Application for Permit to Modify (APM)

Lease P00300 **Area** LB **Block** 6438 **Well Name** A028 **ST** **BP** **Type** Development
Application Status Approved **Operator** 03126 Beta Operating Company, LLC

Pay.gov Amount: $125.00 **Agency Tracking ID:** EWL-APM-190108 **Pay.gov Tracking ID:** 25VDEBLP

General Information

API 043122004700 **Approval Dt** 08-DEC-2016 **Approved By** John Kaiser
Submitted Dt 06-DEC-2016 **Well Status** Completed **Water Depth** 265
Surface Lease P00300 **Area** LB **Block** 6438

Approval Comments
COAs:
Notify the Permitting Section at least 24 hours in advance of beginning these approved operations and of any required BOP tests.

Correction Narrative

Permit Primary Type Workover
Permit Subtype(s)
Change Tubing

Operation Description
Pull well to investigate potential hole/damage in tubing. Replace tubing if needed.

Procedural Narrative
Pull tubing and check for holes/damage in tubing. Replace tubing if necessary.

Subsurface Safety Valve
Type Installed SCSSV
Feet below Mudline 250
Maximum Anticipated Surface Pressure (psi) 1400
Shut-In Tubing Pressure (psi)

Rig Information

Name	Id	Type	ABS Date	Coast Guard Date
BETA RIG #1	36007	PLATFORM	01-JAN-2014	01-JAN-2014

Blowout Preventers

Preventer	Size	Working Pressure	--- Test Pressure --- Low	High
Annular		5000	250	2350
Rams	2x5"	5000	250	2350

Date Commencing Work (mm/dd/yyyy) 09-DEC-2016
Estimated duration of the operation (days) 3

Verbal Approval Information

Official	Date (mm/dd/yyyy)

Questions

Number	Question	Response	Response Text
1	Is H2S present in the well? If yes, then comment on the inclusion of a Contingency Plan for this operation.	N/A	

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Questions

Number	Question	Response	Response Text
2	Is this proposed operation the only lease holding activity for the subject lease? If yes, then comment.	NO	
3	Will all wells in the well bay and related production equipment be shut-in when moving on to or off of an offshore platform, or from well to well on the platform? If not, please explain.	N/A	
4	Are you downhole commingling two or more reservoirs?	NO	
5	Will the completed interval be within 500 feet of a lease or unit boundary line? If yes, then comment.	NO	
6	For permanent abandonment, will casings be cut 15 feet below the mudline? If no, then comment.	N/A	
7	Will the proposed operation be covered by an EPA Discharge Permit? (Please provide permit number in comments for this question)	N/A	

ATTACHMENTS

File Type	File Description
pdf	<enter your description here>Ellen BOP data book part 3
pdf	A-28 HIT Repair Program 12-6-2016
pdf	Ellen BOP Shear Data

CONTACTS

Name	Cory Klett
Company	Beta Operating Company, LLC
Phone Number	5626281543
E-mail Address	cklett@memorialpp.com
Contact Description	Engineer

CERTIFICATION: I certify that information submitted is complete and accurate to the best of my knowledge. I understand that making a false statement may subject me to c

Name and Title: Cory Klett, Drilling Engineer

Date: 06-DEC-2016

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PAPERWORK REDUCTION ACT OF 1995 (PRA) STATEMENT: The PRA (44 U.S.C. 3501 et seq. Requires us to inform you that we collect this information to obtain knowledge of equipment and procedures to be used in drilling operations. MMS uses the information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operation. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.196. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 11/4 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, N.W., Washington, DC 20240.