		erating Company, LLC
Pay.gov	Agency	Pay.gov
Amount: \$145.00	Tracking ID: EWL-APM-25268	Tracking ID: 27F54AHL
General Information		
API 043122002500	Approval Dt 12-JUN-2024	Approved By Carl Lakner
Submitted Dt 10-JUN-2024	Well Status Completed	Water Depth 265
Surface Lease P00300	Area LB	Block 6438
Approval Comments		
terms and stipulations, the subprove Operators (NTLs), the approve any written instructions or o	regulations of 30 CFR Part 25 ed (revised) Application for orders of the District Manage	Permit to Modify (APM/RPM), and
3) All pressure containing ed recorded on the daily operat the approved permit, the equi	ions report. If well pressure ipment in use must be tested strict must be immediately no	operation. e approved permitted pressure and s exceed the SITP/MASP stated in at a minimum to the new observed tified of this pressure change and
operations AND of any require	ed BOP tests.	ance of beginning these approved
operations AND of any require 5) WAR reports are due no la		ance of beginning these approved
operations AND of any require 5) WAR reports are due no la Correction Narrative	ed BOP tests.	ance of beginning these approved
operations AND of any require 5) WAR reports are due no la Correction Narrative Permit Primary Type Workover	ed BOP tests.	ance of beginning these approved
operations AND of any require 5) WAR reports are due no la Correction Narrative Permit Primary Type Workover	ed BOP tests.	ance of beginning these approved
Deperations AND of any require b) WAR reports are due no late Correction Narrative Permit Primary Type Workover Permit Subtype(s) Other Workover	ed BOP tests. ter than noon each Wednesday.	ance of beginning these approved
operations AND of any require b) WAR reports are due no late correction Narrative Permit Primary Type Workover Permit Subtype(s) Other Workover X Proposed or Completed	ed BOP tests. ter than noon each Wednesday.	ance of beginning these approved
operations AND of any require b) WAR reports are due no late correction Narrative Permit Primary Type Workover Permit Subtype(s) Other Workover X Proposed or Completed Operation Description	ed BOP tests. ter than noon each Wednesday. Work	ance of beginning these approved
operations AND of any require b) WAR reports are due no late correction Narrative Permit Primary Type Workover Permit Subtype(s) Other Workover X Proposed or Operation Description Pull and replace the ESP pump	ed BOP tests. ter than noon each Wednesday. Work	ance of beginning these approved
Deperations AND of any require D) WAR reports are due no late Correction Narrative Permit Primary Type Workover Permit Subtype(s) Other Workover X Proposed or Completed Deperation Description Pull and replace the ESP pump Procedural Narrative	ed BOP tests. ter than noon each Wednesday. Work p with coil tubing cleanout.	ance of beginning these approved
Dependitions AND of any require Dependitions AND of any require Dependition Narrative Permit Primary Type Workover Permit Subtype(s) Other Workover X Proposed or Dependent Operation Description Pull and replace the ESP pump Procedural Narrative The A-01 ESP is showing signs This workover will pull the D	ed BOP tests. ter than noon each Wednesday. Work p with coil tubing cleanout. s of wearing out.	ith coil tubing, acidize with
operations AND of any require 5) WAR reports are due no lat Correction Narrative Permit Primary Type Workover Permit Subtype(s) Other Workover X Proposed or Completed Operation Description Pull and replace the ESP pump Procedural Narrative The A-01 ESP is showing signs This workover will pull the T 8,000 gals of DAD acid (SB4 ~ SB4 Volume calculation: 71.8 gals per foot over 824'	ed BOP tests. ter than noon each Wednesday. Work p with coil tubing cleanout. s of wearing out. ESP, clean out the wellbore w volume is 59,163 gals) and ru	ith coil tubing, acidize with n a new ESP pump. ity of 26% yields an SB4 volume of

BSEE FORM BSEE-0124

23-JUL-2024 10:36:06 AM

Lease	P00301 Area LB	Block 6438	Well	Name	A001	ST 00	BP 01	Type D	evelopment
Applic	cation Status Appr	oved	Operator	03126	Beta	Operating	g Company	, LLC	
Fee Ma: Shu Ma: Shu	e Installed SCSS et below Mudline 3 ximum Anticipated ut-In Tubing Press ximum Anticipated ut-In Wellhead Pre	29 Surface Pre ure (psi) Wellhead Pre							
_	Information	- 1	_					-	
Name BETA	RIG #1	Id 360		ype LATFORI	М		5 Date -JAN-2014		ast Guard Date JAN-2014
Blowc	out Preventers					Tost	Pressure		
Preve	enter	Size	Working	g Press	sure	Low	High		
Rams		2x5	5000			250	2350		
Annul	lar		5000			250	2350		
Coil	Tubing		10000			250	5000		
Date C	Commencing Work (m	m/dd/yyyy)	L6-JUN-2	024					
Istima	ated duration of the	he operation	(days)	4					
Verba	al Approval Info	ormation							
	Official .			Date (1	nm/dd	/уууу)			
~	cions er Question			Respon	se Re	sponse Te	xt		
A	Is H2S present yes, then comme inclusion of a for this operat	nt on the Contingency	? If	NO					
В	Is this propose only lease hold the subject lea comment.	d operation ing activity	/ for	NO					
С	Will all wells and related pro be shut-in when off of an offsh from well to we platform? If no explain.	duction equ: moving on t ore platform ll on the	ipment to or	N/A					
D	If sands are to for this comple approval been o	tion, has	Led	N/A					
E	Will the comple within 500 feet If yes, then co	ted interval of a block		NO					
F	For permanent casings be cut mudline? If no,	abandonment 15 feet belo	ow the	N/A					

Area LB **Lease** P00301 **Block** 6438 Well Name A001 **ST** 00 BP 01 Type Development Operator 03126 Beta Operating Company, LLC Application Status Approved Questions Number Question Response Response Text G Will you ensure well-control YES 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? Н Will digital BOP testing be used NO for this operation? If "yes", state which version in the comment box? I Is this APM being submitted to NO 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. J Are you pulling tubulars and/or NO 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. Will the proposed operation be N/A K covered by an EPA Discharge Permit? (Please provide permit number comments for this question). Will you be using multiple size NO L work string/ tubing/coil tubing/snubbing/wireline? If yes, attach a list of all sizes to be used including the size, weight, and grade. For both surface and subsea М NO operations, are you utilizing a dynamically positioned vessel and/or non-bottom supported vessel at any time during this operation? ATTACHMENTS File Type File Description Well A-001 CER pdf

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

Application for Permit to Modify (APM)

Lease P00301 Area LB	Block 6438 Well Name A001 ST 00 BP 01 Type Development					
Application Status App	proved Operator 03126 Beta Operating Company, LLC					
	,					
pdf	Well Test Information					
pdf	Proposed Wellbore Schematic					
pdf	Current Wellbore Schematic					
pdf	Deviation Survey with dog leg severity					
pdf	Workover Program					
pdf	Ellen BOP Data - Ann Prev 1					
pdf	Ellen BOP Data - Ann Prev 2					
pdf	Ellen BOP Data - DG Prev 1					
pdf	Ellen BOP Data - DG Prev 2					
pdf	Ellen BOP Data - DG Prev 3					
pdf	Ellen BOP Data - DG Prev 4					
pdf	Ellen BOP Data - DG Prev 5					
pdf	Ellen BOP Data - DG Prev 6					
pdf	Ellen Drill Spool Cert					
pdf	Ellen SG Prev 1					
pdf	Ellen SG Prev 2					
pdf	Coil Tbg Cert 1					
pdf	Coil Tbg Cert 2					
CONTACTS						
Name	Rebecca Altemus					
Company	Beta Operating Company, LLC					
Phone Number	832-408-8652					
E-mail Address	rebecca.altemus@amplifyenergy.com					
Contact Description						

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 ca

Name and Title		Date	
	Rebecca Altemus, Senior Staff Reservoir Eng		10-JUN-2024

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.

Lease P00301	Area LB	Block 64	438 Well	Name	A001	ST 00	BP 01	Type Development
Application Sta	atus Appro	oved	Operator	03126	Beta	Operating	Company	, LLC

Variances Requested for this Permit

Lease P00301	Area LB	Block	6438 Well	Name	A001	ST 00	BP 01	Type Development
Application St	atus Appro	oved	Operator	03126	Beta	Operating	Company	, LLC