1. OCCURRED
   DATE: 20-JUN-2015  TIME: 1405 HOURS

2. OPERATOR: Eni US Operating Co. Inc.
   REPRESENTATIVE:
   TELEPHONE:
   CONTRACTOR: Ensco Offshore Co.
   REPRESENTATIVE:
   TELEPHONE:

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

4. LEASE: G16647
   AREA: MC  LATITUDE: 28.201944
   BLOCK: 772  LONGITUDE: -88.7525

5. PLATFORM:
   RIG NAME: ENSCO 8500

6. ACTIVITY:  EXPLORATION(POE)
   DEVELOPMENT/PRODUCTION(DOCD/POD)

7. TYPE:
   □ HISTORIC INJURY
     □ REQUIRED EVACUATION
       □ LTA (1-3 days)
       □ LTA (>3 days)
       □ RW/JT (1-3 days)
       □ RW/JT (>3 days)
     □ Other Injury
   □ FATALITY
   □ POLLUTION
   □ FIRE
   □ EXPLOSION
   □ HISTORIC BLOWOUT
     □ UNDERGROUND
     □ SURFACE
     □ DEVERTER
     □ SURFACE EQUIPMENT FAILURE OR PROCEDURES
   □ COLLISION
     □ HISTORIC
     □ =$25K
     □ <=$25K

8. CAUSE:
   □ EQUIPMENT FAILURE
   □ HUMAN ERROR
   □ EXTERNAL DAMAGE
   □ SLIP/TRIP/FALL
   □ WEATHER RELATED
   □ LEAK
   □ UPSET H2O TREATING
   □ OVERBOARD DRILLING FLUID
   □ OTHER ________________________________

9. WATER DEPTH: 5639 FT.

10. DISTANCE FROM SHORE: 68 MI.

11. WIND DIRECTION: SSW
    SPEED: 3 M.P.H.

12. CURRENT DIRECTION: NNW
    SPEED: 1 M.P.H.

13. SEA STATE: FT.
On June 20, 2015 an incident occurred on the Ensco 8500 drilling rig that resulted in a 12 barrel discharge of SBM (Synthetic Base Mud). The SBM discharged was 11.3 pounds per gallon.

The discharge occurred while the drill crew was in the process of pulling the drill pipe out of the wellbore. The Mud Logger monitoring the trip tank noticed a 1 barrel loss and notified the Driller that the trip tank was losing mud. The Driller then turned the pump to the trip tank off. At this time, the crew observed a visible leak coming from the Telescopic Joint (TJ). The crew immediately engaged the lower TJ seal, stopping the flow of SBM into offshore waters.

Upon further investigation by rig personnel, it was discovered that upper riser TJ seal failed. It was also discovered that the audible alarm for the TJ seal did not sound because air pressure was in the operating range of 100 psi and it was verified that the digital gauge was working properly. The operator then notified the BSEE and National Response Center (NRC) of the incident.

On 22 June BSEE inspectors arrived on location to investigate the incident. During the investigation the following was revealed.
1) A planned maintenance (PM) program was on file and completed for the upper riser telescopic joint.
2) The audible alarm for the upper TJ packer did not sound because the air pressure reading never fell below 100 psi. The digital gauge was working at normal operating pressure.
3) At this time it is unknown why the upper TJ packer failed; the Operator is continuing its investigation to determine the exact cause.

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

Failure of the upper riser telescopic joint seal.

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

Audible alarm did not sound during packing failure because the air pressure remained within an operating range of 100 psi.

20. LIST THE ADDITIONAL INFORMATION:
21. PROPERTY DAMAGED: NATURE OF DAMAGE:  
12 barrel SBM (Synthetic Base Mud) Discharged overboard

ESTIMATED AMOUNT (TOTAL):

22. RECOMMENDATIONS TO PREVENT RECURRANCE NARRATIVE:  
The BSEE New Orleans District makes no recommendations to the Agency.

23. POSSIBLE OCS VIOLATIONS RELATED TO ACCIDENT: YES

24. SPECIFY VIOLATIONS DIRECTLY OR INDIRECTLY CONTRIBUTING. NARRATIVE:
   
   E-100: At the time of the inspection, it was discovered that an unauthorized discharge occurred on 6-20-15. The upper slip joint packer failed which allowed 12 barrels of 11.3 ppg Synthetic Based Mud to be discharged into offshore waters.

25. DATE OF ONSITE INVESTIGATION:

   22-JUN-2015

26. ONSITE TEAM MEMBERS:  
    Lance Benedietto / Frank Musacchia

29. ACCIDENT INVESTIGATION PANEL FORMED: NO

30. DISTRICT SUPERVISOR:
    David Trocquet
INJURY/FATALITY/WITNESS ATTACHMENT

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

NAME:
HOME ADDRESS:
CITY:  STATE:
WORK PHONE:  TOTAL OFFSHORE EXPERIENCE:  YEARS

EMPLOYED BY:
BUSINESS ADDRESS:
CITY:  STATE:
ZIP CODE:

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

NAME:
HOME ADDRESS:
CITY:  STATE:
WORK PHONE:  TOTAL OFFSHORE EXPERIENCE:  YEARS

EMPLOYED BY:
BUSINESS ADDRESS:
CITY:  STATE:
ZIP CODE:
POLLUTION ATTACHMENT

1. VOLUME: GAL 12 BBL
   YARDS LONG X YARDS WIDE
   APPEARANCE: LIGHT BROWN

2. TYPE OF HYDROCARBON RELEASED: □ OIL
   □ DIESEL
   □ CONDENSATE
   □ HYDRAULIC
   □ NATURAL GAS
   X OTHER SBM (60% oil)


4. WERE SAMPLES TAKEN? NO

5. WAS CLEANUP EQUIPMENT ACTIVATED? NO
   IF SO, TYPE: □ SKIMMER
   □ CONTAINMENT BOOM
   □ ABSORPTION EQUIPMENT
   □ DISPERSONS
   □ OTHER

6. ESTIMATED RECOVERY: GAL BBL

7. RESPONSE TIME: HOURS

8. IS THE POLLUTION IN THE PROXIMITY OF AN ENVIRONMENTALLY SENSITIVE AREA (CLASS I)? NO

9. HAS REGION OIL SPILL TASK FORCE BEEN NOTIFIED? NO

10. CONTACTED SHORE: NO IF YES, WHERE:

11. WERE ANY LIVE ANIMALS OBSERVED NEAR: NO

12. WERE ANY OILED OR DEAD ANIMALS OBSERVED NEAR SPILL: NO