

## Application for Permit to Modify (APM)

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| Lease P00166                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Area LA | Block 6660                         | Well Name A050 | ST 02                            | BP 00 | Type Development |
| Application Status Approved                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         | Operator 02531 DCOR, L.L.C.        |                |                                  |       |                  |
| Pay.gov<br>Amount:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |         | Agency<br>Tracking ID: 77344980397 |                | Pay.gov<br>Tracking ID: 2811SJ1P |       |                  |
| <b>General Information</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |         |                                    |                |                                  |       |                  |
| API 043112013502                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |         | Approval Dt 28-MAY-2026            |                | Approved By Bethram Ofole        |       |                  |
| Submitted Dt 19-MAY-2026                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |         | Well Status Cancelled              |                | Water Depth 154                  |       |                  |
| Surface Lease P00166                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |         | Area LA                            |                | Block 6660                       |       |                  |
| <b>Approval Comments</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |         |                                    |                |                                  |       |                  |
| Conditions of Approval<br>1)All operations must be conducted in accordance with the OCS Lands Act (OCSLA), the lease terms and stipulations, the regulations of 30 CFR Part 250, Notices to Lessees and Operators (NTLs), the approved (revised) Application for Permit to Modify (APM/RPM), and any written instructions or orders of the District Manager or their designee.<br>2)A copy of this permit (including all attachments) must be kept on location and made available to inspectors upon request during the permitted operation.<br>3)A revised PE certification is required if:<br>The plug type changes in any way, including changes in cement properties.<br>.Any plug's base setting depth (even those not required per §250.1715) changes by ±100' TVD.<br>.The pressure test changes on any plug.<br>.Less cement is to be pumped.<br>.More cement is to be pumped to isolate a hydrocarbon zone not anticipated in the original permit.<br>.A remedial cement job is required that was not included in the original permit.<br>.Any plug change that causes deviation from the §250.1715 table. You must have a PE certify these changes prior to performing the operations. A revised permit with the PE certification must be submitted to this office within 72 hours.<br>4)While conducting operations, you must have current OSFR coverage for the lease (if applicable). If the lease's OSFR coverage will expire during OCS operations, you must submit an RPM to include the updated OSFR coverage to BSEE prior to the expiration date.<br>5)If well pressures exceed the permitted MASP/SITP pressures:<br>The well control equipment in use must be tested to at least the new observed pressure plus 500 psi.<br>.The appropriate District must be immediately notified of these pressure changes.<br>.An RPM must be submitted to document the change.<br>.If utilizing wireline, the wireline lubricator must be tested to equal or greater than the new observed pressure.<br>6)High-pressure blind shear ram close capability must be available from all BOP control panels. Each panel must be clearly marked to indicate that the accumulator system's high-pressure side is required for closing and shearing the drill pipe with the blind-shear rams. If the high-pressure bypass selector valve is not available at all BOP control panels, the accumulator system must be always set to the high-pressure position, except during pressure and function testing.<br>7)In the event of BOP system failure or leak, you must immediately contact the District Office and receive approval from the District Manager prior to resuming operations. A revised permit will be required to document third-party verification that the BOP is fit for service and will operate under the conditions in which it will be used.<br>8)At the end of this operation, a tree or dry hole tree must be installed and tested for the purpose of monitoring all non-structural casing annuli that are tied back to the surface. |         |                                    |                |                                  |       |                  |

## Application for Permit to Modify (APM)

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| Lease P00166                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Area LA | Block 6660                  | Well Name A050 | ST 02            | BP 00 | Type Development |
| Application Status Approved                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |         | Operator 02531 DCOR, L.L.C. |                |                  |       |                  |
| <p>9) Notify the permitting section at least 72 hours prior to beginning the initial test to allow BSEE representative(s) the opportunity to witness the testing, in accordance with 30 CFR 250.737(d)(2)(ii). If BSEE representative(s) are unable to witness the testing, you must submit the initial test results to the permitting section within 72 hours after completion of the tests.</p> <p>10) Any casing or annuli that fail a pressure/bubble test must be reported and remediated.</p> <p>11) WARs are due no later than noon every Wednesday.</p> |         |                             |                |                  |       |                  |
| Correction Narrative                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |         |                             |                |                  |       |                  |
| Permit Primary Type Abandonment Of Well Bore                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |         |                             |                |                  |       |                  |
| Permit Subtype(s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |         |                             |                |                  |       |                  |
| Temporary Abandonment                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |         |                             |                |                  |       |                  |
| <input checked="" type="checkbox"/> Proposed or <input type="checkbox"/> Completed Work                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |         |                             |                |                  |       |                  |
| Operation Description                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |         |                             |                |                  |       |                  |
| TA w/ zonal isol plug, cmt eval log, add'l cement plugs across confining shales, possibly add'l cement in surface annulus, if possible 7" cut & pulled, if so a stub plug, and a surface plug.                                                                                                                                                                                                                                                                                                                                                                  |         |                             |                |                  |       |                  |
| Procedural Narrative                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |         |                             |                |                  |       |                  |
| For zonal isolation plug, if injectivity into the perfs is established, a 7" cement retainer will be utilized. Cement will be pumped through and on top of retainer. If no injectivity is established, a CIBP with cement on top may instead be utilized.                                                                                                                                                                                                                                                                                                       |         |                             |                |                  |       |                  |
| A cement evaluation log will be run in the 7" to assess the cement integrity, and evaluated to assess if the top section of 7" casing can be cut & pulled.                                                                                                                                                                                                                                                                                                                                                                                                      |         |                             |                |                  |       |                  |
| Cement will be pumped across confining layers (CLs) of shale.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |         |                             |                |                  |       |                  |
| Depending on the cement evaluation log, CL shales will be isolated by Options: 1) cement plug(s) inside the 7"; or 2) perforating 7", and cement squeezing the annulus across CL(s); or 3) section milling the 7" casing across CL(s), underreaming the interval, and installing an inflatable bridge plug and a cement plug; or 4) cutting and pulling 7" casing beneath the 13-3/8" shoe, underreaming the interval, and installing an inflatable bridge plug and a cement plug across a CL.                                                                  |         |                             |                |                  |       |                  |
| If the 7" was cut and pulled, a casing stub cement plug will be installed. If not, additional cement may be placed in the 7" x 13-3/8" annulus if necessary. Lastly a surface cement plug will be placed.                                                                                                                                                                                                                                                                                                                                                       |         |                             |                |                  |       |                  |
| Subsurface Safety Valve                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |         |                             |                |                  |       |                  |
| Type Installed N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |         |                             |                |                  |       |                  |
| Feet below Mudline                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |         |                             |                |                  |       |                  |
| Maximum Anticipated Surface Pressure (psi) 1100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |                             |                |                  |       |                  |
| Shut-In Tubing Pressure (psi) 0                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |                             |                |                  |       |                  |
| Maximum Anticipated Wellhead Pressure (psi) 100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |                             |                |                  |       |                  |
| Shut-In Wellhead Pressure (psi) 100                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |         |                             |                |                  |       |                  |
| Rig Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |         |                             |                |                  |       |                  |
| Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Id      | Type                        | ABS Date       | Coast Guard Date |       |                  |

**Application for Permit to Modify (APM)**

|                                                                                                           |                                                                                                                                                                                                                                 |                                    |                                         |              |              |                         |
|-----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|-----------------------------------------|--------------|--------------|-------------------------|
| <b>Lease</b> P00166                                                                                       | <b>Area</b> LA                                                                                                                                                                                                                  | <b>Block</b> 6660                  | <b>Well Name</b> A050                   | <b>ST</b> 02 | <b>BP</b> 00 | <b>Type</b> Development |
| <b>Application Status</b> Approved                                                                        |                                                                                                                                                                                                                                 | <b>Operator</b> 02531 DCOR, L.L.C. |                                         |              |              |                         |
| <div>* HYDRAULIC WORKOVER UNIT      47935      Hydraulic Workover      31-DEC-2049      31-DEC-2049</div> |                                                                                                                                                                                                                                 |                                    |                                         |              |              |                         |
| <b>Blowout Preventers</b>                                                                                 |                                                                                                                                                                                                                                 |                                    |                                         |              |              |                         |
|                                                                                                           |                                                                                                                                                                                                                                 |                                    | --- Test Pressure ---                   |              |              |                         |
| <b>Preventer</b>                                                                                          | <b>Size</b>                                                                                                                                                                                                                     | <b>Working Pressure</b>            | <b>Low</b>                              | <b>High</b>  |              |                         |
| Rams                                                                                                      | 13-5/8                                                                                                                                                                                                                          | 5000                               | 250                                     | 1600         |              |                         |
| Annular                                                                                                   |                                                                                                                                                                                                                                 | 5000                               | 250                                     | 1600         |              |                         |
| <b>Date Commencing Work (mm/dd/yyyy)</b> 01-AUG-2026                                                      |                                                                                                                                                                                                                                 |                                    |                                         |              |              |                         |
| <b>Estimated duration of the operation (days)</b> 13                                                      |                                                                                                                                                                                                                                 |                                    |                                         |              |              |                         |
| <b>Verbal Approval Information</b>                                                                        |                                                                                                                                                                                                                                 |                                    |                                         |              |              |                         |
| <b>Official</b>                                                                                           |                                                                                                                                                                                                                                 |                                    | <b>Date (mm/dd/yyyy)</b>                |              |              |                         |
| <b>Questions</b>                                                                                          |                                                                                                                                                                                                                                 |                                    |                                         |              |              |                         |
| <b>Number</b>                                                                                             | <b>Question</b>                                                                                                                                                                                                                 | <b>Response</b>                    | <b>Response Text</b>                    |              |              |                         |
| A                                                                                                         | Is H2S present in the well? If yes, then comment on the inclusion of a Contingency Plan for this operation.                                                                                                                     | NO                                 |                                         |              |              |                         |
| B                                                                                                         | Is this proposed operation the only lease holding activity for the subject lease? If yes, then comment.                                                                                                                         | NO                                 |                                         |              |              |                         |
| C                                                                                                         | 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.                                      | YES                                |                                         |              |              |                         |
| D                                                                                                         | If sands are to be commingled for this completion, has approval been obtained?                                                                                                                                                  | N/A                                |                                         |              |              |                         |
| E                                                                                                         | Will the completed interval be within 500 feet of a block line? If yes, then comment.                                                                                                                                           | N/A                                |                                         |              |              |                         |
| F                                                                                                         | For permanent abandonment, will casings be cut 15 feet below the mudline? If no, then comment.                                                                                                                                  | NO                                 | Conductor to be removed at a later date |              |              |                         |
| G                                                                                                         | Will you ensure well-control fluids, equipment, and operations be designed, utilized, maintained, and/or tested as necessary to control the well in foreseeable conditions and circumstances, including subfreezing conditions? | YES                                |                                         |              |              |                         |

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|                                    |                |                                    |                       |              |              |                         |
|------------------------------------|----------------|------------------------------------|-----------------------|--------------|--------------|-------------------------|
| <b>Lease</b> P00166                | <b>Area</b> LA | <b>Block</b> 6660                  | <b>Well Name</b> A050 | <b>ST</b> 02 | <b>BP</b> 00 | <b>Type</b> Development |
| <b>Application Status</b> Approved |                | <b>Operator</b> 02531 DCOR, L.L.C. |                       |              |              |                         |

### Questions

| Number | Question                                                                                                                                                                                                                  | Response | Response Text                                 |
|--------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------|
| H      | Will digital BOP testing be used for this operation? If "yes", state which version in the comment box?                                                                                                                    | NO       |                                               |
| I      | Is this APM being submitted to remediate sustained casing pressure (SCP)? If "yes," please specify annulus in the comment box. If you have been given a departure/denial for SCP, include in the attachments.             | YES      | 7" x 13-3/8" annulus                          |
| J      | Are you pulling tubulars and/or casing with a crane? If "YES" have documentation on how you will verify the load is free per API RP 2D. This documentation must be maintained by the lessee at the lessee's field office. | NO       |                                               |
| K      | Will the proposed operation be covered by an EPA Discharge Permit? (Please provide permit number comments for this question).                                                                                             | YES      | Permit no. CAGZ800000. Discharge not planned. |
| L      | Will you be using multiple size work string/ tubing/coil tubing/snubbing/wireline? If yes, attach a list of all sizes to be used including the size, weight, and grade.                                                   | YES      | Sizes listed / detailed in Job Plan p. 4      |
| M      | For both surface and subsea operations, are you utilizing a dynamically positioned vessel and/or non-bottom supported vessel at any time during this operation?                                                           | NO       |                                               |

### ATTACHMENTS

| File Type | File Description               |
|-----------|--------------------------------|
| pdf       | Proposed Wellbore Schematic    |
| pdf       | Current Wellbore Schematic     |
| pdf       | A-50 APM Payment Confirmation  |
| pdf       | A-50 Directional Survey        |
| pdf       | A-50 Job Plan                  |
| pdf       | A-50 Job Plan PE Certification |
| pdf       | A-50 BOPE PE Verification      |
| pdf       | A-50 BOPE Shear Test           |
| pdf       | A-50 BOPE Shear Test of WL     |

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|                                               |                     |                             |                |       |       |                  |
|-----------------------------------------------|---------------------|-----------------------------|----------------|-------|-------|------------------|
| Lease P00166                                  | Area LA             | Block 6660                  | Well Name A050 | ST 02 | BP 00 | Type Development |
| Application Status Approved                   |                     | Operator 02531 DCOR, L.L.C. |                |       |       |                  |
| pdf A-50 BOPE Shear Test of 2 Strings of Pipe |                     |                             |                |       |       |                  |
| pdf Well A-50 CER                             |                     |                             |                |       |       |                  |
| CONTACTS                                      |                     |                             |                |       |       |                  |
| Name                                          | Scott Lavan         |                             |                |       |       |                  |
| Company                                       | DCOR, L.L.C.        |                             |                |       |       |                  |
| Phone Number                                  | 8055352058          |                             |                |       |       |                  |
| E-mail Address                                | slavan@dcorllc.com  |                             |                |       |       |                  |
| Contact Description                           | Tyson Holder        |                             |                |       |       |                  |
|                                               | DCOR, L.L.C.        |                             |                |       |       |                  |
|                                               | 8053207111          |                             |                |       |       |                  |
|                                               | tholder@dcorllc.com |                             |                |       |       |                  |

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            | Date        |
| Scott Lavan, Sr. Engineer | 27-MAY-2026 |

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.

**Application for Permit to Modify (APM)**

**Lease** P00166    **Area** LA    **Block** 6660    **Well Name** A050    **ST** 02    **BP** 00    **Type** Development  
**Application Status** Approved    **Operator** 02531 DCOR, L.L.C.

**Variances Requested for this Permit**

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Lease P00166    Area LA    Block 6660    Well Name A050    ST 02    BP 00    Type Development  
Application Status Approved    Operator 02531 DCOR, L.L.C.

Existing Variances

No previously approved variances exist for this permit

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Application Status Approved    Operator 02531 DCOR, L.L.C.

Reviews

|                  |                                              |
|------------------|----------------------------------------------|
| Review:          | APM - District Production Engineering Review |
| Sent:            | 26-MAY-26                                    |
| Review Started:  | 28-MAY-26                                    |
| Review Finished: | 28-MAY-26                                    |
| Info Adequate:   | Y                                            |
| Review Remarks:  |                                              |

|                  |                                   |
|------------------|-----------------------------------|
| Review:          | BOP Control System Drawing Review |
| Sent:            | 26-MAY-26                         |
| Review Started:  | 26-MAY-26                         |
| Review Finished: | 26-MAY-26                         |
| Info Adequate:   | Y                                 |
| Review Remarks:  |                                   |

|                  |                                |
|------------------|--------------------------------|
| Review:          | Determination of NEPA Adequacy |
| Sent:            | 19-MAY-26                      |
| Review Started:  | 19-MAY-26                      |
| Review Finished: | 19-MAY-26                      |
| Info Adequate:   | Y                              |
| Review Remarks:  |                                |