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

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Application for Permit to Modify (APM)

/ELL NAME (CURRENT)			2. SIDETRACK NO. (CURRENT)		3. BYPASS NO. (CURRENT)		4. OPERATOR NAME (Submitting office)	and ADDRESS	
PI W	PI WELL NO. (12 digits) 6. START DATE			posed)	7. ESTIMATED DURATION (DA	YS)			
	Revision	9. If revision, list cha	anges:						
	WELL AT TOTAL DEPTH			WELL AT SURFACE					
SI	SE NO.			13. LEASE NO.					
ĒĀ	A NAME		14. AREA NAME						
ЪС	CK NO.			15. BLOCK NO.					
	Proposed or Completed Work								
			(Describe in Section 17)	ANY SE	CONDARY TYPES AS NECESS	ARY			
	letion		Workover:				Production		
_	nitial Comple		Change Tubing			Aci	Acidize		
_	eperforation		Casing Pressu	•		Artifical Lift			
_	hange Zone Iodify Perfor		□ Abandonment of \	Wash/Desand Well					
ity		alions	Abandonment of a Permanent Aba						
	nitial Injectio	n Well	Temporary Aba			-	mation:		
_		ids for Injection	Plugback to Side						
			•						
er	Operations	5	Site Clearance				ange wen Name		
ס	escribe Ope	eration(s)	ERATIONS (Attach progne				ange wen Name		
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BS Form BSEE-0124 (May 2014 - Supersedes all previous versions of this form which may not be used.)

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Application for Permit to Modify (APM) Information Sheet

35) Question Information								
Questions	Response	Remarks						
A) Is H ₂ S present in the well? If yes, then comment on the inclusion of a Contingency Plan for this operation.	□ YES □ NO □ N/A							
B) Is this proposed operation the only lease holding activity for the subject lease? If yes, then comment.	 □ YES □ NO □ N/A 							
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.	□ YES □ NO □ N/A							
D) If sands are to be commingled for this completion, has approval been obtained?	□ YES □ NO □ N/A							
E) Will the completed interval be within 500 feet of a block line? If yes, then comment.	□ YES □ NO □ N/A							
F) For permanent abandonment, will casings be cut 15 feet below the mudline? If no, then comment.	□ YES □ NO □ N/A							

CERTIFICATION: I certify that the information submitted is complete and accurate to the best of my knowledge. I understand that making a false statement may subject me to criminal penalties under 18 U.S.C. 1001.

Name and Title: _____ Date: _____

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. BSEE 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 250.197. 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 reviewing the instructions, completing and filling out this form only is estimated to average 1 hour per response. The burden for the attachments required in the form range from 10 minutes to 1.5 hours depending on the requirement. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Bureau of Safety and Environmental Enforcement, 381 Elden Street, Herndon, VA 20170.

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