

### Application for Permit to Modify (APM)

<b>Lease</b> P00300	<b>Area</b> LB	<b>Block</b> 6438	<b>Well Name</b> A020	<b>ST</b>	<b>BP</b>	<b>Type</b> Development
<b>Application Status</b> Approved		<b>Operator</b> 03126 Beta Operating Company, LLC				

<b>Pay.gov</b>	<b>Agency</b>	<b>Pay.gov</b>
<b>Amount:</b> \$125.00	<b>Tracking ID:</b> EWL-APM-190106	<b>Tracking ID:</b> 25VDBDEN

<b>General Information</b>		
<b>API</b> 043122003900	<b>Approval Dt</b> 08-DEC-2016	<b>Approved By</b> John Kaiser
<b>Submitted Dt</b> 06-DEC-2016	<b>Well Status</b> Completed	<b>Water Depth</b> 265
<b>Surface Lease</b> P00300	<b>Area</b> LB	<b>Block</b> 6438

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

**Correction Narrative**

<b>Permit Primary Type</b> Workover
<b>Permit Subtype(s)</b> Change Tubing

**Operation Description**  
 Pulling A-20 well to investigate potential hole in tubing. Replace tubing if necessary.

**Procedural Narrative**  
 Test BOP's per BSEE regulations 250 PSI LOW and 2350 PSI HIGH. Pull well and check for hole in tubing. Replace tubing if needed. Refer to attached program for further details.

**Subsurface Safety Valve**

<b>Type Installed</b> SCSSV
<b>Feet below Mudline</b> 250
<b>Maximum Anticipated Surface Pressure (psi)</b> 1400
<b>Shut-In Tubing Pressure (psi)</b>

<b>Rig Information</b>				
<b>Name</b>	<b>Id</b>	<b>Type</b>	<b>ABS Date</b>	<b>Coast Guard Date</b>
BETA RIG #1	36007	PLATFORM	01-JAN-2014	01-JAN-2014

<b>Blowout Preventers</b>				
<b>Preventer</b>	<b>Size</b>	<b>Working Pressure</b>	--- Test Pressure ---	
			<b>Low</b>	<b>High</b>
Rams	2x5"	5000	250	2350
Annular		5000	250	2350

**Date Commencing Work (mm/dd/yyyy)** 09-DEC-2016

**Estimated duration of the operation (days)** 3

<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>
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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<b>Application Status</b> Approved			<b>Operator</b> 03126 Beta Operating Company, LLC			

**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	A-20 HIT Repair Program 12-6-2016
pdf	Ellen BOP Certs
pdf	Ellen BOP data book part three

**CONTACTS**

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

Date

Cory Klett, Drilling Engineer

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.