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Application for Permit to Modify (APM)

Lease P00205 Area LA Block 6912 Well Name E022 ST 01 BP 00 Type Development	
Application Status Approved Operator 03539 Beacon West Energy Group, LLC	
Pay.gov Pay.gov	
Amount: \$145.00 Tracking ID: EWL-APM-243448 Tracking ID: 271HFHUK	
	٦
General Information	
API 043112074701 Approval Dt 30-MAR-2023 Approved By Carl Lakner	
Submitted Dt 30-MAR-2023 Well Status Temporarly Abandoned Water Depth 739	
Surface Lease P00205 Area LA Block 6912	
Approval Comments	
Conditions of Approval:	
1) All operations must be conducted in accordance with the OCS Lands Act (OCSLA), the lea	ıse
terms and stipulations, the regulations of 30 CFR Part 250, Notices to Lessees and	
Operators (NTLs), the approved (revised) Application for Permit to Modify (APM/RPM), and	
any written instructions or orders of the District Manager. 2) A copy of this permit (including all attachments) must be kept on location and made	
available to inspectors upon request during the permitted operation.	
3) Any casing or annuli that fails a pressure test or bubble test must be reported to the	غ ا
Permitting section and remediated prior to proceeding.	
4) A pressure test and bubble test must be performed on the existing wellbore prior to	
cutting and removing the conductor. The results must be recorded in the WAR and EOR.	
5) You must have a PE certify any changes prior to these operations being performed. You must submit a revised permit with the PE certification for the revisions to this office	
within 72 hours.	
6) Notify the Permitting Section at Least 24 hours in advance of beginning these approved	ı
operations AND of any required BOP tests AND of any plug testing or tagging.	
7) Results of all annuli testing and plug testing must be included with the EOR.	
8) WAR reports are due no later than noon each Wednesday.	.
9) The Permitting section must be notified at least 24 hours in advance of pressure test annuli or plugs so that they might witness same. The Permitting section must also be	.ng
notified of any plug tags and bubble tests for the same reason.	
Correction Narrative	
Permit Primary Type Abandonment Of Well Bore	
Permit Subtype(s)	
Permanent Abandonment	
Proposed or Completed Work	
Operation Description	
operation bescription	
Procedural Narrative	
See attached procedure	
Subsurface Safety Valve	
Type Installed N/A	
Feet below Mudline	
Maximum Anticipated Surface Pressure (psi)	
Shut-In Tubing Pressure (psi) 0	
Maximum Anticipated Wellhead Pressure (psi)	
Shut-In Wellhead Pressure (psi) 0	

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Rig Information

Name Id Type ABS Date Coast Guard Date * NON RIG UNIT OPERATION 50941 Non-rig PA Operat: 31-DEC-2049 31-DEC-2049

Blowout Preventers

--- Test Pressure ---

Preventer Size Working Pressure Low High

Date Commencing Work (mm/dd/yyyy) 31-MAR-2023

Estimated duration of the operation (days) 14

Verbal Approval Information

Official Date (mm/dd/yyyy)

Questi	ons		
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 in place for Gail platform
В	Is this proposed operation the only lease holding activity for the subject lease? If yes, then comment.	N/A	
С	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.	YES	
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.	YES	
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	

Application for Permit to Modify (APM)

Lease I	200205 Area LA Block 6912 Wel	.1 Name EC	22 ST 01 BP 00 Type Development
Applica	ation Status Approved Operato	or 03539 Be	eacon West Energy Group, LLC
Quest	ions		
	r Question		Response Text
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.	NO	
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.	YES	
K	Will the proposed operation be covered by an EPA Discharge Permit? (Please provide permit number comments for this question).	YES	CAG280000
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.	NO	
М	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	
		TACHMENT	?S
File T	Beacon DNA	~ .	
pdf pdf	Proposed Wellbore S	chematic	
pdf	Gail E-22 PA Proce	uure	
		CONTACTS	
Name	Katie Preskitt		
Compan	Chevron U.S.A. Inc	•	
Phone	Number 985-773-7113		

U.S. Department of the InteriorBureau of Safety and Environmental Enforcement (BSEE)

Application for Permit to Modify (APM)

Lease	P0020	5	Area	LA	Block	6912	Well	Name	E022	ST 01	BP 00	Тур	e Development
Appli	catior	sta	tus	Appı	roved	OI	perator	03539	Beacon	West E	nergy Gr	oup,	LLC
E-ma	E-mail Address CONTACTS												
Conta	Contact Description												
					lhvg@ch	evron.	com						
	David Beckmann												
	Chevron U.S.A. Inc.												
					985-773	-6132							
					beckman	n@chev	ron.com	n					
					Project	Manad	er						

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 careful the statement of the careful that making a false statement may subject me to careful the statement of t

Name and Title

Katie Preskitt, Technical Assistant

30-MAR-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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U.S. Department of the InteriorBureau of Safety and Environmental
Enforcement (BSEE)

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Variances Requested for this Permit

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