



Shell Exploration and  
Production Company

**Shell Rocky Mountain Journey Approval Form**  
(Colorado, New Mexico, & Wyoming)

**PART A - EMPLOYEE**

**TRIP DESCRIPTION**

|  |                          |                         |
|--|--------------------------|-------------------------|
| <b>Employee's Name:</b>                                    | <b>Department:</b>       | <b>Origin:</b>          |
| <b>Destination:</b>  | <b>Departure Date:</b>   | <b>Return Date:</b>     |
| <b>Business Purpose:</b>                                   | <b>Vehicle Type:</b>     | <b>List Passengers:</b> |
| <div style="border: 1px solid black; height: 40px;"></div> | <b>Four-Wheel Drive?</b> |                         |
|  | Yes      No              |                         |

**ROUTE**

|   |              |                              |  |                        |
|---|--------------|------------------------------|--|------------------------|
| <b>Distance to Destination:</b>                                   | <b>Miles</b> | <b>Expected Travel Time:</b> | <b>Hrs</b>   | <b>Departure Time:</b> |
| <b>Route Description</b> (include planned stops/overnight stays): |              |                              | <b>Expected Arrival Time at Destination:</b>         |                        |
| <div style="border: 1px solid black; height: 80px;"></div>        |              |                              | <b>Percent trip requiring night driving:</b> _____ % |                        |
| <b>Expected Weather</b>   |              |                              |  |                        |
| <b>Forecasted Temp:</b>   |              | <b>DRY</b>                   | <b>DUST</b>  |                        |
|   |              | <b>RAIN</b>                  | <b>WIND</b>  |                        |
|   |              | <b>SNOW/ICE</b>              | <b>FOG</b>   |                        |

**DRIVER PREPAREDNESS**

| <b>Expected total duty hrs upon arrival at destination:</b>       |             |   |               |  |                            |  |                               |  |                           |  |
|---|-------------|---|---------------|--|----------------------------|--|-------------------------------|--|---------------------------|--|
| <b>Defensive driver training complete?</b>                        | Yes      No | <table border="0"> <tr> <th align="center" colspan="2">Communication</th> </tr> <tr> <td><b>Driver cell number:</b></td> <td></td> </tr> <tr> <td><b>Number at destination:</b></td> <td></td> </tr> <tr> <td><b>Emergency contact:</b></td> <td></td> </tr> </table> | Communication |  | <b>Driver cell number:</b> |  | <b>Number at destination:</b> |  | <b>Emergency contact:</b> |  |
| Communication   |             |   |               |  |                            |  |                               |  |                           |  |
| <b>Driver cell number:</b>  |             |   |               |  |                            |  |                               |  |                           |  |
| <b>Number at destination:</b>                                     |             |   |               |  |                            |  |                               |  |                           |  |
| <b>Emergency contact:</b>   |             |   |               |  |                            |  |                               |  |                           |  |
| <b>Winter driving &amp; wildlife awareness material reviewed?</b> | Yes      No |   |               |  |                            |  |                               |  |                           |  |
| <b>Has a pre-trip vehicle inspection been completed?</b>          | Yes      No |   |               |  |                            |  |                               |  |                           |  |
| <b>Is vehicle equipped with a monitoring system (IVMS)?</b>       | Yes      No |   |               |  |                            |  |                               |  |                           |  |

\*\*Continuous Duty Hours + Driving Hours not to exceed 14 Hours.

\*\*The use of communication devices while driving is strictly prohibited.

Part B - to be completed by authorizing Manager or Supervisor

**PART B - SUPERVISOR**

**JOURNEY REVIEW**

The purpose of this planning tool is to ensure that adequate consideration is given to the necessity of the journey and that the employee is adequately prepared for the journey.

|  |             |
|--|-------------|
| <b>If night driving is required, is there an alternative day or time an employee can travel to eliminate night driving but still meet the business need?</b> | Yes      No |
| <b>Do you find the driving hours for this journey to be acceptable?</b>  | Yes      No |
| <b>Have you reviewed this plan with the employee making the journey?</b>   | Yes      No |
| <b>Do you approve this journey?</b>  | Yes      No |

Authorizing Supervisor/Manager

Authorizing Supervisor/Manager Signature

Date

\*\* Authorizing managers are responsible for confirming driver arrived safely at destination.