Bureau of Safety and Environmental Enforcement (BSEE) Submit ORIGINAL

## WELL ACTIVITY REPORT

BEGINNING DATE:

ENDING DATE:

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

|  | RREC                                | ΓΙΟΝ |             | IECK      | IF TH         | IIS IS      | THE L/           | AST W  | ELL .     | ACTIVITY              | REPORT    |                 |  |  |
|--|-------------------------------------|------|-------------|-----------|---------------|-------------|------------------|--|-----------|-----------------------|-----------|-----------------|--|--|
| GENERAL INFORMATION  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
| 1. API WELL NO. (10 digits)                                      |                                     |      |             |           |               |             | 2. OPERATOR NAME |  |           |                       |           |                 |  |  |
| 3. WELL NAME 4. SIDETRACK NO. 5                                  |                                     |      |             |           | 5. BYPASS NO. |             |                  | 6. CONTACT NAME / CONTACT TELEPHONE NUMBER /<br>CONTACT E-MAIL ADDRESS     |           |                       |           |                 |  |  |
| 7. RIG NAME OR PRIMARY UNIT (e.g., wireline unit, coil tubing un |                                     |      |             |           |               |             |                  | etc.) 8. WATER DEPTH 9. ELEVATION AT KB<br>(surveyed) (ft) (Surveyed) (ft) |           |                       |           |                 |  |  |
| 10. CURRENT WELLBORE INFORMATION                                 |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
| SURFACE  |                                     |      |             |           |               |             |                  |  | В         | OTTOM                 |           |                 |  |  |
| LEASE NO.  | EASE NO. AREA NAME                  |      |             | BLOCK NO. |               |             | LEASE            | ENO.   |           | BLOCK NO.             |           |                 |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
| WELLBORE   | STAR<br>DATE                        |      | DATE        | END       | DATE          | KOP<br>(MD) | MD               | TVD  | MW<br>PPG | LAST BOP<br>TEST DATE |           | OP TEST<br>SURE |  |  |
|  | D/TT                                | -    | DATE STATUS |           |               | (1112)      |                  |  |           |                       | LOW       | HIGH            |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
|  | 11. WELLBORE HISTORICAL INFORMATION |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
| WELLBORE BOTTOM LEASE STAR                                       |                                     |      | START       | DATE      | TD            | DATE        | PA               | DATE   | FINAL MD  |                       | FINAL TVD |                 |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |
|  |                                     |      |             |           |               |             |                  |  |           |                       |           |                 |  |  |

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## WELL ACTIVITY REPORT

|   |  |              | 12. C               | ASING /                | LINER /          | TUE    | BING RE      | CORD         |                   |                                |  |
|---|--|--------------|---------------------|------------------------|------------------|--------|--------------|--------------|-------------------|--------------------------------|--|
| TUBULAR<br>TYPE   | HOLE<br>SIZE   | SIZE<br>(IN) | WEIGHT (#/ft)       | GRADE                  | TEST<br>PRESSU   | RE     | SHOE<br>TEST | SETTING [    | DEPTH <i>(MD)</i> | CEMENT QUANTITY<br>(cubic ft.) |  |
|   | (IN)   | (11)         |                     |                        | (psi)            |        | (EMW)        | TOP          | BOTTOM            |                                |  |
|   |  |              |                     |                        |                  |        |              |              |                   |                                |  |
|   |  |              |                     |                        |                  |        |              |              |                   |                                |  |
|   |  |              |                     |                        |                  |        |              |              |                   |                                |  |
|   |  |              |                     |                        |                  |        |              |              |                   |                                |  |
|   |  |              |                     |                        |                  | _      |              |              |                   |                                |  |
|   |  |              |                     |                        |                  |        |              |              |                   |                                |  |
|   |  |              |                     | 3. WELL<br>vide a dail |                  |        |              |              |                   |                                |  |
|   |  |              |                     | 14. 01                 | oen Hole         | 210    | o Data       | NP           |                   |                                |  |
|   |  |              |                     |                        |                  |        |              |              |                   |                                |  |
| BSEE's Technical Data Management Section requires an Open Hole Well Report (Form BSEE-0133S) to accompany this Well<br>Activity Report if any of the below conditions have occurred for this wellbore during this period: |  |              |                     |                        |                  |        |              |              |                   |                                |  |
|   | None of the following have occurred:   |              |                     |                        |                  |        |              |              |                   |                                |  |
|   |  |              |                     |                        |                  |        |              |              |                   |                                |  |
|   | <ul> <li>Wireline logs (Report when acquired)</li> <li>Wireline Directionals (Report when acquired)</li> </ul> |              |                     |                        |                  |        |              |              |                   |                                |  |
|   |  |              |                     |                        |                  | arv a  | nd Porcus    | sion Sidow   | all Coros (Po     | port when acquired)            |  |
| Velocity Surveys, VSP's, Conventional Cores, Rotary and Percussion Sidewall Cores (Report 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      | have occurred; if c | hecked ther            | n submit Fo      | rm B   | SEE-01338    | 6.           |                   |                                |  |
| ]   |  |              |                     | 15. Sig                | nificant         | Wel    | l Events     | ;            |                   |                                |  |
| Please ch   | eck as mai   | ny eve       | ents from the lis   | t below:               |                  |        |              |              |                   |                                |  |
|   | Kick Occurr  | ence         |                     |                        | We               | I Con  | trol Equipn  | nent Failure |                   |                                |  |
|   | Shallow Wa   | iter Flo     | W                   |                        | H <sub>2</sub> S | Enco   | ounter       |              |                   |                                |  |
|   | Weather an   | d Oce        | anographic Conditi  | ons                    | Nev              | и Тес  | nnology Fa   | ilure        |                   |                                |  |
|   | General Rig  | l Equip      | ment Failure        |                        | Stu              | ck Pip | e            |              |                   |                                |  |
|   | Lost Return  | S            |                     |                        | We               | lbore  | Integrity F  | ailure       |                   |                                |  |
|   | Station Kee  | ping F       | ailure              | [                      | Oth              | er     |              |              |                   |                                |  |

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| Please provide narrative information with regards to any significant events. Provide attachments, if necessary.  |
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| <b>CERTIFICATION:</b> 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: W. Sears, Regulatory Specialist Date: 24 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.