

## Application for Permit to Drill (APD)

1. PROPOSAL TO DRILL <input type="checkbox"/> NEW WELL <input type="checkbox"/> SIDETRACK <input type="checkbox"/> BYPASS <input type="checkbox"/> DEEPEN		2. BSEE OPERATOR NO.	3. OPERATOR NAME and ADDRESS <i>(Submitting office)</i>
4. WELL NAME (CURRENT)	5. SIDETRACK NO. (CURRENT)	6. BYPASS NO. (CURRENT)	
7. PROPOSED START DATE	8. PLAN CONTROL NO. (NEW WELL ONLY)		
9. API WELL NO. (CURRENT SIDETRACK / BYPASS) (12 DIGITS)			

10. <input type="checkbox"/> Revision	11. If revision, please list changes:
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WELL AT TOTAL DEPTH (PROPOSED)		WELL AT SURFACE	
12. LEASE NO.		17. LEASE NO.	
13. AREA NAME		18. AREA NAME	
14. BLOCK NO.		19. BLOCK NO.	
15. LATITUDE ( <input type="checkbox"/> NAD 83 / <input type="checkbox"/> NAD 27)	16. LONGITUDE ( <input type="checkbox"/> NAD 83 / <input type="checkbox"/> NAD 27)	20. LATITUDE ( <input type="checkbox"/> NAD 83 / <input type="checkbox"/> NAD 27)	21. LONGITUDE ( <input type="checkbox"/> NAD 83 / <input type="checkbox"/> NAD 27)

### LIST OF SIGNIFICANT MARKERS ANTICIPATED

22. NAME	23. TOP (MD)	24. TOP (TVD)	22. NAME	23. TOP (MD)	24. TOP (TVD)

25. LIST ALL ATTACHMENTS (*Attach complete well prognosis + attachments required by 30 CFR 250.414 or 30 CFR 250.1617(c) and (d) as appropriate.*)

26. CONTACT NAME		27. CONTACT TELEPHONE NO.	28. CONTACT E-MAIL ADDRESS
29. AUTHORIZING OFFICIAL ( <i>Type or print name</i> )		30. TITLE	
31. AUTHORIZING SIGNATURE		32. DATE	

THIS SPACE FOR BSEE USE ONLY		
APPROVED: <input type="checkbox"/> With Attached Conditions <input type="checkbox"/> Without Conditions	BY	TITLE
API WELL NO. ASSIGNED TO THIS WELL		DATE

**Application for Permit to Drill (APD) Information Sheet**

33) Question Information Sheet		
Questions	Response	Remarks
A) Will you maintain quantities of mud and mud material (including weight materials and additives) sufficient to raise the entire system mud weight 1/2 ppg or more?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	
B) If hydrocarbon-based drilling fluids were used, is the drilling rig outfitted for zero discharge and will zero discharge procedures be followed?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	
C) If drilling the shallow casings strings riserless, will you maintain kill weight mud on the rig and monitor the wellbore with an ROV to ensure that it is not flowing?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	
D) If requesting a waiver of the conductor casing, have you submitted a log to BSEE District Office that is within 500 feet of the proposed bottom hole location for the proposed surface casing point?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	
E) Will the proposed operation be covered by an EPA Discharge Permit? (please provide permit number in remarks for this question)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	
F) 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.	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	
G) Is the calculated daily volume possible from an uncontrolled blowout of this well greater than the daily volume included in the worst case discharge scenario in the approved oil spill response plan?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	