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

OMB Control No. 1014-0025
OMB Approval Expires 04-30-2020

Supplemental APD Information Sheet (Casing Design)

1) Operator Name:	2) Well Name (Proposed): ST: BP:	
3) Bottom Hole Lease:	4) Surface Lease:	
5) API Number:	6)Type of Well: ☒ Exploratory ☐ Development	
7) H_2S: ☐ Absent ☐ Known ☐ Unknown	8) H_2S Activation Plan Depth (TVD) (ft):	
9) Rig Name:	10) SubSea BOP: ☒ Yes ☐ No	
11) Water Depth (ft):	12) RKB Height (ft):	13) Mineral Code:
14) Drive Pipe Size (in):	15) Drive Pipe Depth (ft):	16) Anchors ☐ Yes ☐ No

17) Well Design Information

Interval Number: **Type:** **Name:**

Section Number	Casing Size (in)	Casing Weight (#/ft)	Casing Grade	Burst Rating (psi)		Collapse Rating (psi)	Depth (ft) MD TVD	Pore Pressure (ppg)

GENERAL INFORMATION	PREVENTER INFORMATION	TEST INFORMATION
Hole Size (in)	Type	Annular Test (psi)
Mud Weight (ppg)	Size (in)	BOP/Diverter Test (psi)
Mud Type Code	Wellhead Rating (psi)	Mud Test Weight (ppg)
Frac Gradient (ppg)	Annular Rating (psi)	Casing/Liner Test (psi)
Liner Top Depth (ft)	BOP/Diverter Rating (psi)	Formation Test (ppg)
Cement Volume (ft^3)		

Interval Number: **Type:** **Name:**

Section Number	Casing Size (in)	Casing Weight (#/ft)	Casing Grade	Burst Rating (psi)		Collapse Rating (psi)	Depth (ft) MD TVD	Pore Pressure (ppg)

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Frac Gradient (ppg)	Annular Rating (psi)	Casing/Liner Test (psi)
Liner Top Depth (ft)	BOP/Diverter Rating (psi)	Formation Test (ppg)
Cement Volume (ft^3)		

Interval Number: **Type:** **Name:**

Section Number	Casing Size (in)	Casing Weight (#/ft)	Casing Grade	Burst Rating (psi)		Collapse Rating (psi)	Depth (ft) MD TVD	Pore Pressure (ppg)

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Frac Gradient (ppg)	Annular Rating (psi)	Casing/Liner Test (psi)
Liner Top Depth (ft)	BOP/Diverter Rating (psi)	Formation Test (ppg)
Cement Volume (ft^3)		

*** NOTE*** For additional casing/liner intervals, please submit an additional Form BSEE-0123S.

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. The burden to fill out Forms BSEE-0123 + BSEE-0123S is estimated at 1 hour per response. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Bureau of Safety and

regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Bureau of Safety and Environmental Enforcement, 45600 Woodland Road, Sterling, VA 20166.