

WELL ACTIVITY REPORT

BEGINNING DATE: _____

ENDING DATE: _____

REPORT IS NOT TO EXCEED 7 DAYS (1 WEEK) IN DURATION

<input type="checkbox"/> CORRECTION <input type="checkbox"/> CHECK IF THIS IS THE LAST WELL ACTIVITY REPORT											
GENERAL INFORMATION											
1. API WELL NO. (10 digits)						2. OPERATOR NAME					
3. WELL NAME		4. SIDETRACK NO.		5. BYPASS NO.		6. CONTACT NAME / CONTACT TELEPHONE NUMBER / CONTACT E-MAIL ADDRESS					
7. RIG NAME OR PRIMARY UNIT (e.g., wireline unit, coil tubing unit, etc.)							8. WATER DEPTH (surveyed) (ft)		9. ELEVATION AT KB (Surveyed) (ft)		
10. CURRENT WELLBORE INFORMATION											
SURFACE					BOTTOM						
LEASE NO.	AREA NAME		BLOCK NO.			LEASE NO.			BLOCK NO.		
WELLBORE	START DATE	TD DATE	STATUS	END DATE	KOP (MD)	MD	TVD	MW PPG	LAST BOP TEST DATE	LAST BOP TEST PRESSURE	
										LOW	HIGH
11. WELLBORE HISTORICAL INFORMATION											
WELLBORE	BOTTOM LEASE	START DATE	TD DATE	PA DATE	FINAL MD		FINAL TVD				

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12. CASING / LINER / TUBING RECORD									
TUBULAR TYPE	HOLE SIZE (IN)	SIZE (IN)	WEIGHT (#/ft)	GRADE	TEST PRESSURE (psi)	SHOE TEST (EMW)	SETTING DEPTH (MD)		CEMENT QUANTITY (cubic ft.)
							TOP	BOTTOM	

13. WELL ACTIVITY SUMMARY
Provide a daily summary of well activities.

14. Open Hole Log Data
Minerals Management Service's Technical Data Management Section requires an Open Hole Well Report (Form MMS-133S) to accompany this Well Activity Report if any of the below conditions have occurred for this wellbore during this period:
<input type="checkbox"/> None of the following have occurred: <ul style="list-style-type: none"> ‣Wireline logs (Report when acquired) ‣Wireline Directionals (Report when acquired) ‣Velocity Surveys, VSP's, Conventional Cores, Rotary and Percussion Sidewall Cores (Report when acquired) ‣Completed MWD/LWD logs and Mudlogs - (Report when they are completed.) ‣PVT, Paleontological and Geochemical Samples acquired for analysis (Report at completion of Borehole)
<input type="checkbox"/> Any of the above have occurred; if checked then submit Form MMS-133S.

15. Significant Well Events		
Please check as many events from the list below:		
<table style="width:100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Kick Occurrence <input type="checkbox"/> Shallow Water Flow <input type="checkbox"/> Weather and Oceanographic Conditions <input type="checkbox"/> General Rig Equipment Failure <input type="checkbox"/> Lost Returns <input type="checkbox"/> Station Keeping Failure </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Well Control Equipment Failure <input type="checkbox"/> H₂S Encounter <input type="checkbox"/> New Technology Failure <input type="checkbox"/> Stuck Pipe <input type="checkbox"/> Wellbore Integrity Failure <input type="checkbox"/> Other </td> </tr> </table>	<input type="checkbox"/> Kick Occurrence <input type="checkbox"/> Shallow Water Flow <input type="checkbox"/> Weather and Oceanographic Conditions <input type="checkbox"/> General Rig Equipment Failure <input type="checkbox"/> Lost Returns <input type="checkbox"/> Station Keeping Failure	<input type="checkbox"/> Well Control Equipment Failure <input type="checkbox"/> H ₂ S Encounter <input type="checkbox"/> New Technology Failure <input type="checkbox"/> Stuck Pipe <input type="checkbox"/> Wellbore Integrity Failure <input type="checkbox"/> Other
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Please provide narrative information with regards to any significant events. Provide attachments, if necessary.

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 operations. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.197. 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 forms MMS-133 and MMS-133S is estimated to average between 0.5 - 3 hours per response, depending on whether it is a paper submittal or electronic submittal. This includes 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, NW, Washington, DC 20240.