

SCHEDULE "E"

**NOTICE OF DISPUTE OF REVISION OR DISALLOWANCE OF THE CLAIMANT
(INCLUDING A CLAIMANT WITH A RESTRUCTURING PERIOD CLAIMS) LISTED
HEREIN**

IN THE MATTER OF THE CCAA PROCEEDINGS OF QUICKSILVER RESOURCES CANADA INC., 0942065 B.C. LTD. AND 0942069 B.C. LTD. collectively, the "APPLICANTS", and each, an "APPLICANT")

By order of the Court of Queen's Bench of Alberta (the "**Court**") dated May 26, 2016 (as may be amended, restated or supplemented from time to time (the "**Claims Procedure Order**"), in the proceeding commenced by the Applicants under the *Companies' Creditors Arrangement Act*, R.S.C. 1985, c. C-36, as amended (the "**CCAA**"), the Applicants have been authorized to conduct a claims procedure (the "**Claims Procedure**"). A copy of the Claims Procedure Order, with all schedules, may be found on the Monitor's website at: <http://cfcanada.fticonsulting.com/QRCI> (the "**Monitor's Website**"). Capitalized terms used in this Notice of Dispute not otherwise defined in this letter shall have the meaning given to them in the Claims Procedure Order.

Name of Claimant: _____

Address: _____

Telephone Number: _____

Facsimile Number: _____

Email Address: _____

PLEASE TAKE NOTICE THAT, pursuant to the Claims Procedure Order, we hereby give you notice of our intention to dispute the Notice of Revision or Disallowance dated _____, 2016 issued by FTI Consulting, Inc., in its capacity as Court-appointed Monitor of the Applicants, in respect of our Claim. We accept/dispute the following portion(s) of our Claim as revised and/or disallowed in the said Notice of Revision or Disallowance:

Revised Claim as Accepted (\$CDN)	Revised Claim as Disputed (\$CDN)

Reason for the dispute (attach copies of any supporting documentation):

Address for Service of Notice of Dispute of Revision or Disallowance:

FTI Consulting, Inc.

Monitor of Quicksilver Resources Canada Inc., et al

Suite 720, 440 – 2nd Avenue S.W.

Calgary, Alberta T2P 5E9

Attention: Ms. Lindsay Shierman

Fax: 403-232-6116

Phone: 403-454-6036

Email lindsay.shierman@fticonsulting.com

THIS FORM AND ANY REQUIRED SUPPORTING DOCUMENTATION MUST BE RETURNED TO THE MONITOR BY REGISTERED MAIL, PERSONAL SERVICE, EMAIL (IN PDF FORMAT), FACSIMILE OR COURIER TO THE ADDRESS INDICATED ABOVE AND MUST BE ACTUALLY RECEIVED BY THE MONITOR BY 5:00 P.M. (CALGARY TIME) ON THE DAY WHICH IS FIFTEEN CALENDAR DAYS AFTER THE DATE ON WHICH THE NOTICE OF REVISION OR DISALLOWANCE IS ACTUALLY RECEIVED BY YOU.

DATED this ____ day of _____, 2016

Witness

Per: _____

Name of Claimant/Restructuring Period Claimant:

If Claimant/Restructuring Period Claimant is other than an individual, print name and title of authorized signatory

Name: _____

Title: _____