U.S. Department of the Interior

Bureau of Safety and Environmental Enforcement (BSEE)

Submit ORIGINAL

OMB control Number 1014-0018
OMB Approval Expires 10/31/2017

WELL ACTIVITY REPORT

BEGINNING DATE: 08/30/2015 ENDING DATE: 08/30/2015

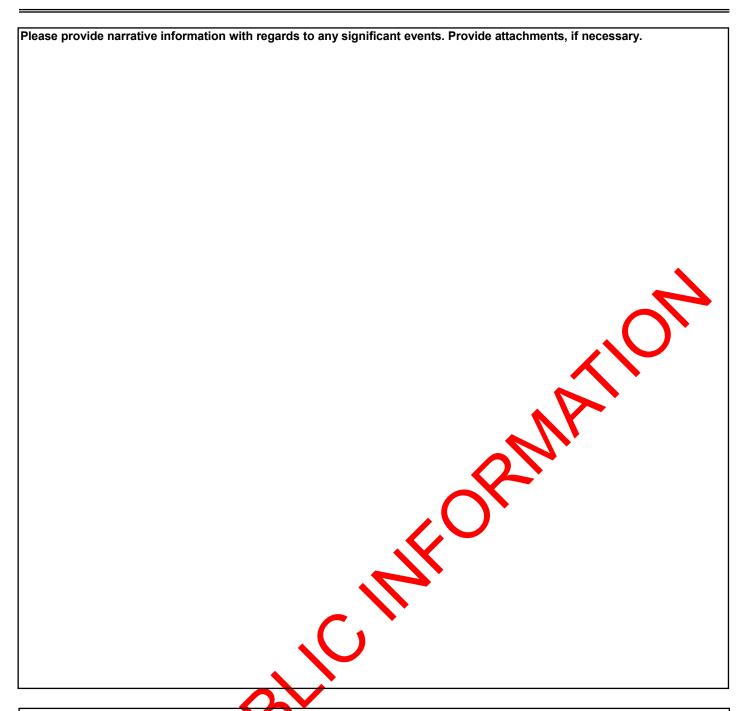
REPORT IS NOT TO EXCEED 7 DAYS (1 WEEK) IN DURATION

	СО	CORRECTION				CHECK IF THIS IS THE LAST WELL ACTIVITY REPORT										
GENERAL INFORMATION																
1. API WELL NO. (10 digits)									2. OPERATOR NAME							
55-352-00004-00									Shell Gulf of Mexico Inc.							
3. WELL NAME 4. SIDETRACK NO. 5. BYPASS						SS NO.	6. CONTACT NAME / CONTACT TELEPHONE NUMBER / CONTACT E-MAIL ADDRESS									
BJ001 00					00		K. Long (907) 770-3700; regulatory reporting@shell.com									
7. RIG NAME OR PRIMARY UNIT (e.g., wireline unit, coil tub TransOcean Polar Pioneer									8. WATER DEPTH (surveyed) (ft) 9. ELEVATION AT KB (Surveyed) (ft) 76							
10. CURRENT WELLBORE INFORMATION																
	SURFACE								ВОТТОМ							
LEA	SE NO.	NO. AREA NAME		\ME	BLOCK NO.				LEASE	ENO.	1	BLOCK NO.				
ocs	S-Y 2321	Posey		эу		69	12 00		S-Y 232		21	6912				
WE	LLBORE	STA DA		TD D	ATE	STATUS	END DAT	TE KOP (MD)	MD	TVD	MW PPG	LAST BOP TEST DATE		OP TEST SSURE		
						SU							LOW	HIGH		
							•	N/A				N/A	N/A	N/A		
		_			11.	WE	LLBOR	RE HISTO	DRICA	INFO	RMA	TION		_		
WE	ELLBORE BOTTOM LEASE START DATE			ATE 1	TD DATE	PA DATE		F	INAL MD	FINAL TVD						
		ocs	S-Y 2	2321	7											
			1		<u>V</u>											
		 	7													

WELL ACTIVITY REPORT

12. CASING / LINER / TUBING RECORD												
TUBULAR	HOLE SIZE	SIZE (IN)	WEIGHT (#/ft)	GRADE	TEST PRESSURE	SHOE TEST (EMW)	SETTING DEPTH (MD)		CEMENT QUANTITY			
TYPE	(IN)				(psi)		TOP	BOTTOM	(cubic ft.)			
			4	2 WELL	A CTIV/ITV		DV					
13. WELL ACTIVITY SUMMARY Provide a daily summary of well activities.												
14. Open Hole Log Data												
BSEE's Technical Data Management Section requires an Open Hole Well Report (Form BSEE-0133S) to accompany this Well Activity Report if any of the below conditions have occurred for this wellbore during this period:												
	None of the	follow	ing have occurred:			_ (•					
	≬Wirel	ine lo	gs (Report when a	cquired)								
			rectionals (Report	-	-	W						
	≬ Velo	ity Su	rveys, VSP's, Con	ventional C	ores, Rotary	and Percus	sion Sidewa	all Cores (Rep	ort when acquired)			
	Completed MWD/LWD logs and Mudlogs - (Report When they are completed.)											
PVT, Paleontological and Geochemical Samples acquired for analysis (Report at completion of Borehole) Any of the above have occurred; if checked then submit Form BSEE-0133S.												
15. Significant Well Events												
Please ch	eck as mai	ny eve	ents from the list	below:								
	Kick Occurr	ence	0~	[Well C	ontrol Equipr	nent Failure					
	Shallow Wa	iter Flo	w	[H ₂ S Er	counter						
	Weather and Oceanographic Conditions		ons [New Te	New Technology Failure							
	General Rig Equipment Failure		[Stuck I	Stuck Pipe							
	Lost Return	s			Wellbo	re Integrity F	ailure					
	Station Keeping Failure				Other	Other						

WELL ACTIVITY REPORT



CERTIFICATION: I certify that the information submitted is complete and accurate to the best of my knowledge. I understand that making a false statement may subject me to criminal penalties under 18 U.S.C. 1001.

Name and Title: K. Lloyd, Regulatory Assistant Date: 02 September 2015

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. BSEE uses the information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operations. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.197. 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 Forms BSEE-0133 and BSEE-0133S is approximately 1 hour per form per response. This includes 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, Bureau of Safety and Environmental Enforcement, 45600 Woodland Road, Sterling, VA 20166.