4 – UNDERWRITER INFO	RMATION			
If an underwriter is completing the report,	provide the underwriter's full leg	al name and firm NRD nur	nber.	
Full legal name				
Does the Underwriter's Firm have an NRD No Yes	Number? Firm NRD nu	umber		
If the underwriter does not have a firm NF	RD number, provide the head off	ice contact information of t	he underwriter.	
Street address	Municipality	Province/State	Postal/ZIP code	
		\		
Country	Telephone number	Website (if applicable)		

ITEM 5 – ISSUER INFORMATION					
a) Primary industry					
	Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity.				
NAICS industry code					
212220					
	licate the stage of operations. This does not apply to issuers t at best describes the issuer's stage of operations. ction	hat provide services to issuers operating in			
	all or substantially all of its assets in any of the following? If ye cial/business debt Consumer debt Private companies	· · ·			
b) Number of employees					
✓0 - 49	or more				
c) SEDAR profile number					
Does the issuer have a <u>SEDAR</u> profile? ☐ No ☑ Yes	screenshot of the	DAR profile is a "private" profile, please provide a e issuer's profile by e-mail to ngs@osc.gov.on.ca			
d) Head office address	If the issuer does not h	nave a SEDAR profile, complete Item 5(d) – (h).			
Street address	Municipality Province/State	Postal/ZIP code			
Country	Telephone number				
e) Date of formation and financial year	r-end				
Date of formation	Financial year-end				
f) Reporting issuer status					
Is the issuer a reporting issuer in any juriso ☐No ☐ Yes	diction of Canada?				
If yes, select the jurisdictions of Canada in					
LAII LAB LBC LMB	NB NL NT				
NS NU ON PE	∐QC ∐SK ∐YT				
g) Public listing status					
Does the issuer have a CUSIP number?	CUSIP number (provide first 6 digits only)				
	name of the exchange on which the issuer's equity securities ps, for example, an automated trading system.	rimarily trade. Provide only the name of an			
Exchange name: Not Applicable Toro	onto Stock Exchange TSX Venture Exchange	Canadian Securities Exchange			
☐ Aequitas Neo Exchange ☐ Aust	tralian Securities Exchange 🗌 Deutsche Boerse	Euronext			
London Stock Exchange	daq New York Stock Exchange	Shanghai Stock Exchange			
Shenzhen Stock Exchange Stoc	ck Exchange Of Hong Kong 🗌 Tokyo Stock Exchange	OTHER			
If other, describe:					
h) Size of issuer's assets					
financial statements for its first financial ye	d on its most recently available annual financial statements (Cear, provide the size of the issuer's assets at the distribution e				
	I to under \$25M				

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about purchasers resident in that jurisdiction of Canada only. Do not include in Item 7 securities issued as payment of commissions or finder's fees in connection with the distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report.

distribution, which must be disclosed in Item 8. The information provided in Item 7 must reconcile with the information provided in Schedule 1 of the report
a) Currency
Select the currency or currencies in which the distribution was made. All dollar amounts provided in the report must be in Canadian dollars. Canadian dollar US dollar Euro Other (describe):
b) Distribution date(s)

State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distribution date as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for the distribution period covered by the report.

 Start Date
 End Date

 2022-06-10
 2022-06-10

c) Detailed purchaser information

Complete Schedule 1 of this form for each purchaser and attach the schedule to the completed report.

061622 CRS 45106F1 Schedule 1 Final.xlsx - 88 KB

d) Types of securities distributed

Provide the following information for all distributions reported on a per security basis. Refer to Part A(12) of the Instructions for how to indicate the security code. If providing the CUSIP number, indicate the full 9-digit CUSIP number assigned to the security being distributed.

				Canadian \$	
Security code	CUSIP number	Number of securities	Single or lowest price	Highest price	Total amount
UBS	22630V103	1,176,667.0000	0.1500		176,500.0500
Description of security: 1 Unit Common share and 1 Warrant					

e) Details of rights and convertible/exchangeable securities

If any rights (e.g. warrants, options) were distributed, provide the exercise price and expiry date for each right. If any convertible/exchangeable securities were distributed, provide the conversion ratio and describe any other terms for each convertible/exchangeable security.

Not Applicable

Convertible / exchangeable	Underlying security	Exercis (Canad	•	Expiry date (YYYY-MM-DD)	Conversion ratio
security code	code	Lowest	Highest	(TTTT-WWW-DD)	
WNT	CMS	0.3000		2024-06-10	1 to 1
Describe other terms: 1 warrant to 1 common share (if applicable)					

f) Summary of the distribution by jurisdiction and exemption

State the total dollar amount of securities distributed and the number of purchasers for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides and for each exemption relied on in Canada for that distribution. However, if an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include distributions to purchasers resident in that jurisdiction of Canada only.

This table requires a separate line item for (i) each jurisdiction where a purchaser resides (ii) each exemption relied on in the jurisdiction where a purchaser resides, if a purchaser resides in a jurisdiction of Canada, and (iii) each exemption relied on in Canada, if a purchaser resides in a foreign jurisdiction. For jurisdictions within of Canada, state the province or territory, otherwise state country.

Province or country	Exemption relied on	No. of unique purchasers ^{2a}	Total amount (Canadian \$)
Alberta	NI 45-106 2.5 [Family, friends and business associates]	1	15,000.0000
British Columbia	NI 45-106 2.5 [Family, friends and business associates]	3	9,000.1500
Quebec	NI 45-106 2.3 [Accredited investor]	1	52,500.0000
Virgin Islands, British	NI 45-106 2.3 [Accredited investor]	1	99,999.9000
	Total dollar amount of securit	ies distributed	176,500.0500
	Total number of unique purchasers ^{2b}	6	

^{2a}In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{2b}In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

√ Not Applicable

	Description	Date of document or other material	Previously filed with or delivered to regulator?	,	Filename
1.			\square Y \square N		

ITEM 8 - COMPENSATIO	N INFORMATIO	N				
Provide information for each pers connection with the distribution.	•	•				
Indicate whether any compensate ☐ No ☑ Yes	ion was paid, or will	be paid, in connection	n with the dis	stribution.		
PERSON 1				i		
a) Name of person compensa	ted and registration	n status				
Indicate whether the person com ☐ No ☑ Yes	pensated is a regist	rant.				
If the person compensated is an Family name	•	he full legal name of the name		dary given names		
K the manual and in materials		de de fellessia sinferm				
If the person compensated is not Full legal name of non-individual	an individual, provi	ae the following inforn	nation.	Firm NRD number (if	applicable)	
Glores Securities Inc. 70180						
Indicate whether the person com	pensated facilitated	the distribution throug	gh a funding	portal or an internet-ba	nsed portal.	
b) Business contact information	on					
If a firm NRD number is not prov	rided in Item 8(a), pi	rovide the business co	ontact inform	ation of the person bei	ng compensated.	
Street address	Municip	ality	Province/Sta	ate	Postal/ZIP code	1
Country	Telepho	ne number	Email addre	SS]
]
c) Relationship to issuer or in	vestment fund ma	nager				
Indicate the person's relationship Part B(2) of the Instructions and Connected with the issuer or i	the meaning of "cor	ntrol" in section 1.4 of	NI 45-106 fo		pleting this section	n.
Insider of the issuer (other tha	ın an investment fun	d)	✓ None	e of the above		
Director or officer of the invest	ment fund or investr	nent fund manager				
d) Compensation details						
Provide details of all compensati in Canadian dollars. Include cas for services incidental to the dist about, or report on, internal alloc	h commissions, sec tribution, such as cle	urities-based compen erical, printing, legal o	nsation, gifts, or accounting	discounts or other con services. An issuer is	npensation. Do no not required to as	ot report payments sk for details
Cash commissions paid	7,000.0000					
Value of all securities distributed as	0.0000	Security code1 WN	Γ Se	curity code2	Security code	э3
compensation 4		Describe terms of wa				
		2024	e 1 common	share at a price of 0.30	u per unit. warran	t expires June 10,
Other compensation ⁵		Describe				
Total compensation Paid	7,000.0000					
Check box if the person will o	or may receive any o	deferred compensation	n (describe th	ne terms below)		

to acquire additional securities of ⁵ Do not include deferred compens	the issuer.	or an socurrics distr		pendation, moldaling o	phone, warrants or other ne	prio exercisable
PERSON 2						
a) Name of person compensate	ed and registration	on status				
Indicate whether the person comp ☐ No ✓ Yes	ensated is a regis	trant.				
If the person compensated is an in Family name	•	the full legal name of en name		dary given names		
If the person compensated is not a	an individual, provi	ide the following info	rmation.			
Full legal name of non-individual				Firm NRD number (if	applicable)	
Echelon Wealth Partners Inc.				32420		
Indicate whether the person comp ✓ No ☐ Yes	ensated facilitated	I the distribution thro	ugh a funding _l	portal or an internet-ba	ased portal.	
b) Business contact informatio	n					
If a firm NRD number is not provid	ded in Item 8(a), p	rovide the business (contact inform	ation of the person bei	ing compensated.	
Street address	Municip	ality	Province/Sta	ate	Postal/ZIP code	
Country	Telepho	none number Email address				
c) Relationship to issuer or inv	restment fund ma	nager				
Part B(2) of the Instructions and to Connected with the issuer or in Insider of the issuer (other than Director or officer of the investment of the investme	vestment fund ma	nager nd)	Emp		pleting this section. nvestment fund manager	
· ·	., . ,			0();		
Provide details of all compensatio in Canadian dollars. Include cash for services incidental to the distriabout, or report on, internal alloca	commissions, sec bution, such as cl	curities-based compe erical, printing, legal	ensation, gifts, or accounting	discounts or other cor services. An issuer is	mpensation. Do not report p not required to ask for deta	payments ails
Cash commissions paid	1,050.0000					
Value of all securities distributed as	<u> </u>	Security code1 Describe terms of v		curity code2	Security code3	
compensation ⁴						
Other compensation ⁵		Describe				
Total compensation Paid	1,050.0000					
Check box if the person will or	may receive any	deferred compensation	on (describe th	ne terms below)		
4 Dravida the	// nanowelli " ' ' '	utad as a series of	an avelue!	untings are seen at	an vinita acceptant to	using a statistical transfer
⁴ Provide the aggregate value of a securities of the issuer. Indicate the to acquire additional securities of	ne security codes					

 $^{5}\,\mathrm{Do}$ not include deferred compensation.

⁴ Provide the aggregate value of all securities distributed as compensation, excluding options, warrants or other rights exercisable to acquire additional

ITEM 9 – D	IRECTORS, EXECUTIVE OFFICERS	S AND PROMOTERS OF 1	THE ISSUER	
Indicate whet	her the issuer is any of the following (select the	one that applies - if more than on	e applies, select only one).	
Reporting	issuer in any jurisdiction of Canada			
Foreign p	ublic issuer			
•	ned subsidiary of a reporting issuer in any juris	diction of Canada ⁶		
Wholly ow	ned subsidiary of a foreign public issuer ⁶			
	ame of foreign public issuer			
	tributing only eligible foreign securities and the	•	•	
⁶ An issue securities ⁷ Check th	uer is at least one of the above, do not com r is a wholly owned subsidiary of a reporting is that are required by law to be owned by its dire his box if it applies to the current distribution eve efer to the definitions of "eligible foreign securit	suer or a foreign public issuer if all ectors, are beneficially owned by t ren if the issuer made previous dis	Il of the issuer's outstanding voting se the reporting issuer or the foreign pub stributions of other types of securities	olic issuer, respectively.
☐ If the issu	uer is none of the above, check this box an	d complete Item 9(a) – (c).		
a) Directors	executive officers and promoters of the iss	suer		
	llowing information for each director, executive wise state the country. For "Relationship to iss			he province or
Individual?	Organization or company name	Family name First given name Secondary given name	Business location of non-individual or residential jurisdiction of individual	Relationship to issuer (select all that apply)
YN				□D □O □P
b) Promoter	information			
	r listed above is not an individual, provide the f a, state the province or territory, otherwise state			
	Organization or company name	Family name First given name Secondary given name	Residential jurisdiction of individual	Relationship to promoter (select one or both if applicable)
				□ D □ O
c) Residenti	al address of each individual			
	hedule 2 of this form providing the full resid completed report. Schedule 2 also requires			

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exempt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete

to the extent required, complete.			
Name of issuer/underwriter/agent	Crestview Exploration Inc.		
Full legal name - Family name	First given n	ame	Secondary given names
JOUBIN	Gisele		
Title		Telephone number	Email address
CFO		7802270593	gisele@crestviewexploration.com
Signature Gisele Joubin		Date 2022-06-16	

ITEM 11 - CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.					
✓ Same as individual certifying the report					
Full legal name - Family name	First given name	Secondary given names	Title		
Name of company		Telephone number	Email address		

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information pertaining to the individual as set out in Schedule 1 or 2, that this information is being collected by the securities regulatory authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.

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Submission ID	Date