

### Application for Permit to Modify (APM)

Lease P00216 Area LA Block 6862 Well Name S033 ST 01 BP 00 Type Development  
Application Status Approved Operator 02531 DCOR, L.L.C.

Pay.gov Agency Pay.gov  
Amount: Tracking ID: 76521165019 Tracking ID: 278G759F

**General Information**  
API 043112056801 Approval Dt 18-OCT-2023 Approved By Carl Lakner  
Submitted Dt 13-OCT-2023 Well Status Completed Water Depth 205  
Surface Lease P00216 Area LA Block 6862

Approval Comments

Correction Narrative

Permit Primary Type Workover  
Permit Subtype(s)  
Acidize  
Artificial Lift  
Change Tubing

Proposed or  Completed Work

**Operation Description**  
Planned work is to replace an ESP and acid wash the completion.

**Procedural Narrative**  
The workover is being proposed due to a reduction in rate of the ESP artificial lift equipment. The proposed program involves killing the well, pulling the artificial lift completion, replacing the tubing string, acid washing the completion then running the new ESP completion. The work will be performed with a conventional rig with wireline support as needed.  
  
Acid Wash Calculations (for further detail, please see attached acid procedure)  
  
SB4 Formula  
$$\frac{(((\text{Size of drill bit diameter in inches that was used in the treated zone} / 2 + 36 \text{ inches})^2 - (\text{bit diameter in inches} / 2)^2) \times 3.14159 \times 12 \text{ inches} \times \text{treated formation porosity})}{231 \text{ (inches}^3/\text{gallon)}}$$
  
  
SB4 with Variables  
$$\frac{(((8.5 \text{ inch bit diameter} / 2 + 36 \text{ inches})^2 - (8.5 \text{ inches bit diameter} / 2)^2) \times 3.14159 \times 12 \text{ (Inches/foot)} \times 0.300 \text{ treated formation porosity})}{231 \text{ (inches}^3/\text{gallon)}} = 78 \text{ Gallons per foot maximum}$$

**Subsurface Safety Valve**  
Type Installed SCSSV  
Feet below Mudline 200  
Maximum Anticipated Surface Pressure (psi) 1000  
Shut-In Tubing Pressure (psi) 800  
Maximum Anticipated Wellhead Pressure (psi) 1000  
Shut-In Wellhead Pressure (psi) 800

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**Rig Information**

Name	Id	Type	ABS Date	Coast Guard Date
DCOR 455	100055	PLATFORM		

**Blowout Preventers**

Preventer	Size	Working Pressure	--- Test Pressure ---	
			Low	High
Rams	13-5/8	5000	250	3000
Annular		5000	250	3000

Date Commencing Work (mm/dd/yyyy) 15-DEC-2023

Estimated duration of the operation (days) 8

**Verbal Approval Information**

Official	Date (mm/dd/yyyy)
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**Questions**

Number	Question	Response	Response Text
A	Is H2S present in the well? If yes, then comment on the inclusion of a Contingency Plan for this operation.	YES	H2S contingency plan is in place. H2S cascade system is installed and operational. H2S detection systems are installed and operational.
B	Is this proposed operation the only lease holding activity for the subject lease? If yes, then comment.	NO	
C	Will all wells in the well bay and related production equipment be shut-in when moving on to or off of an offshore platform, or from well to well on the platform? If not, please explain.	NO	Solid, steel deck between drill deck and well bays, per field rules no well shut in required.
D	If sands are to be commingled for this completion, has approval been obtained?	N/A	
E	Will the completed interval be within 500 feet of a block line? If yes, then comment.	N/A	
F	For permanent abandonment, will casings be cut 15 feet below the mudline? If no, then comment.	N/A	
G	Will you ensure well-control fluids, equipment, and operations be designed, utilized, maintained, and/or tested as necessary to control the well in foreseeable conditions and circumstances, including subfreezing conditions?	YES	See attached DCOR well control plan

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H	Will digital BOP testing be used for this operation? If "yes", state which version in the comment box?	N/A	
I	Is this APM being submitted to remediate sustained casing pressure (SCP)? If "yes," please specify annulus in the comment box. If you have been given a departure/denial for SCP, include in the attachments.	N/A	
J	Are you pulling tubulars and/or casing with a crane? If "YES" have documentation on how you will verify the load is free per API RP 2D. This documentation must be maintained by the lessee at the lessee's field office.	NO	
K	Will the proposed operation be covered by an EPA Discharge Permit? (Please provide permit number comments for this question).	NO	
L	Will you be using multiple size work string/ tubing/coil tubing/snubbing/wireline? If yes, attach a list of all sizes to be used including the size, weight, and grade.	YES	See attached workover procedure
M	For both surface and subsea operations, are you utilizing a dynamically positioned vessel and/or non-bottom supported vessel at any time during this operation?	NO	

**ATTACHMENTS**

File Type	File Description
pdf	Third party Initial BOPE Certification
pdf	Shear Test Certification
pdf	Workover Procedure and Well Information
pdf	APM Proof of Payment
pdf	Gilda Well Control Plan
pdf	Rig/Coil Tubing/Snubbing Unit BOP Schematic
pdf	Proposed Wellbore Schematic
pdf	Current Wellbore Schematic
pdf	Gilda Field Rules

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pdf Acid Procedure Rev with SB4 Details

#### CONTACTS

<b>Name</b>	Carlo De La Rosa
<b>Company</b>	DCOR, L.L.C.
<b>Phone Number</b>	805-535-2026
<b>E-mail Address</b>	CDeLaRosa@dcorllc.com
<b>Contact Description</b>	

CERTIFICATION: I certify that information submitted is complete and accurate to the best of my knowledge. I understand that making a false statement may subject me to ci

Name and Title

Date

Carlo De La Rosa , Production Engineer

17-OCT-2023

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. MMS uses the information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operation. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.196. 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 this form is estimated to average 11/4 hours per response, including 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, Mail Stop 4230, Minerals Management Service, 1849 C Street, N.W., Washington, DC 20240.

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#### Variations Requested for this Permit

Variance Status:	APPROVED
Variance Type:	Alternate Compliance
Variance Title:	Cutting Device Alternative Compliance
Regulation Number:	30 CFR 250.733(a)(1)
Oper. Justification:	Per DCOR's Well Control Plan for Platform Gilda Flowing Wells, an alternative cutting device capable of shearing all planned auxiliary lines and ESP cable will be present on the rig floor at all times. Shear test provided does not demonstrate the capability to shear associated exterior lines, nor does it demonstrate the inability to shear associated exterior lines.
Variance Date:	
BSEE Decision	Approved
Remarks:	18-OCT-23

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