U.S. Department of the Interior Bureau of Ocean Energy Management

OCS PLAN INFORMATION FORM

	General Information										
Type	of OCS Plan:	Expl	oration Plan (E	P) Dev	Development Operations Coordination Document (DOCD)						
Company Name: B0					BOEM Op	perator Numb	er:			•	
Addre	ess:				Contact Person:						
					Phone Nu	mber:					
					E-Mail Ad	ddress:					
If a se	rvice fee is required u	nder 30 C	FR 550.125(a),	provide t	he A	mount paid		Receipt 1	No.		
			Project ar	nd Wor	st Case Di	ischarge (V	VCD) Infor	mation			
Lease	(s):		Area:	Block	(s): Proje	ect Name (If A	applicable):				
Objec	tive(s) Oil	Gas	Sulphur	Salt	Onshore	Support Base	(s):				
Platfo	rm/Well Name:	•	Total Volum	e of WCE):			API Gravit	y:		
Distar	nce to Closest Land (M	files):	-1	Volu	me from unc	controlled blo	wout:	II.			
Have	you previously provid	ed inform	ation to verify t	he calcula	ations and as	ssumptions fo	r your WCD?		Yes	No	
If so,	provide the Control N	umber of	the EP or DOC	D with wh	nich this info	ormation was	provided			<u>'</u>	
Do yo	u propose to use new	or unusua	l technology to	conduct y	our activitie	es?			Yes	No	
Do yo	u propose to use a ves	sel with a	nchors to instal	l or modi	fy a structure	e?			Yes	No	
Do yo	u propose any facility	that will s	serve as a host	acility fo	r deepwater	subsea develo	pment?		Yes	No	
Description of Proposed Activities and Tentative Schedule (Mark all that apply)											
	Propo	sed Activ	ity		Star	t Date	End 1	Date		No. of Days	
Explo	ration drilling										
Devel	opment drilling										
Well	completion										
Well	est flaring (for more th	han 48 ho	urs)								
Instal	ation or modification	of structu	re								
Instal	ation of production fa	cilities									
Instal	ation of subsea wellhe	eads and/o	or manifolds								
Instal	ation of lease term pip	elines									
Comn	nence production										
Other	(Specify and attach de	escription))								
Description of Drilling Rig							Des	scription o	f Structu	re	
	Jackup		Drillship			Cais	son		Tension le	g platform	
	Gorilla Jackup		Platform	rig		Fixe	d platform		Compliant	tower	
Semisubmersible Submersible				Spar			Guyed tow	ver			
DP Semisubmersible Other (Attach Desc					cription)		ting production	1	Other (Att	ach Description)	
Drilling Rig Name (If Known):						syste	:111				
				Descrip	otion of L	ease Term	Pipelines				
Fro	m (Facility/Area/Bloo	ck)	To (Facilit	y/Area/B	lock)	Di	ameter (Inche	s)		Length (Feet)	

OMB Control Number: 1010-0151 OMB Approval Expires: 6/30/2021

OCS PLAN INFORMATION FORM (CONTINUED) Include one copy of this page for each proposed well/structure

Proposed Well/Structure Location													
Well or Structus structure, refere			naming well or	·	Previ DOC		under an approved	EP or		Yes		No	
Is this an existi or structure?	ng well	Ye	es N		existing well of D or API No.	structure, list the		•			•		
Do you plan to	to use a subsea BOP or a surface BOP on a floati					ting facility to conduct your proposed activities?				Ye	S		No
WCD info	For wells, blowout (E	volume of u Bbls/day):	ncontrolled		or structures, volume of all storage and ipelines (Bbls):				API Gravity of fluid				
	Surface Lo	ocation			Botto	m-Hole Location	on (For Wells)			pletion separa			e completions,
Lease No.	OCS				OCS				OCS OCS				
Area Name													
Block No.													
Blockline Departures (in feet)	N/S Depar	ture:	F	_ L		Departure:	F		N/S I N/S I	Departu Departu Departu	ire: ire:		FL FL FL
	E/W Depar	rture:	F	_ L		Departure:	F	L	E/W :	Depart Depart Depart	ure:		F L F L F L
Lambert X- Y coordinates	X:	:			X:				X: X: X:				
	Y:				Y:				Y: Y: Y:				
Latitude/ Longitude	Latitude				Latitude				Latitude Latitude Latitude				
	Longitude				Longitude				Longitude Longitude Longitude				
Water Depth (F	Feet):				MD (Feet): TVD (Feet):					(Feet):			(Feet):
Anchor Radius	(if applicab	ole) in feet:								(Feet): Feet):			(Feet):
Anchor Loc	cations fo	r Drilling	Rig or Con	struct	ion B	arge (If ancho	r radius supplied	above,	not n	ecessai	ry)		
Anchor Name or No.	Area	Block	X Coordinat	e		Y Coordinate		Lengt	h of A	nchor	Chai	n on Sea	ıfloor
			X =	=		Y =							
			X =			Y =							
			X =			Y =							
			X =			Y =							
			X =			Y =							
			X =			Y =							
			X =			Y =							
			X =			Y =							

OCS PLAN INFORMATION FORM (CONTINUED)

Provide the following information for the well with the highest Worst Case Discharge volume:

I	Worst Case Discharge (WCD) Well Information									
	WCD Well Name	Surface Lease	Surface Area/Block	Bottom Lease	Bottom Area/Block	Product Type	MD	TVD		
ŀ	Name		Alta/Block		Area/Block					
L										

Analog Well(s)								
Area/Block	OCS Lease	Well No.	API No.					

Geologic Data for WCD

Open Hole Interval for WCD					
Top (TVD in feet)	Base (TVD in feet)				

	Sand 1	Sand 2	Sand 3	Sand 4	Sand 5
Formation Data					
Sand Name					
Estimated Top TVD					
Estimated Base TVD					
Estimated Net Sand Height MD					
(Net Pay if hydrocarbon)					
Estimated Net Sand Height					
TVT (Net Pay if hydrocarbon)					
Fluid Type					
Used in WCD? (Yes/No)					

Seismic Survey Used						

Engineering Data for WCD

WCD Engineering Items								
WCD (STB/Day)								
WCD Calculated at	Mudline	Yes	No		Atmosphere	Yes	No	
Flow Correlation								
Outlet Pressure (Psia)								
Gas Turbulence Factor								
Software Model Used								

	Sand 1	Sand 2	Sand 3	Sand 4	Sand 5
Formation Data					
Sand Name					
Permeability (mD)					
Initial Pressure (PSIA)					

OCS PLAN INFORMATION FORM (CONTINUED)

	Sand 1	Sand 2	Sand	Sai	nd 4	Sand 5
Formation Data						
Reservoir Temperature (F)						
Porosity (0.00)						
Water Saturation (0.00)						
Rock Compressibility						
(microsips)						
Water Salinity (ppm)						
Drive Mechanism						
Drainage Area (acres)						
Oil Reservoir Data						
Bubble Point Pressure (PSIA)						
Initial Bo (RB/STB)						
Bo (RB/STB) @ Bubble Point						
Rsi (SCF/STB)						
Initial Oil Viscosity (Cp)						
Oil Viscosity (CP) @ Bubble						
Point						
Oil Compressibility (1/PSIA)						
Oil API Gravity (API)						
Specific Gas Gravity (0.00)						
Gas Reservoir Data						
Condensate API Gravity (API)						
Specific Gas Gravity (0.00)						
Yield (STB/MMCF)						
		•	·	•		
Source of Permeability Us	sed					
Permeability from MDT						
Permeability from Core Analysis		Percussion core	Rotary si	dewall core	Conventional c	ore
Pressure Transient Analysis						_
Demonstration Company NAD	1	+				

1 ermedonity from Wib 1						
Permeability from Core Analysis	Percussion core	Rotary sidewall core	Conventional core			
Pressure Transient Analysis						
Permeability from CMR or NMR log						
analysis						
Permeability from other source						
Provide Model Input Values for Relative Permeability:						
Residual Oil to Gas fraction (=1-Slc-Swc)	_		<u> </u>			

Provide Model Input Values for Relative Permeability:	
Residual Oil to Gas fraction (=1-Slc-Swc)	
Residual Oil to Water fraction (=Soc)	
Critical Gas fraction (Sgc, Gas/Oil-Water Systems)	
Residual Gas to Water fraction (Sgc, Gas/Gas-Water Systems)	
Kro Oil Curve Endpoint (fraction of absolute permeability)	
Krg Gas Curve Endpoint (fraction of absolute permeability)	
Krw Water Curve Endpoint (fraction of absolute permeability)	

Paperwork Reduction Act of 1995 Statement: The Paperwork Reduction Act of 1995 (44 U.S.C. 2501 et seq.) requires us to inform you that BOEM collects this information as part of an applicant's Exploration Plan or Development Operations Coordination Document submitted for BOEM approval. We use the information to facilitate our review and data entry for OCS plans. We will protect proprietary data according to the Freedom of Information Act and 30 CFR 550.197. 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 Office of Management and Budget Control Number. Responses are mandatory (43 U.S.C. 1334). The public reporting burden for this form is included in the burden for preparing Exploration Plans and Development Operations Coordination Documents. We estimate that burden to average 600 hours with an accompanying EP, or 700 hours with an accompanying DPP or DOCD, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the forms associated with subpart B. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Bureau of Ocean Energy Management, 45600 Woodland Road, Sterling, Virginia 20166.