ACCIDENT INVESTIGATION REPORT

1. OCCURRED
   DATE: 10-FEB-2011   TIME: 0945   HOURS

2. OPERATOR: Hall-Houston Exploration II, L.P.
   REPRESENTATIVE: Camp, Kathy
   TELEPHONE: (713) 201-9627
   CONTRACTOR: Wood Group Production Services
   REPRESENTATIVE: STINNET, RICK
   TELEPHONE: (361) 438-2230

3. OPERATOR/CONTRACTOR REPRESENTATIVE/SUPERVISOR ON SITE AT TIME OF INCIDENT:

4. LEASE: G15740
   AREA: GA   LATITUDE:
   BLOCK: 151   LONGITUDE:

5. PLATFORM:
   RIG NAME:

6. ACTIVITY:
   X EXPLORATION (POE)
   DEVELOPMENT/PRODUCT ON (DOCD/POD)

7. TYPE:
   HI STORIC INJURY
   X EQUIPMENT FAILURE
   OTHER

8. CAUSE:
   HUMAN ERROR
   EXTERNAL DAMAGE
   SLIP/TRIP/FALL
   WEATHER RELATED
   LEAK
   OVERBOARD DRILLING FLUID
   OTHER

9. WATER DEPTH: 40 FT.

10. DISTANCE FROM SHORE: 13 MI.

11. WIND DI RECT ON: N
    SPEED: 23 M.P.H.

12. CURRENT DI RECT ON: M.P.H.

13. SEA STATE: 5 FT.
The Injured Party (IP) arrived at the facility to bring the well on production by first starting the hydraulic pump located inside the instrument panel to open the SCSSV. Upon opening the SCSSV, the pump failed to shut off. The IP then opened the panel, checked for leaks, and used a metal wrench to tap on the pump to "unstick" the relay. The wrench caused a spark when it contacted the pump and ignited gas accumulations inside the panel. The IP received minor burns to the face, but was able to immediately extinguish the flash fire using one (1) 30 lb dry chemical fire extinguisher. The IP did not seek any medical treatment.

18. LIST THE PROBABLE CAUSE(S) OF ACCIDENT:

The IP did not take steps to clear the panel of gas accumulations or prevent sparks due to static or friction between the wrench and pump.

19. LIST THE CONTRIBUTING CAUSE(S) OF ACCIDENT:

Dry weather provided favorable conditions for static electricity.

20. LIST THE ADDITIONAL INFORMATION:

21. PROPERTY DAMAGED: NATURE OF DAMAGE:

None None

ESTIMATED AMOUNT (TOTAL): $

22. RECOMMENDATIONS TO PREVENT RECURRANCE NARRATIUE:

The Lake Jackson District has no recommendations for the Agency to prevent recurrence.

23. POSSIBLE OCS VIOLATIONS RELATED TO ACCIDENT: YES

24. SPECIFY VIOLATIONS DIRECTLY OR INDIRECTLY CONTRIBUTING NARRATIVE:

FROM INC
"G112 - The lessee failed to take all precautions and actions to remove or prevent any sparks and sources of ignition in an area having accumulations of hazardous hydrocarbons. Additionally, the lessee failed to take all precautions and actions to remove all hazardous hydrocarbons in order to preserve personnel safety and equipment."

25. DATE OF ONSITE INVESTIGATION:

11-FEB-2011
26. **ONSITE TEAM MEMBERS:**
   James Holmes / Marco Deleon / Phillip Couvillion

29. **ACCIDENT INVESTIGATION PANEL FORMED:**
   NO

30. **DISTRICT SUPERVISOR:**
   Stephen P. Martinez

APPROVED DATE: 31-MAY-2011
1. SOURCE OF IGNITION: Spark caused by metal wrench contact to hydraulic pump

2. TYPE OF FUEL:  
   - [X] GAS
   - [ ] OIL
   - [ ] DIESEL
   - [ ] CONDENSATE
   - [ ] HYDRAULIC
   - [ ] OTHER

3. FUEL SOURCE: Instrument gas accumulation in panel

4. WERE PRECAUTIONS OR ACTIONS TAKEN TO ISOLATE KNOWN SOURCES OF IGNITION PRIOR TO THE ACCIDENT? NO

5. TYPE OF FIREFIGHTING EQUIPMENT UTILIZED:  
   - [X] HANDHELD
   - [ ] WHEELED UNIT
   - [ ] FIXED CHEMICAL
   - [ ] FIXED WATER
   - [ ] NONE
   - [ ] OTHER
INJURY/FATALITY/WITNESS ATTACHMENT

[ ] OPERATOR REPRESENTATIVE [ ] INJURY
[ ] CONTRACTOR REPRESENTATIVE [ ] FATALITY
[ ] OTHER ____________________________ [ ] WITNESS

NAME:

HOME ADDRESS:

CITY: STATE:

WORK PHONE: TOTAL OFFSHORE EXPERIENCE:

EMPLOYED BY:

BUSINESS ADDRESS:

CITY: STATE:

ZIP CODE: