STRUCTURAL DAMAGE
CRANE
OTHER LIFTING DEVICE
DAMAGED/DISABLED SAFETY SYS.
INCIDENT >$25K
H2S/15MIN./20PPM
REQUIRED MUSTER
SHUTDOWN FROM GAS RELEASE
OTHER

PRODUCTION
DRILLING
WORKOVER
COMPLETION
HELICOPTER
MOTOR VESSEL
PIPELINE SEGMENT NO.
OTHER

EQUIPMENT FAILURE
HUMAN ERROR
EXTERNAL DAMAGE
SLIP/TRIP/FALL
WEATHER RELATED
LEAK
UPSET H2O TREATING
OVERBOARD DRILLING FLUID
OTHER

LWC
HISTORIC BLOWOUT
UNDERGROUND
SURFACE
DEVERTER
SURFACE EQUIPMENT FAILURE OR PROCEDURES
COLLISION
HISTORIC
>$25K
<=$25K

EV2010R PAGE: 1 OF 5
05-APR-2007
17. DESCRIBE IN SEQUENCE HOW ACCIDENT HAPPENED:

The drill crew was attempting to retrieve the trash cap for tie back operations. The drill pipe was in the hole and believed to be resting on top of the cap. After numerous attempts to retrieve the cap with the top drive, the decision was made to manually turn the drill pipe with a chain tong. Before the job began a pre Job Safety Meeting (JSM) was conducted. They discussed how the pipe will fall when it is turned into the connection. The crew then disconnected from the top drive and two floorhands began turning the drill pipe with the chain tong. A few turns were made when the tool engaged and fell approximately 1 foot causing the handle of the chain tong to make contact on the left shin of one employee working the tongs causing the injury. As a result of this unplanned event the classification of the incident is a Lost Time Accident. The injured person will be away from work for approximately 180 days.

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

A) The employee was not following or adhearing to the warnings given in the pre JSM.
B) Having body parts in the pinch points of the work being performed.

19. LIST THE CONTRIBUTING CAUSE(S) OF ACCIDENT:
21. PROPERTY DAMAGED: None

22. RECOMMENDATIONS TO PREVENT RECURRANCE NARRATIVE:

No Recommendations to MMS.

The New Orleans District concurs with the Operator's recommendations to prevent recurrance.
1) Recommended to third party equipment company to modify procedures.
2) ENSCO to issue a safety alert to all rigs of the details of incident with identification of hazards relevant to start task.

23. POSSIBLE OCS VIOLATIONS RELATED TO ACCIDENT: NO

24. SPECIFY VIOLATIONS DIRECTLY OR INDIRECTLY CONTRIBUTING. NARRATIVE:

25. DATE OF ONSITE INVESTIGATION:

30-AUG-2006

26. ONSITE TEAM MEMBERS:

Justin Josey /

29. ACCIDENT INVESTIGATION PANEL FORMED: NO

OCS REPORT:

30. DISTRICT SUPERVISOR:

Troy Troclair

APPROVED DATE: 14-SEP-2006
<table>
<thead>
<tr>
<th>Operator Role</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brent Doughty</td>
<td>Injury</td>
</tr>
<tr>
<td>Scott Courville</td>
<td>Witness</td>
</tr>
</tbody>
</table>

Brent Doughty

**Home Address:** Post Office Box 192
**City:** Evergreen  **State:** LA
**Work Phone:**
**Total Offshore Experience:** 13 years

Scott Courville

**Home Address:** 24795 Liberty Road
**City:** Lafayette  **State:** LA
**Work Phone:**
**Total Offshore Experience:** 1 year

**Employed By:**
**Business Address:**
**City:** Lafayette  **State:** LA
**Zip Code:**
INJURY/FATALITY/WITNESS ATTACHMENT

☐ OPERATOR REPRESENTATIVE  ☐ INJURY
☒ CONTRACTOR REPRESENTATIVE  ☐ FATALITY
☐ OTHER ___________________________  ☒ WITNESS

NAME:  Lee Farris
HOME ADDRESS:  374 Hwy 909
CITY:  Monterey  STATE:  LA
WORK PHONE:  TOTAL OFFSHORE EXPERIENCE:  6  YEARS
EMPLOYED BY:
BUSINESS ADDRESS:
CITY:  STATE:
ZIP CODE: