Bureau of Safety and Environmental Enforcement (BSEE) Submit ORIGINAL

## WELL ACTIVITY REPORT

09/07/2015 BEGINNING DATE:

ENDING DATE: 09/07/2015

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

CORRECTION CHECK IF THIS IS THE LAST WELL ACTIVITY REPORT															
					G	ENE	RAL IN	IFORM	IATION	J					
1. API WELL NO. (10 digits)								2. OPERATOR NAME							
55-352-00004-00								Shell Gulf of Mexico Inc.							
3. WELL NAME 4. SIDETRACK NO.				0.	5. BYF	PASS	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							oing unit, e	etc.) 8. WATER DEPTH 9. ELEVATION AT KB (surveyed) (ft) (Surveyed) (ft)							
TransOcean Polar Pioneer (surveyed) (π) Tourveyed (π) Tourveyed (π) Tourveyed (π)															
10. CURRENT WELLBORE INFORMATION															
	SL	JRFA	CE				BOTTOM								
LEASE NO.	AREAN	NAME		BLOC	CK NO.			LEASE	ENO.	BLOCK NO.					
OCS-Y 2321	Pos	sey		69	12		OC	S-Y	232	21		6912			
WELLBORE	START DATE	TDD	DATE	STATUS	END	DATE	KOP (MD)	MD	TVD	MW PPG	LAST BOP TEST DATE				
				SDJ			$\mathbf{x}$					LOW	HIGH		
							N/A				9/2/2015	250	5000		
	-		11	. WE	LLBO	ORE	HISTO	RICA	<b>L</b> INFO	RMA	TION	-	-		
WELLBORE BOTTOM		MLEASE START			ATE TD DA		DATE	PAI	A DATE		INAL MD	FINAL TVD			
	OCS-Y	2321	2												
			$\mathbf{\mathbf{Y}}$												
	$\mathbf{O}$														
										1					

BSEE Form BSEE-0133 (October/2014 - Supersedes all previous versions of this form which may not be used.) Page 1 of 3

## WELL ACTIVITY REPORT

12. CASING / LINER / TUBING RECORD										
TUBULAR TYPE	HOLE SIZE	SIZE (IN)	WEIGHT (#/ft)	GRADE	TEST PRESSURE	SHOE TEST	SETTING I	DEPTH <i>(MD)</i>	CEMENT QUANTITY (cubic ft.)	
	(IN)	(11)			(psi)	(EMW)	TOP	BOTTOM		
13. WELL ACTIVITY SUMMARY Provide a daily summary of well activities.										
								NP.		
14. Open Hole Log Data										
BSEE's Technical Data Management Section requires an Open Hole Well Report (Form BSEE-0138S) to accompany this Well										
Activity Report if any of the below conditions have occurred for this wellbore during this period:										
None of the following have occurred:										
⊌Wireline logs (Report when acquired)										
			rectionals (Report	-	-	X				
	Velo	city Su	rveys, VSP's, Con	ventional C	Cores, Ro <mark>tary</mark>	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 a	above I	nave occurred; if ch	ecked then	submit Form	BSEE-0133S	S.			
15. Significant Well Events Please check as many events from the list below:										
Please ch	eck as mai	ny eve	ents from the list	Delow:						
	Kick Occurr	rence	$\circ$		Well C	ontrol Equipr	nent Failure			
	Shallow Wa	ter Flo	w		H₂S Er	counter				
	Weather an	d Ocea	anographic Condition	ons	New Te	chnology Fa	ailure			
	General Rig	g Equip	ment Failure	[	Stuck F	Pipe				
	Lost Return	S		[	Wellbo	re Integrity F	ailure			
	Station Kee	ping Fa	ailure	[	Other					

## WELL ACTIVITY REPORT

Please provide narrative information with regards to any significant events. Provide attachments, if necessary. 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. Regulatory Specialist W. Sears, 08 September 2015 Name and Title: Date:

**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.