

Application for Permit to Modify (APM)

Lease P00216 Area LA Block 6862 Well Name S039 ST 00 BP 00 Type Development
Application Status Approved Operator 02531 DCOR, L.L.C.

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Amount: Tracking ID: 76909758487 Tracking ID: 27K2LPR9

General Information
API 043112058000 Approval Dt 16-JAN-2025 Approved By Bethram Ofole
Submitted Dt 16-DEC-2024 Well Status Completed Water Depth 205
Surface Lease P00216 Area LA Block 6862

Approval Comments
Conditions of Approval
1. All operations must be conducted in accordance with the OCS Lands Act (OCSLA), the lease 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 or their designee.
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. All pressure-containing equipment must be tested to the approved permitted pressure and recorded in the daily operations report. If well pressures exceed the SITP/MASP stated in the approved permit, the equipment in use must be tested to a minimum of the newly observed pressure. The District Manager or their designee must be immediately notified of this pressure change, and an RPM must be submitted to document the change.
4. Notify the Permitting Section at least 72 hours in advance of beginning these approved operations AND of any required BOP tests AND of any plug testing or tagging. You MUST NOT proceed with these operations until an inspector can arrive to witness the testing OR the Permitting Section Chief or their designee waives the witnessing.
5. WAR reports are due no later than noon each Wednesday.

Correction Narrative

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

Proposed or Completed Work

Operation Description
Planned work is to acid wash the completion and install an ESP pump.

Procedural Narrative
The workover is being proposed due to the reduced efficiency of the ESP artificial lift equipment. The proposed program involves killing the well, pulling the production string, acid washing the completion, then running a new ESP completion. The work will be performed with a conventional rig with wireline support as needed.

Acid Cleanup Calculations (for further details, see attached acid procedure)
SB4 Formula
$$(((\text{Size of drill bit diameter in inches that was used in the treated zone} / 2 + 36 \text{ inches})^2 - (\text{bit diameter in inches} / 2)^2) \times 3.14159 \times 12 \text{ inches} \times \text{treated formation}$$

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porosity) / 231 (inches³/gallon)

SB4 with Variables

$((12.25 \text{ inch bit diameter}/2 + 36 \text{ inches})^2 - (12.25 \text{ inches bit diameter}/2)^2) \times 3.14159 \times 12$
 (Inches/foot) $\times 0.300$ treated formation porosity) / 231 (inches³/gallon) = 85 Gallons per
 foot maximum

Subsurface Safety Valve

Type Installed SCSSV

Feet below Mudline 377

Maximum Anticipated Surface Pressure (psi) 1500

Shut-In Tubing Pressure (psi) 800

Maximum Anticipated Wellhead Pressure (psi)

Shut-In Wellhead Pressure (psi)

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 |
| Coil Tubing | | 0 | 0 | 0 |
| Snubbing | | | 0 | 0 |
| Wireline | | | 0 | 0 |

Date Commencing Work (mm/dd/yyyy) 01-APR-2025

Estimated duration of the operation (days) 8

Verbal Approval Information

Official

Date (mm/dd/yyyy)

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 | |

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Questions

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|--------|---|----------|---|
| 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 |
| 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 | |

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|--------|---|----------|----------------------------------|
| 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 | Well S-39 CER |
| pdf | Rig/Coil Tubing/Snubbing Unit BOP Schematic |
| pdf | Proposed Wellbore Schematic |
| pdf | Current Wellbore Schematic |
| pdf | 3rd Party BOPE certification |
| pdf | Acid Procedure with SB4 Details |
| pdf | Gilda Field Rules |
| pdf | Gilda Well Control Plan |
| pdf | Workover Procedure |
| pdf | Shear Test Certification |
| pdf | Proof of APM Payment |

CONTACTS

| | |
|----------------------------|-----------------------|
| Name | Carlo De La Rosa |
| Company | DCOR, L.L.C. |
| Phone Number | 805-535-2026 |
| E-mail Address | CDeLaRosa@dcorllc.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 c1

Name and Title

Date

Carlo De La Rosa , Production Engineer

16-DEC-2024

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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) |
| 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: | 16-JAN-25 |

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Existing Variances

No previously approved variances exist for this permit

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Reviews

| | |
|------------------|--|
| Review: | APM - District Production Engineering Review |
| Sent: | 14-JAN-25 |
| Review Started: | 14-JAN-25 |
| Review Finished: | 15-JAN-25 |
| Info Adequate: | Y |
| Review Remarks: | |
| Review: | BOP Control System Drawing Review |
| Sent: | 14-JAN-25 |
| Review Started: | 14-JAN-25 |
| Review Finished: | 15-JAN-25 |
| Info Adequate: | Y |
| Review Remarks: | |
| Review: | Determination of NEPA Adequacy |
| Sent: | 18-DEC-24 |
| Review Started: | 18-DEC-24 |
| Review Finished: | 18-DEC-24 |
| Info Adequate: | Y |
| Review Remarks: | |