Company:

Bureau of Safety and Environmental Enforcement (BSEE)

Name of Hurricane/Tropical Storm:

HURRICANE AND TROPICAL STORM EVACUATION AND PRODUCTION CURTAILMENT STATISTICS GULF OF MEXICO OCS REGION (GOMR)

SEND COMPLETED FORM VIA E-MAIL OR TELEFAX BEFORE 11:00 A.M. DAILY DURING THE PERIOD OF EVACUATION AND SHUT-IN TO:

E-MAIL: EVACSTATS@BSEE.gov

FAX: GOMR (Primary) - (504) 736-5796

GOMR (Alternate) - (504) 736-2426

BSEE Headquarters (if GOMR office is closed) - (703) 787-1093

Contact:

elephone Number:		Date:	Time:			
EVACUAT	TION STA	TISTICS B	SY GOMR	DISTRIC	T OFFICE	
TYPE OF FACILITY	Lake Jackson	Lake Charles	Lafayette	Houma	New Orleans	TOTAL
No. of platforms evacuated						
No. of drilling rigs evacuated						
No. of platforms <u>not</u> evacuated						
No. of drilling rigs <u>not</u> evacuated						
PRODUCTION SH	IIIT-IN ST	CATISTICS	RY GOM	R DISTRI	CT OFFIC	TE.
TYPE OF PRODUCTION	Lake Jackson	Lake Charles	Lafayette	Houma	New Orleans	TOTAL
Oil (BOPD)						
Gas (MMSCFD)						
Paperwork Reduction Act of 1995 (PRA) Statement: The PRA (44 U.S.C. 3501 et seq.) requires us to inform you that BSEE collects this information to be informed when operations and production are disrupted due to hurricanes or natural disasters. BSEE uses this information to notify the Coast Guard in case of rescue needs and oil spills; to monitor when production is shut-in and when resumed; and to notify the news media and interested public entities. Responses are mandatory (43 U.S.C. 1331 et seq.). No proprietary information is collected. An agency may not conduct or sponsor, and you are 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 1 hour per response, including the time for reviewing instructions, gatherin and maintaining data, and completing and reviewing the form. You may direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Bureau of Safety and Environmental Enforcement, 381 Elden Street, Herndon, VA 20170.						
CERTIFICATION: I certify that the understand that making a false sta						edge. I
Name and Title: Date:						
BSEE Form BSEE-0132 (June/2	023 Supersede	s all previous editio	ons of this form wh	ich mav not be us	ed.) F	Page 1 of 1