

Application for Permit to Modify (APM)

Lease P00301	Area LB	Block 6488	Well Name C050	ST 00	BP 00	Type Development
Application Status Approved		Operator 03126 Beta Operating Company, LLC				
Pay.gov Amount: \$125.00		Agency Tracking ID: EWL-APM-194239		Pay.gov Tracking ID: 263JLJVB		
General Information						
API 043122015100		Approval Dt 18-JUL-2017		Approved By John Kaiser		
Submitted Dt 12-JUL-2017		Well Status Completed		Water Depth 700		
Surface Lease P00301		Area LB		Block 6488		
Approval Comments						
Conditions of Approval:						
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.						
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.						
3) While you are on the well and observe a pressure the exceeds the test pressures stated in the approved permit, the equipment in use must be tested to at or greater than the observed pressure and the appropriate District must be notified of this pressure change.						
4) High pressure blind shear ram close capability must be available from all BOP control panels. Each BOP control panel must be clearly marked to indicate that the accumulator system 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 then the accumulator system must be set in the high pressure position at all times except for pressure and function testing.						
5) You must have the most current set of approved BOP drawings on the rig and available for inspection. If there are any revisions or changes made to the approved set of BOP control system drawings, then you must submit a RPD/RPM and receive approval for these revisions.						
6) You must notify the permitting section AT LEAST 4 hours in advance of beginning these approved operations AND of any required BOP tests.						
7) WAR reports are due no later than Wednesday of each week at 1200 hours.						
Correction Narrative						
Permit Primary Type Workover						
Permit Subtype(s) Change Tubing Describe Operation(S)						
Operation Description Pull the ESP and tubing, LD the tubing and ESP, Install new ESP and Yellow Band 3 1/2" tubing.						
Procedural Narrative						

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It is expected there is a hole in the tubing. The well will be pulled, tubing replaced, and ESP replaced also.

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 #2	36006	PLATFORM		

Blowout Preventers

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

Date Commencing Work (mm/dd/yyyy) 15-AUG-2017

Estimated duration of the operation (days) 5

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.	NO	
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	

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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	Proposed Wellbore Schematic
pdf	Current Wellbore Schematic
pdf	Well Test Information
pdf	C-50 2013 and 2014 workover
pdf	C-50 Deviation Survey
pdf	C-50 Program
pdf	Eureka BOP
pdf	S53 part 1 of two
pdf	S53 part 2 of 2
pdf	shear cert

CONTACTS

Name	Marielle Lomax
Company	Beta Operating Company, LLC
Phone Number	5626281544
E-mail Address	marielle.lomax@amplifyenergy.com
Contact Description	Drilling 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 ci

Name and Title

Date

Brent Chalmers, Well Services Supervisor

12-JUL-2017

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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.