

Boreholes - (WLBRHOLE)

Field Leases

(Bottom)

| Field | Lease | Area | Block | Plan | Dist |
|--------|--------|------|-------|------|------|
| WILLAD | Y00865 | FI | 672 | | |

Field Leases (Surface)

| Lease | Area | Block |
|--------|------|-------|
| Y00865 | FI | 672 |

Boreholes

| | | | | | |
|--------|--------------|-----------|-------------|-------------------|-------------------------------------|
| Well | 001 | Curr Oper | 00635 | ARCO ALASKA, INC. | <input type="checkbox"/> Casing Cut |
| API # | 551710000900 | APD | 07-MAY-1993 | Well Class | |
| Status | PA | Spud | 28-JUL-1993 | Well Type | E |
| | 28-AUG-1993 | TD | 19-AUG-1993 | Mineral | H |
| Comps | 0 | | | UCS/UC | N |

Surface Location

Bottom Location

| | |
|-----|-----|
| MD | 0 |
| TVD | 0 |
| RKB | 166 |
| SSD | 0 |
| WD | 101 |

| | | |
|-----|---------|---|
| N/S | 3000 | S |
| E/W | 7000 | W |
| Lat | | |
| Lon | | |
| X | .000000 | |
| Y | .000000 | |

| | | |
|-----|---------|---|
| N/S | 3000 | S |
| E/W | 7000 | W |
| Lat | | |
| Lon | | |
| X | .000000 | |
| Y | .000000 | |

Remark

- (1) ENTERED PLAN AND DIST CODE - 12-22-97
- (2) ENTERED MD AND TVD DEPTH'S - 12-22-97
- (3) ENTERED LAT AND LON COORDINATES - 12-22-97
- (4) ENTERED X AND Y COORDINATES - 12-22-97

Minerals Management Service
Anchorage, Alaska

NOTICE OF INTENT/REPORT OF WELL ABANDONMENT

CONTINUED ON REVERSE

COMPLETE REVERSE SIDE, SIGN, AND DATE

24. PRODUCTION HISTORY (Development wells only)

| | | | | | | |
|---------------------------|-------------|--------------------------|-------------|---------------|-------------------|-----------------------------|
| DATE LAST PROD (4) YYYYMM | WELL STATUS | OIL-BBL (6) | GAS-MCF (6) | WATER-BBL (6) | GAS/OIL RATIO (6) | SHUT-IN TUBING PRESSURE (5) |
| NA | | PROD. FOR LAST PERIOD | | | | Recovered |

ALL PERFORATED INTERVALS CURRENTLY OPEN (5)

OCS District Office

REASON FOR ABANDONMENT (Include supportive well logs and test data):

NA

SEP 29 1993

Minerals Management Service
Anchorage, AlaskaSITE CLEARANCE
DATE (6) YYYYMMDD

93/8/28

EXTENT OF

SITE SEARCH 65' radius f/ well

SITE CLEARED BY

X Divers performed visual inspection

SUMMARY OF POROUS ZONES:

SHOW ALL ZONES CONTAINING HYDROCARBONS; ALL CORED INTERVALS; AND ALL DRILL STEM TESTS, INCLUDING DEPTH AND INTERVAL TESTED, CUSHION USE, TIME TOOL WAS OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES.

| FORMATION | TOP | | BOTTOM | | DESCRIPTION, CONTENTS, ETC. |
|-----------------------|----------------|----------------|----------------|----------------|---|
| | MD (5) | TVD (5) | MD(5) | TVD (5) | |
| Core Sagavanirktok | 6729' 6650' | 6729' 6650' | 6732' 7150' | 6732' 7150' | Clay, Siltstone Quartzose with common chert and other sedimentary lithic grains, medium to light gray, very fine to coarse grained, locally pebbly, moderately well to poorly sorted, subangular grains, moderately to poorly sorted, locally silty or muddy, weak oil stain, rarely cemented by pyrite. |

| GEOLOGIC MARKERS NAME | TOP | | NAME | TOP | |
|---|--------------------|--------------------|------|--------|---------|
| | MD(5) | TVD (5) | | MD (5) | TVD (5) |
| Sagavanirktok Sagavanirktok Paleontological Data see attached | Surface 11,125' | Surface 11,125' | | | |

WARNING: PUBLIC LAW 97-451 provides civil and criminal penalties for false or inaccurate reporting. Failure to report as required under the terms of the lease permit, or contract may result in suspension of operations or other enforcement actions.

CONTACT NAME (First, MI, Last)

Tim A. Billingsley

PHONE NUMBER (10)

907-265-6575

EXTENSION NUMBER (4)

XXXX

AUTHORIZING NAME (First, MI, Last)

Michael B. Winfree

TITLE

Area Drilling Engineer

AUTHORIZING SIGNATURE

DATE YYYYMMDD (6)

93-09-28

(This space is for Federal office use)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐NONE ☐☒ APPROVED BY:☐ ACCEPTED BY:

TITLE

DATE (6)

YYYYMMDD

PAPERWORK REDUCTION ACT STATEMENT

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that: This information is being collected to obtain knowledge of the equipment, materials, and procedures to be used during well abandonment operations. This information will be used by MMS District Supervisors to evaluate and approve or disapprove the adequacy of the equipment, materials, and/or procedures which the lessee plans to use during the conduct of well-abandonment operations including temporary abandonments. Response to this request is mandatory (43 U.S.C. 1334).

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Preliminary Correlations

| <u>Kuvlum #2</u> | <u>Biostrat Zones</u> | <u>Kuvlum #1</u> |
|--------------------|-----------------------|--------------------------|
| In at 1030' T/Spl. | F-2A | ? |
| 1590' | F-2B(1) | In at 1015' T/Spl. |
| 2460' | F-2B(2a) | 2100' |
| 3540' | F-2B(2b) | 3270' |
| 4680' | F-2B(3) | 4190' |
| 5820' | F-3A(1a) | 5420' |
| 6480' | F-3A(1b) | Missing |
| 7200' | " | 6440' (Depressed top) |
| 7500' | F-3A(1c) | 6800' |

Received
OCS District Office

Interpreted by:

Michael B. Mickey
MICROPALAEO CONSULTANTS, INC.

SEP 29 1993
Minerals Management Service
Anchorage, Alaska

ACTUAL P&A STATUS OF EXPLORATION WELL



TB 9/2/93

**Kuvlum #2
P&A Procedure
As Performed 8/27 thru 8/28/93**

Received
OCS District Office

SEP 29 1993

Minerals Management Service
Anchorage, Alaska

Geometry: Mudline @ 166' RKB
30" @ 302' RKB
20" @ 1017' RKB
13-3/8" @ 3978' RKB
12-1/4" hole at 11,125'

1. Completed logging runs, RIH with drill pipe to 7650'.
2. Placed a balanced 50 bbl viscous pill from 7650' to 7300'.
3. Placed a balanced 15.8 ppg 73 bbl (410 cu ft) cement plug on top of viscous mud pill from 7300'-6800' in a 12-1/4" diameter hole.

Class G cement with 0.5% D-800 retarder

4. PU to 6800' and placed a balanced 15.8 ppg 58 bbl (326 cu ft) cement plug on top of first cement plug from 6800'-6400' in a 12-1/4" diameter hole.

Class G cement with 0.5% D-800 retarder

5. Set 13-3/8" retainer at 3890' RKB with 13-3/8" shoe @ 3978'.
6. Established injection through retainer at 3 BPM and 1100 psi.
7. Mixed 50 bbl (281 cu ft) Class G cement with .05 G/sk D-47 anti-foam.
8. Squeezed 30 bbl (168 cu ft) cement through retainer. Unstung and placed 20 bbl (112 cu ft) cement on top of retainer.
9. Perforated 13-3/8" @ 450'-452' with 2 spf. POH with wireline.
10. Closed blind rams and pressure tested 13-3/8" x 20" annulus to 500 psi for 5 minutes. No leaks.
11. Set bridge plug on drill pipe at 400'.
12. Placed 26 bbl (144 cu ft) of 15.8 ppg Arctic Set I cement from 400' to 226' RKB (Mudline at 166' RKB). Cement plug in place at 12:00 hrs on 8/28/93.
13. POH and disconnected from well and moved to Kuvlum #3. The top of caisson was left at 12.5' BML.
14. Performed diver search around Kuvlum #2 wellbore at 16:30-17:00 hrs 8/28/93. No debris observed.

TAB 9/2/93

EXPIRES: OCTOBER 31, 1991

SUBMIT: Original,

two copies, and one public
information copy.

SUNDRY NOTICES AND REPORTS ON WELLS

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|---|---|--|---|--|--|---------------------------------|--|---|--|---|--|--|---|--------------------------------------|------------------------------------|---------------------------------------|--|------------------------------------|---------------------------------|------------------------------------|---|--|--|--|---------------------------------------|---|--|---|--|--|
| 1. FIELD NAME Wildcat | | | 2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0865 0 | | 3. MMS OPERATOR NUMBER (5) 0635 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. OPERATOR WELL NUMBER (6) 2 | | 5. API NUMBER (10) or (12) STATE (2) COUNTY (3) WELL CODE (5) 55 171 00009 | | 6. TYPE WELL (1) E | | 7. CORRECTED ELEVATION (5) -166' (ML-RKB) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 8. OPERATOR NAME AND ADDRESS (SUBMITTING OFFICE) ARCO Alaska, Inc. PO Box 100360 Anchorage, AK 99510-0360 | | | | 9. CURRENT WELL DEPTH (5) MD 2430' TVD 2430' | | 10. CORRECTED WATER DEPTH (5) 101' | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | LEAVE BLANK | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. CORRECTED LOCATION OF WELL (12) Surface: 6985' FWL and 3000' FSL of Block 672 Production zone: NA Total depth: NA | | | | 12. OPERATING AREA CODE (2) FI | | 13. BLOCK NUMBER (6) 0672 | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | 14. MAP OR OFFICIAL PROTRACTION DIAGRAM NUMBER (7) NR 6-4, Flaxman Island | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15. OPERATOR LEASE, UNIT OR COMMUNITIZATION NAME Kuvlum | | | | 16. RIG/PLATFORM NAME BeauDril - Kulluk | | 17. RIG TYPE (2) SS | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. WELL STATUS, e.g., shut-in, drilling, etc. Drilling | | 19. LAST CASING STRING: size, lb/ft, grade, and setting depth (MD) 20", 133#/ft, X-56 @ 1017' MD | | | 20. APPROXIMATE START DATE (6) YYMMDD 93 07 28 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 21. PRESENT PRODUCTION ZONE, IF ANY, AND PRODUCTIVE CAPABILITY NA | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="0" style="width:100%;"> <tr> <td colspan="2">22. CHECK APPROPRIATE ACTIVITY:</td> <td>Fracture/acidize <input type="checkbox"/></td> <td>Artificial Lift <input type="checkbox"/></td> <td>Other <input checked="" type="checkbox"/></td> </tr> <tr> <td colspan="2">Data correction <input type="checkbox"/></td> <td>Pull or alter casing <input type="checkbox"/></td> <td>Repair well <input type="checkbox"/></td> <td>Perforate <input type="checkbox"/></td> </tr> <tr> <td colspan="2">Change plans <input type="checkbox"/></td> <td>Sidetrack <input type="checkbox"/></td> <td>Deepen <input type="checkbox"/></td> <td>Plug back <input type="checkbox"/></td> </tr> <tr> <td colspan="2">Request approval <input type="checkbox"/></td> <td>Reenter to complete <input type="checkbox"/>*</td> <td>Multiple complete <input type="checkbox"/>*</td> <td>Recomplete <input type="checkbox"/>*</td> </tr> <tr> <td colspan="2">Subsequent report <input checked="" type="checkbox"/></td> <td colspan="3"> Note: Submit a separate Well (Re) Completion Report and a subsequent report of operations on this form for each completion. Alternatively, submit a Well (Re) Completion Report for each completion with a narrative as in item 23 of this form. </td> </tr> </table> | | | | | | | | 22. CHECK APPROPRIATE ACTIVITY: | | Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | Data correction <input type="checkbox"/> | | Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | Change plans <input type="checkbox"/> | | Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | Request approval <input type="checkbox"/> | | Reenter to complete <input type="checkbox"/> * | Multiple complete <input type="checkbox"/> * | Recomplete <input type="checkbox"/> * | Subsequent report <input checked="" type="checkbox"/> | | Note: Submit a separate Well (Re) Completion Report and a subsequent report of operations on this form for each completion. Alternatively, submit a Well (Re) Completion Report for each completion with a narrative as in item 23 of this form. | | |
| 22. CHECK APPROPRIATE ACTIVITY: | | Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Data correction <input type="checkbox"/> | | Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Change plans <input type="checkbox"/> | | Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Request approval <input type="checkbox"/> | | Reenter to complete <input type="checkbox"/> * | Multiple complete <input type="checkbox"/> * | Recomplete <input type="checkbox"/> * | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subsequent report <input checked="" type="checkbox"/> | | Note: Submit a separate Well (Re) Completion Report and a subsequent report of operations on this form for each completion. Alternatively, submit a Well (Re) Completion Report for each completion with a narrative as in item 23 of this form. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details in this space and on the reverse, and/or on an attachment, and give pertinent dates, including estimated date for starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

1. Actual water depth for the Kuvlum #2 location =101'. RKB to ML = 166'.

2. Actual location information: Latitude: 70° 18' 36.01" Longitude: 145° 32' 18.69"
6985' FWL and 3000' FSL of Block 672, NR 6-4
Final well location survey plat attached.

3. Well was spudded 05:00 hrs, 7-28-93 (30" casing drill commenced)

4. 30" Structural Casing installation was completed approximately 06:30 hrs, 7-30-93. 30" Casing Detail is attached.

5. 20" Conductor Casing installed 7-31-93. CIP @ 02:27 hrs 7-31-93. Casing was cemented with 3150 sx (3462 cu ft) of Arctic Set I + 0.6% D13 retarder at 15.7 ppg using a drill pipe inner string. Cement returns were obtained to the glory hole and confirmed with airlift samples to the surface. 20" Casing Detail attached.

6. A formation 'Leak Off Test' was performed after drilling 10' of new formation below the 20" casing shoe. A 12.94 ppg EMW test was obtained.
Pressure / Rate / Volume chart is attached.

Received
OCS District Office

AUG 06 1993
Minerals Management Service
Anchorage, Alaska

23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (continued from page 1)

7. Waiver to allow weekly instead of daily H2S monitoring equipment tests was verbally granted by Mr. Lee Sires on 8/4/93.
8. Waiver to allow top of caisson to be installed 12.5' below mudline was verbally granted on 7/27/93.

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OCS District Office


AUG 06 1993

Minerals Management Service
Anchorage, Alaska

SUBSURFACE SAFETY VALVE: SUBSURFACE CONTROLLED ☐ SURFACE CONTROLLED ☐ SET AT DEPTH OF _____

MANUFACTURER: _____ MODEL NO. _____ SERIAL NO. _____

WARNING: PUBLIC LAW 97-451 provides civil and criminal penalties for false or inaccurate reporting. Failure to report as required under the terms of the lease, permit, or contract may result in suspension of operations or other enforcement actions.

| | | |
|--|-------------------------------------|----------------------|
| CONTACT NAME (First, MI, Last) | PHONE NUMBER (10) | EXTENSION NUMBER (4) |
| Tim A. Billingsley | (907) 265-6575 | |
| AUTHORIZING NAME (First, MI, Last) | TITLE | |
| Michael B. Winfree | New Ventures Area Drilling Engineer | |
| AUTHORIZING SIGNATURE | DATE YYMMDD (6) | |
|  | 93 08 03 | |

(THIS SPACE IS FOR FEDERAL OFFICE USE)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐

NONE ☒

DATE (6)
YYMMDD

8/6/93

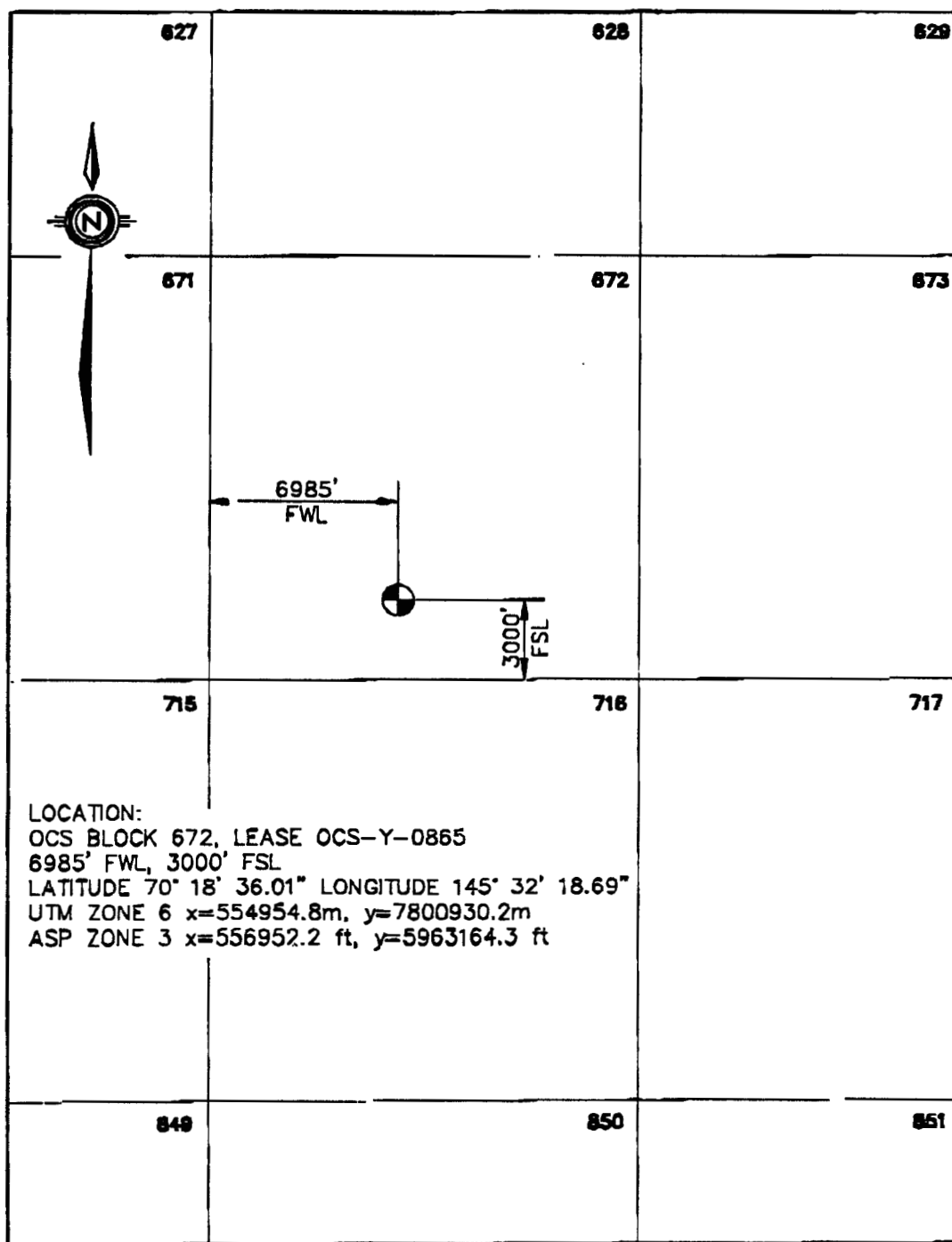
☐ APPROVED BY:

☒ ACCEPTED BY: James B. Regg TITLE Acting District Supervisor

PAPERWORK REDUCTION ACT STATEMENT

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that: This information is being collected to obtain knowledge of the equipment and procedures to be used during well-completion, workover, and production operations. This information will be used by the District Supervisor to evaluate and approve or disapprove the adequacy of the equipment and procedures to safely perform the proposed operations. Response to this request is mandatory (43 U.S.C. 1334).

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Received
OCS District Office

AUG 06 1993
Minerals Management Service
Anchorage, Alaska

ARCO KUVLUM #2
BLOCK 672
FINAL WELL POSITION

NOTICE OF INTENT/REPORT OF WELL ABANDONMENT

[illegible]

Public Information

FORM MMS-332

NOTICE OF INTENT/REPORT OF WELL ABANDONMENT

PAGE 2

24. PRODUCTION HISTORY (Development wells only)

| | | | | | | |
|---------------------------|-------------|--------------------------|-------------|---------------|-------------------|-----------------------------|
| DATE LAST PROD (4) YYYYMM | WELL STATUS | OIL-BBL (6) | GAS-MCF (6) | WATER-BBL (6) | GAS/OIL RATIO (6) | SHUT-IN TUBING PRESSURE (5) |
| NA | | PROD. FOR LAST PERIOD | | | | Received |

ALL PERFORATED INTERVALS CURRENTLY OPEN (5)

OCS District Office

REASON FOR ABANDONMENT (include supportive well logs and test data):

NA

SEP 29 1993

Minerals Management Service
Anchorage, AlaskaSITE CLEARANCE
DATE (6) YYMMDD

93/8/28

EXTENT OF
SITE SEARCH 65' radius f/ wellSITE CLEARED BY
X Divers performed visual inspection

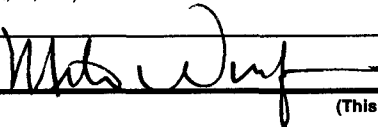
SUMMARY OF POROUS ZONES:

SHOW ALL ZONES CONTAINING HYDROCARBONS; ALL CORED INTERVALS; AND ALL DRILL STEM TESTS, INCLUDING DEPTH AND INTERVAL TESTED, CUSHION USE, TIME TOOL WAS OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES.

| FORMATION | TOP | | BOTTOM | | DESCRIPTION, CONTENTS, ETC. |
|-----------|--------|---------|--------|---------|-----------------------------|
| | MD (5) | TVD (5) | MD(5) | TVD (5) | |
| | | | | | |

| GEOLOGIC MARKERS NAME | TOP | | NAME | TOP | |
|--------------------------|-------|---------|------|--------|---------|
| | MD(5) | TVD (5) | | MD (5) | TVD (5) |
| | | | | | |

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| | | |
|--|-----------------------------------|------------------------------|
| CONTACT NAME (First, MI, Last) Tim A. Billingsley | PHONE NUMBER (10) 907-265-6575 | EXTENSION NUMBER (4) XXXX |
| AUTHORIZING NAME (First, MI, Last) Michael B. Winfree | TITLE Area Drilling Engineer | |
| AUTHORIZING SIGNATURE  | DATE YYMMDD (6) 93-09-28 | |

(This space is for Federal office use)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES: ARE ATTACHED ☐ NONE ☐

☐ APPROVED BY: _____ DATE (6) _____

☐ ACCEPTED BY: _____ TITLE _____ YYMMDD _____

PAPERWORK REDUCTION ACT STATEMENT

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PUBLIC INFORMATION

**SUBMIT: ORIGINAL,
ONE COPY, AND ONE
PUBLIC INFORMATION
COPY.**

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

RELEASED TO PUBLIC FILE
DATE 10/10/94
FBI

OMB Approval No. 1010-0077
Expires OCTOBER 31, 1994

NOTICE OF INTENT/REPORT OF WELL ABANDONMENT

[illegible]

PUBLIC INFORMATION

FORM MMS-332

NOTICE OF INTENT/REPORT OF WELL ABANDONMENT

PAGE 2

24. PRODUCTION HISTORY (Development wells only)

| | | | | | | |
|---------------------------|-------------|--------------------------|-------------|---------------|-------------------|-----------------------------|
| DATE LAST PROD (4) YYYYMM | WELL STATUS | OIL-BBL (6) | GAS-MCF (6) | WATER-BBL (6) | GAS/OIL RATIO (6) | SHUT-IN TUBING PRESSURE (5) |
| NA | | PROD. FOR LAST PERIOD | | | | |

ALL PERFORATED INTERVALS CURRENTLY OPEN (5)

REASON FOR ABANDONMENT (include supportive well logs and test data):

NA

SITE CLEARANCE

DATE (6) YYMMDD

93/8/28

EXTENT OF

SITE SEARCH 65' radius 1/ well

SITE CLEARED BY

X Divers performed visual inspection

SUMMARY OF POROUS ZONES:

SHOW ALL ZONES CONTAINING HYDROCARBONS; ALL CORED INTERVALS; AND ALL DRILL STEM TESTS, INCLUDING DEPTH AND INTERVAL TESTED, CUSHION USE, TIME TOOL WAS OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES.

| FORMATION | TOP | | BOTTOM | | DESCRIPTION, CONTENTS, ETC. |
|-----------|--------|---------|--------|---------|---|
| | MD (5) | TVD (5) | MD (5) | TVD (5) | |
| | | | | | <p>Received OCS District Office</p> <p>SEP 09 1993</p> <p>Minerals Management Service Anchorage, Alaska</p> |

| GEOLOGIC MARKERS NAME | TOP | | NAME | TOP | |
|--------------------------|--------|---------|------|--------|---------|
| | MD (5) | TVD (5) | | MD (5) | TVD (5) |
| | | | | | |

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CONTACT NAME (First, MI, Last)

Tim A. Billingsley

PHONE NUMBER (10)

907-265-6575

EXTENSION NUMBER (4)

XXXX

AUTHORIZING NAME (First, MI, Last)

Michael B. Winfree

TITLE

Area Drilling Engineer

AUTHORIZING SIGNATURE

DATE YYMMDD (6)

93-09-02

(This space is for Federal office use)

APPROVED BY:

ACCEPTED BY:

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐ NONE ☐

TITLE

DATE (6)

YYMMDD

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SUBMIT: ORIGINAL,
ONE COPY, AND ONE
PUBLIC INFORMATION
COPY.

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

OMB Approval No. 1010-0077
Expires: OCTOBER 31, 1994

| NOTICE OF INTENT/REPORT OF WELL ABANDONMENT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|------------------------|--|-------|--------------------------|---|--|--|-----------------------|---|---------------|------------------------|-----------------------------------|--|-------------|---|-------------|--|--------|--------------|--------|---------|-----------------------------|--|-----|--------------|-------|-------|---------------------------|-------|-----------------------|-----------------|-------|-------|---|--|------|--------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 1. FIELD NAME Wildcat | | | | 2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0865 0 | | | 3. MMS OPERATOR NUMBER (5) 635 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. OPERATOR WELL NUMBER (7) 2 | | 5. DATE (RE)COMPLETED (6) YYMMDD NA | | 6. API NUMBER (10 OR 12) STATE (2) COUNTY (3) SEQUENCE (5) TRACK (2) 55 171 00009 | | | 7. COMPLETION CODE (3) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. OPERATOR NAME AND ADDRESS (SUBMITTING OFFICE) ARCO Alaska, Inc. PO Box 100360 Anchorage, Ak 99510-0360 | | | | 8. WELL TYPE (1) E | | | 9. DATE SPUDDED (6) YYMMDD 93/7/28 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | 10. SIDETRACKED (6) YYMMDD NA | | | LEAVE BLANK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. FINAL LOCATION OF WELL (12) Surface: 6985' FWL, 3000' FSL of Block 672 Production zone: NA Total depth: NA | | | | 12. OPERATING AREA CODE (2) FI | | | 13. BLOCK NUMBER (6) 672 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | 14. MAP OR OFFICIAL PROTRACTOR DIAGRAM NUMBER (7) NR 6-4, Flaxman Island | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15. OPERATOR LEASE UNIT OR COMMUNITIZATION NAME Kuvlum | | | | 16. TYPE NOTICE OF INTENT SUBMITT SUBSEQUENT REPORT <input checked="" type="checkbox"/> | | | 17. TYPE OF TEMPORARY ABANDONMENT PERMANENT <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. DATE TD REACHED (6) YYMMDD 93/08/19 | | 19. TOTAL DEPTH (5) MD 11,125' TVD 11,125' | | 20. PLUG BACK DEPTH (5) MD 226' TVD 226' | | | 21. DATE ABANDONED (6) YYMMDD PROPOSED <input type="checkbox"/> 93/8/28 COMPLETED <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 22. ELECTRIC AND OTHER LOGS RUN (MAY BE OMITTED IF PREVIOUSLY SUBMITTED) AIT, Dipole Sonic, GR, SP, LDT, CNL, NGT, MICROLOG, ROTARY SWC, FMI, FMS, PERCUSSION SWC, MDT, VSP, RFT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 23. CASING RECORD (Report all strings unless previously submitted) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><thead><tr><th rowspan="2">HOLE SIZE (4)</th><th rowspan="2">CASING SIZE (4), LB/FT (5) & GRADE</th><th colspan="2">SETTING DEPTH</th><th colspan="2">QUANTITY OF CEMENT (CU. FT./TYPE)</th></tr><tr><th>MD (5)</th><th>TVD (5)</th><th></th><th></th></tr></thead><tbody><tr><td>26"</td><td>30" 457 X-52</td><td>302</td><td>302</td><td colspan="2">30" casing drilled in place</td></tr><tr><td>26"</td><td>20" 133 X-56</td><td>1017'</td><td>1017'</td><td colspan="2">3462 cu. ft. Arctic Set I</td></tr><tr><td>17.5"</td><td>13-3/8" 68 L-80</td><td>3978'</td><td>3978'</td><td colspan="2">1838 cu. ft. Class G w/ 2% gel, 580 cu. ft. Class G</td></tr><tr><td> </td><td> </td><td> </td><td> </td><td colspan="2"> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td colspan="2"> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td colspan="2"> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td colspan="2"> </td></tr><tr><td> </td><td> </td><td> </td><td> </td><td colspan="2"> </td></tr></tbody></table> | | | | | | | | | | HOLE SIZE (4) | CASING SIZE (4), LB/FT (5) & GRADE | SETTING DEPTH | | QUANTITY OF CEMENT (CU. FT./TYPE) | | MD (5) | TVD (5) | | | 26" | 30" 457 X-52 | 302 | 302 | 30" casing drilled in place | | 26" | 20" 133 X-56 | 1017' | 1017' | 3462 cu. ft. Arctic Set I | | 17.5" | 13-3/8" 68 L-80 | 3978' | 3978' | 1838 cu. ft. Class G w/ 2% gel, 580 cu. ft. Class G | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HOLE SIZE (4) | CASING SIZE (4), LB/FT (5) & GRADE | SETTING DEPTH | | QUANTITY OF CEMENT (CU. FT./TYPE) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | MD (5) | TVD (5) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 26" | 30" 457 X-52 | 302 | 302 | 30" casing drilled in place | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 26" | 20" 133 X-56 | 1017' | 1017' | 3462 cu. ft. Arctic Set I | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17.5" | 13-3/8" 68 L-80 | 3978' | 3978' | 1838 cu. ft. Class G w/ 2% gel, 580 cu. ft. Class G | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| CASING SIZE (4) | CASING PULLED | | BRIDGE PLUGS/RETAINERS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | SHOT/CUT AT | PULLED FROM | DEPTH SET MD (5) | DESCRIPTION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | MD (5) | TVD (5) | MD (5) | TVD (5) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | 3890' | 13-3/8" EZSV retainer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | 400' | 13-3/8" EZSV bridge plug | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| JUNK IN HOLE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| DESCRIPTION | FROM | TO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| PLUGGING RECORD | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"><thead><tr><th>DEPTH INTERVAL MD (5)</th><th>AMOUNT, SLURRY COMPOSITION, AND METHOD OF PLACEMENT</th></tr></thead><tbody><tr><td>(Proposed)</td><td> </td></tr><tr><td>6400'-7300'</td><td>736 cu ft Class G, open hole balanced plug in 2 stages</td></tr><tr><td>3756'-4093'</td><td>168 cu ft Class G cement below retainer @ 3890' and 112 cu ft cement above retainer</td></tr><tr><td>226'-400'</td><td>144 cu ft Arctic Set I above retainer @ 400' RKB</td></tr><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></tbody></table> | | | | | | | | | | DEPTH INTERVAL MD (5) | AMOUNT, SLURRY COMPOSITION, AND METHOD OF PLACEMENT | (Proposed) | | 6400'-7300' | 736 cu ft Class G, open hole balanced plug in 2 stages | 3756'-4093' | 168 cu ft Class G cement below retainer @ 3890' and 112 cu ft cement above retainer | 226'-400' | 144 cu ft Arctic Set I above retainer @ 400' RKB | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DEPTH INTERVAL MD (5) | AMOUNT, SLURRY COMPOSITION, AND METHOD OF PLACEMENT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (Proposed) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6400'-7300' | 736 cu ft Class G, open hole balanced plug in 2 stages | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3756'-4093' | 168 cu ft Class G cement below retainer @ 3890' and 112 cu ft cement above retainer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 226'-400' | 144 cu ft Arctic Set I above retainer @ 400' RKB | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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Form MMS-332 (November 1991)
(Supersedes Form MMS-332 (July 1988)
which will not used)

CONTINUED ON REVERSE

Page 1

COMPLETE REVERSE SIDE, SIGN, AND DATE

RECEIVED
OCS DISTRICT OFFICE

SEP 08 1993

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

24. PRODUCTION HISTORY (Development wells only)

| | | | | | | | |
|---------------------------|-------------|-----------------------|-------------|-------------|---------------|-------------------|-----------------------------|
| DATE LAST PROD (4) YYYYMM | WELL STATUS | PROD. FOR LAST PERIOD | OIL-BBL (6) | GAS-MCF (6) | WATER-BBL (6) | GAS/OIL RATIO (6) | SHUT-IN TUBING PRESSURE (5) |
| NA | | | | | | | |

ALL PERFORATED INTERVALS CURRENTLY OPEN (5)

REASON FOR ABANDONMENT (include supportive well logs and test data):

NA

SITE CLEARANCE

DATE (6) YYYYMMDD

93/8/28

EXTENT OF

SITE SEARCH

65' radius f/ well

SITE CLEARED BY

X Divers performed visual inspection

SUMMARY OF POROUS ZONES:

SHOW ALL ZONES CONTAINING HYDROCARBONS; ALL CORED INTERVALS; AND ALL DRILL STEM TESTS, INCLUDING DEPTH AND INTERVAL TESTED, CUSHION USE, TIME TOOL WAS OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES.

| FORMATION | TOP | | BOTTOM | | DESCRIPTION, CONTENTS, ETC. |
|-----------------------|----------------|----------------|----------------|----------------|---|
| | MD (5) | TVD (5) | MD(5) | TVD (5) | |
| Core Sagavanirktok | 6729' 6650' | 6729' 6650' | 6732' 7150' | 6732' 7150' | Clay, Siltstone Quartzose with common chert and other sedimentary lithic grains, medium to light gray, very fine to coarse grained, locally pebbly, moderately well to poorly sorted, subangular grains, moderately to poorly sorted, locally silty or muddy, weak oil stain, rarely cemented by pyrite. |

| GEOLOGIC MARKERS NAME | TOP | | NAME | TOP | |
|--------------------------------|--------------------|--------------------|------|--------|---------|
| | MD(5) | TVD (5) | | MD (5) | TVD (5) |
| Sagavanirktok Sagavanirktok | Surface 11,125' | Surface 11,125' | | | |

WARNING:

PUBLIC LAW 97-451 provides civil and criminal penalties for false or inaccurate reporting. Failure to report as required under the terms of the lease permit, or contract may result in suspension of operations or other enforcement actions.

CONTACT NAME (First, MI, Last)

Tim A. Billingsley

PHONE NUMBER (10)

907-265-6575

EXTENSION NUMBER (4)

XXXX

AUTHORIZING NAME (First, MI, Last)

Michael B. Winfree

TITLE

Area Drilling Engineer

AUTHORIZING SIGNATURE

DATE YYYYMMDD (6)

93-09-02

(This space is for Federal office use)

☒ APPROVED BY:☐ ACCEPTED BY:

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐ NONE ☐

TITLE

DATE (6)

YYYYMMDD

93/8/28

PAPERWORK REDUCTION ACT STATEMENT

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that: This information is being collected to obtain knowledge of the equipment, materials, and procedures to be used during well abandonment operations. This information will be used by MMS District Supervisors to evaluate and approve or disapprove the adequacy of the equipment, materials, and/or procedures which the lessee plans to use during the conduct of well-abandonment operations including temporary abandonments. Response to this request is mandatory (43 U.S.C. 1334).

Public reporting burden for this form is estimated to average 1/2 hour per response, including 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 2300, Minerals Management Service, 381 Elden Street, Herndon, VA 22070-4817; and Office of Management and Budget, Paperwork Reduction Project (OMB No. 1010-0077), Washington, DC 20503.

**Kuvlum #2
P&A Procedure
As Performed 8/27 thru 8/28/93**

Geometry: Mudline @ 166' RKB
30" @ 302' RKB
20" @ 1017' RKB
13-3/8" @ 3978' RKB
12-1/4" hole at 11,125'

1. Completed logging runs, RIH with drill pipe to 7650'.
2. Placed a balanced 50 bbl viscous pill from 7650' to 7300'.
3. Placed a balanced 15.8 ppg 73 bbl (410 cu ft) cement plug on top of viscous mud pill from 7300'-6800' in a 12-1/4" diameter hole.

Class G cement with 0.5% D-800 retarder

4. PU to 6800' and placed a balanced 15.8 ppg 58 bbl (326 cu ft) cement plug on top of first cement plug from 6800'-6400' in a 12-1/4" diameter hole.

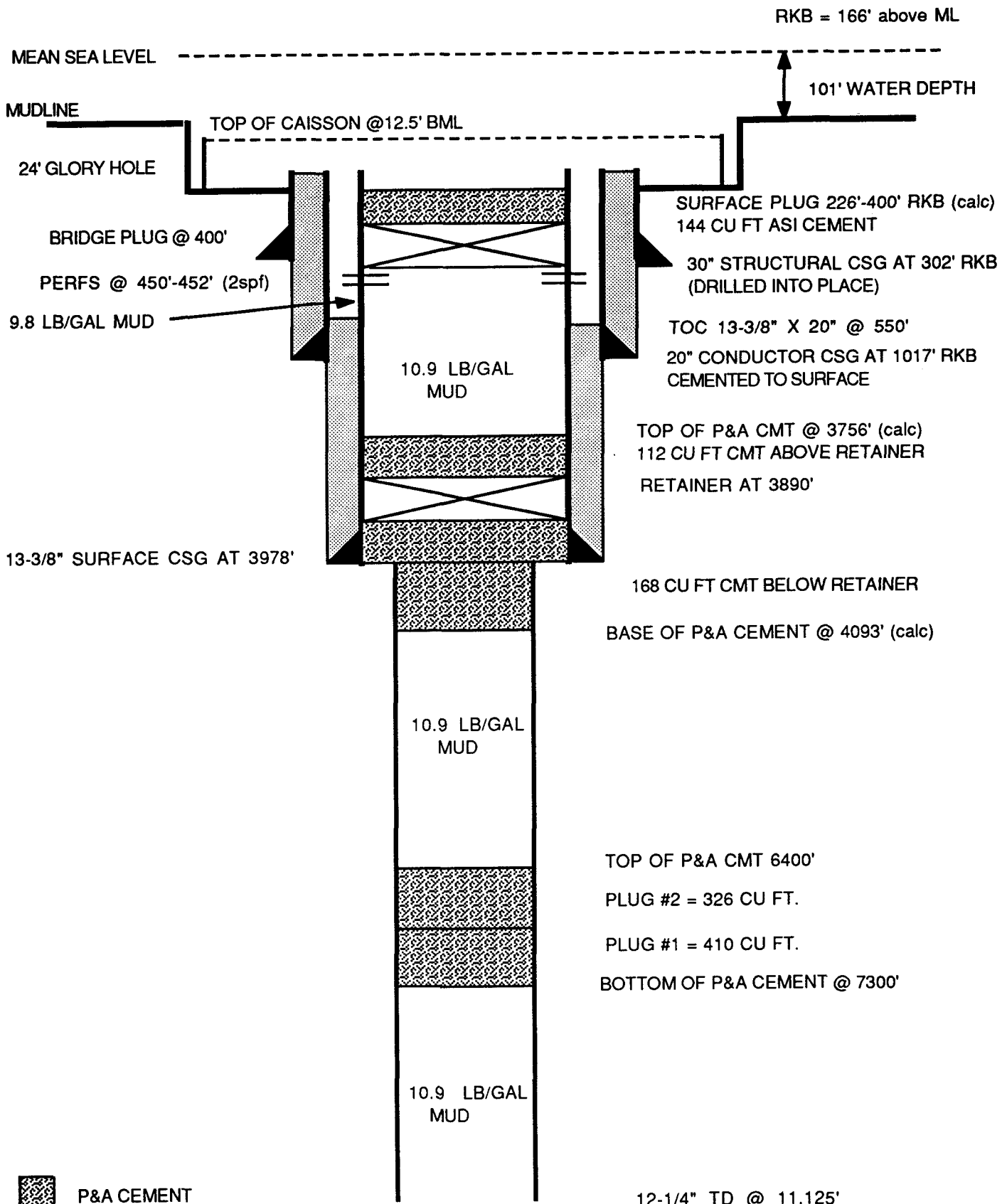
Class G cement with 0.5% D-800 retarder

5. Set 13-3/8" retainer at 3890' RKB with 13-3/8" shoe @ 3978'.
6. Established injection through retainer at 3 BPM and 1100 psi.
7. Mixed 50 bbl (281 cu ft) Class G cement with .05 G/sk D-47 anti-foam.
8. Squeezed 30 bbl (168 cu ft) cement through retainer. Unstung and placed 20 bbl (112 cu ft) cement on top of retainer.
9. Perforated 13-3/8" @ 450'-452' with 2 spf. POH with wireline.
10. Closed blind rams and pressure tested 13-3/8" x 20" annulus to 500 psi for 5 minutes. No leaks.
11. Set bridge plug on drill pipe at 400' RKB.
12. Placed 26 bbl (144 cu ft) of 15.8 ppg Arctic Set I cement from 400' to 226' RKB (Mudline at 166' RKB). Cement plug in place at 12:00 hrs on 8/28/93.
13. POH and disconnected from well and moved to Kuvlum #3. The top of caisson was left at 12.5' BML.
14. Performed diver search around Kuvlum #2 wellbore at 16:30-17:00 hrs 8/28/93. No debris observed.

TAB 9/2/93

KUVLUM #2

ACTUAL P&A STATUS OF EXPLORATION WELL



SUBMIT: ORIGINAL,
ONE COPY, AND ONE
PUBLIC INFORMATION
COPY.

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

OMB Approval No. 1010-0077
Expires: OCTOBER 31, 1994

NOTICE OF INTENT/REPORT OF WELL ABANDONMENT

| | | | | | |
|--|--|--|--|--|--|
| 1. FIELD NAME Wildcat | | 2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0865 0 | | 3. MMS OPERATOR NUMBER (5) 635 | |
| 4. OPERATOR WELL NUMBER (7) 2 | | 5. DATE (RE)COMPLETED (6) YYMMDD 93-8-26 | | 6. API NUMBER (10 OR 12) SIDE STATE (2) COUNTY (3) SEQUENCE (5) TRACK (2) 55 171 00009 | |
| 7. OPERATOR NAME AND ADDRESS (SUBMITTING OFFICE) ARCO Alaska, Inc. PO Box 100360 Anchorage, Ak 99510-0360 | | 8. WELL TYPE (1) E | | 9. DATE SPUDDED (6) YYMMDD 93/7/28 | |
| 11. FINAL LOCATION OF WELL (12) Surface: 6985' FWL, 3000' FSL of Block 672 Production zone: NA Total depth: NA | | 12. OPERATING AREA CODE (2) FI | | 13. BLOCK NUMBER (6) 672 | |
| 15. OPERATOR LEASE UNIT OR COMMUNITIZATION NAME Kuvlum | | 16. TYPE NOTICE OF INTENT SUBMITT SUBSEQUENT REPORT <input checked="" type="checkbox"/> | | 17. TYPE OF TEMPORARY ABANDONMENT PERMANENT <input checked="" type="checkbox"/> | |
| 18. DATE TD REACHED (6) YYMMDD 93/08/19 | | 19. TOTAL DEPTH (5) MD 11,125' TVD 11,125' | | 20. PLUG BACK DEPTH (5) MD TVD | |
| 21. DATE ABANDONED (6) YYMMDD PROPOSED <input checked="" type="checkbox"/> 93/08/26 COMPLETED <input type="checkbox"/> | | | | | |
| 22. ELECTRIC AND OTHER LOGS RUN (MAY BE OMITTED IF PREVIOUSLY SUBMITTED) AIT, Dipole Sonic, GR, SP, LDT, CNL, Cal, Dipmeter, FMI, SWC, RFT, VSP | | | | | |
| 23. CASING RECORD (Report all strings unless previously submitted) | | | | | |
| HOLE SIZE (4) | | CASING SIZE (4), LB/FT (5) & GRADE | | SETTING DEPTH MD (5) TVD (5) | |
| 26" | | 30" 457 X-52 | | 302 302 30" casing drilled in place | |
| 26" | | 20" 133 X-56 | | 1017' 1017' 3462 cu. ft. Arctic Set I | |
| 17.5" | | 13-3/8" 68 L-80 | | 3978' 3978' 1838 cu. ft. Class G w/ 2% gel, 580 cu. ft. Class G | |
| CASING PULLED | | | | | |
| CASING SIZE (4) | | SHOT/CUT AT MD (5) TVD (5) | | PULLED FROM MD(5) TVD (5) | |
| BRIDGE PLUGS/RETAINERS | | | | | |
| DEPTH SET MD (5) | | DESCRIPTION | | | |
| JUNK IN HOLE | | | | | |
| DESCRIPTION | | FROM | | TO | |
| PLUGGING RECORD | | | | | |
| DEPTH INTERVAL MD (5) | | AMOUNT, SLURRY COMPOSITION, AND METHOD OF PLACEMENT | | | |
| (Proposed) | | | | | |
| 6300'-7300' | | 850 cu ft Class G, open hole balanced plug | | | |
| 3800'-4100' | | 250 cu ft Class G with 170 cu ft below retainer @ 3900' and 80 cu ft above retainer | | | |
| 200'-400' | | 170 cu ft Arctic Set I above retainer | | | |

Form MMS-332 (November 1991)
(Supersedes Form MMS-332 (July 1988)
which will not used)

CONTINUED ON REVERSE

COMPLETE REVERSE SIDE, SIGN, AND DATE

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OCS District Office Page 1

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Minerals Management Service
Anchorage, Alaska

24. PRODUCTION HISTORY (Development wells only)

| | | | | | | |
|---------------------------|-------------|--------------------------|-------------|---------------|-------------------|-----------------------------|
| DATE LAST PROD (4) YYYYMM | WELL STATUS | OIL-BBL (6) | GAS-MCF (6) | WATER-BBL (6) | GAS/OIL RATIO (6) | SHUT-IN TUBING PRESSURE (5) |
| NA | | PROD. FOR LAST PERIOD | | | | |

ALL PERFORATED INTERVALS CURRENTLY OPEN (5)

REASON FOR ABANDONMENT (include supportive well logs and test data):

NA

SITE CLEARANCE
DATE (6) YYYYMMDDEXTENT OF
SITE SEARCH

SITE CLEARED BY

XX

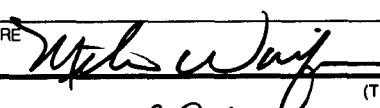
SUMMARY OF POROUS ZONES: SHOW ALL ZONES CONTAINING HYDROCARBONS; ALL CORED INTERVALS; AND ALL DRILL STEM TESTS, INCLUDING DEPTH AND INTERVAL TESTED, CUSHION USE, TIME TOOL WAS OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES.

| FORMATION | TOP | | BOTTOM | | DESCRIPTION, CONTENTS, ETC. |
|-----------|--------|---------|--------|---------|-----------------------------|
| | MD (5) | TVD (5) | MD (5) | TVD (5) | |
| Core | 6729' | 6729' | 6732' | 6732' | Clay, Siltstone |

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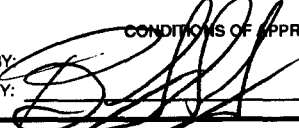
| GEOLOGIC MARKERS NAME | TOP | | NAME | TOP | |
|--------------------------|--------|---------|------|--------|---------|
| | MD (5) | TVD (5) | | MD (5) | TVD (5) |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

WARNING: PUBLIC LAW 97-451 provides civil and criminal penalties for false or inaccurate reporting. Failure to report as required under the terms of the lease permit, or contract may result in suspension of operations or other enforcement actions.

| | | |
|--|-----------------------------------|------------------------------|
| CONTACT NAME (First, MI, Last) Tim A. Billingsley | PHONE NUMBER (10) 907-265-6575 | EXTENSION NUMBER (4) XXXX |
| AUTHORIZING NAME (First, MI, Last) Michel B. Winfree | TITLE Area Drilling Engineer | |
| AUTHORIZING SIGNATURE  | DATE YYYYMMDD (6) 93-08-20 | |

(This space is for Federal office use)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES: ARE ATTACHED ☐ NONE ☐

☒ APPROVED BY:  TITLE: DISTRICT SUPERVISOR DATE (6) YYYYMMDD: 93/08/22

☐ ACCEPTED BY: _____

PAPERWORK REDUCTION ACT STATEMENT

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that: This information is being collected to obtain knowledge of the equipment, materials, and procedures to be used during well abandonment operations. This information will be used by MMS District Supervisors to evaluate and approve or disapprove the adequacy of the equipment, materials, and/or procedures which the lessee plans to use during the conduct of well-abandonment operations including temporary abandonments. Response to this request is mandatory (43 U.S.C. 1334).

Public reporting burden for this form is estimated to average 1/2 hour per response, including 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 2300, Minerals Management Service, 381 Eldon Street, Herndon, VA 22070-4817; and Office of Management and Budget, Paperwork Reduction Project (OMB No. 1010-0077), Washington, DC 20503.

Kuvlum #2 P&A Procedure

General Information

Geometry: Mudline @ 166' RKB
30" @ 302' RKB
20" @ 1017' RKB
13-3/8" @ 3978' RKB
12-1/4" hole at 11,125'

Status: Operation prior to P&A: Logging.

Mud weight = 10.8 ppg.

Objectives: Set open hole balanced cement plug across hydrocarbon interval from 6300'-7300' (Hydrocarbon interval from 6450'-7150")

Set retainer near base of 13-3/8" casing and pump 30 bbl cement below retainer and lay in 14 bbl on top of retainer.

Perforate 13-3/8" at $\pm 420'$ to pressure test 13-3/8" x 20" annulus.

Set cement plug near surface.

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Minerals Management Service
Anchorage, Alaska

1. After completing logging runs, RIH with drill pipe to 7350'.
2. Spot balanced 50 bbl viscous pill from 7650' to 7300'. Displace with mud.
3. Spot a balanced 15.8 ppg 725 sx 151 bbl cement plug on top of viscous mud pill from 7300'-6300', geologic interpretation of hydrocarbon interval in Kuvlum #2 is 6450'-7150'.

750
~~650~~ sx Class G *msw*
 .05% D-800 retarder

Yield= 1.17 cu. ft./sk

4. POH with open ended drill pipe.
5. Set 13-3/8" retainer at 3900' RKB with 13-3/8" shoe @ 3978'.
6. Mix 50 bbl (240 sx) Class G cement.

240 sx Class G
 .05 G/sk D-47 anti-foam
 2% CaCl₂

Yield= 1.18 cu. ft./sk

7. Establish injection through retainer. Pump at least 30 bbl cement below retainer.
8. Unsting and lay in at least 14 bbl on top of retainer.
9. POOH with DP.
10. Perforate 13-3/8" @ ±420'. POH with wireline.
11. Close rams and pressrue test 13-3/8" x 20" annulus.
12. Set retainer on drill pipe at 400'. If pressure test failed, squeeze 22 bbl or 110 sx Arctic Set I cement thru retainer.
13. Unsting from retainer and lay-in balanced 30 bbl (180 sx) cement plug of Arctic Set I 15.8 ppg from 400' to 200' RKB. (Mudline at 166' RKB)

180 sx Arctic Set I
 .5% D-13

Yield = 0.91 cu. ft./sk

14. POH and disconnect from well and move to Kuvlum #3. A waiver is being requested for leaving the top of caisson at 12.5' BML.
15. Perform diver search around Kuvlum #2 wellbore for site clearance.

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PROPOSED P&A STATUS OF EXPLORATION WELL



AUG 27 1993
Minerals Management Service
Anchorage, Alaska

TB 8/26/93

Public Information

SUNDRY NOTICES AND REPORTS ON WELLS

| | | | | | | | | | | | | | | | | | |
|--|---|---|--|---------------------------------------|----------------------------------|---|--|---|---|--------------------------------------|------------------------------------|------------------------------------|---------------------------------|------------------------------------|--|--|---------------------------------------|
| 1. FIELD NAME Wildcat | | 2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0865 0 | | 3. MMS OPERATOR NUMBER (5) 0635 | | | | | | | | | | | | | |
| 4. OPERATOR WELL NUMBER (6) 2 | 5. API NUMBER (10) or (12) STATE (2) COUNTY (3) WELL CODE (5) 55 171 00009 | SIDE TRACK (2) NA | COMPLETION CODE (3) E | 6. TYPE WELL (1) NA | 7. CORRECTED ELEVATION (5) NA | | | | | | | | | | | | |
| 8. OPERATOR NAME AND ADDRESS (SUBMITTING OFFICE) ARCO Alaska, Inc. PO Box 100360 Anchorage, AK 99510-0360 | | 9. CURRENT WELL DEPTH (5) MD 10,000' TVD 10,000' LEAVE BLANK | | 10. CORRECTED WATER DEPTH (5) 101' | | | | | | | | | | | | | |
| 11. CORRECTED LOCATION OF WELL (12) Surface: 6985' FWL and 3000' FSL of Block 672 Production zone: Total depth: | | | 12. OPERATING AREA CODE (2) FI | 13. BLOCK NUMBER (6) 0672 | | | | | | | | | | | | | |
| | | | 14. MAP OR OFFICIAL PROTRACTION DIAGRAM NUMBER (7) NR 6-4, Flaxman Island | | | | | | | | | | | | | | |
| 15. OPERATOR LEASE, UNIT OR COMMUNITIZATION NAME Kuvlum | | 16. RIG/PLATFORM NAME BeauDril - Kulluk | | 17. RIG TYPE (2) SS | | | | | | | | | | | | | |
| 18. WELL STATUS, e.g., shut-in, drilling, etc. Drilling | 19. LAST CASING STRING: size, lb/ft, grade, and setting depth (MD) 13-3/8", 68#/ft, L-80, @ 3978' | | 20. APPROXIMATE START DATE (6) YYMMDD 93 07 28 | | | | | | | | | | | | | | |
| 21. PRESENT PRODUCTION ZONE, IF ANY, AND PRODUCTIVE CAPABILITY NA | | | | | | | | | | | | | | | | | |
| 22. CHECK APPROPRIATE ACTIVITY: | | <table style="width:100%; border: none;"> <tr> <td style="width:33%;">Fracture/acidize <input type="checkbox"/></td> <td style="width:33%;">Artificial Lift <input type="checkbox"/></td> <td style="width:33%;">Other <input checked="" type="checkbox"/></td> </tr> <tr> <td>Pull or alter casing <input type="checkbox"/></td> <td>Repair well <input type="checkbox"/></td> <td>Perforate <input type="checkbox"/></td> </tr> <tr> <td>Sidetrack <input type="checkbox"/></td> <td>Deepen <input type="checkbox"/></td> <td>Plug back <input type="checkbox"/></td> </tr> <tr> <td>Reenter to complete <input type="checkbox"/>*</td> <td>Multiple complete <input type="checkbox"/>*</td> <td>Recomplete <input type="checkbox"/>*</td> </tr> </table> | | | | Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | Reenter to complete <input type="checkbox"/> * | Multiple complete <input type="checkbox"/> * | Recomplete <input type="checkbox"/> * |
| Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | |
| Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Reenter to complete <input type="checkbox"/> * | Multiple complete <input type="checkbox"/> * | Recomplete <input type="checkbox"/> * | | | | | | | | | | | | | | | |
| Data correction <input type="checkbox"/> Change plans <input type="checkbox"/> Request approval <input type="checkbox"/> Subsequent report <input checked="" type="checkbox"/> | | Note: Submit a separate Well (Re) Completion Report and a subsequent report of operations on this form for each completion. Alternatively, submit a Well (Re) Completion Report for each completion with a narrative as in item 23 of this form. | | | | | | | | | | | | | | | |
| 23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details in this space and on the reverse, and/or on an attachment, and give pertinent dates, including estimated date for starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work. | | | | | | | | | | | | | | | | | |

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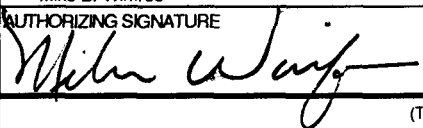
MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (continued from page 1)

SUBSURFACE SAFETY VALVE: SUBSURFACE CONTROLLED ☐ SURFACE CONTROLLED ☐ SET AT DEPTH OF _____

MANUFACTURER: _____ MODEL NO. _____ SERIAL NO. _____

WARNING: PUBLIC LAW 97-451 provides civil and criminal penalties for false or inaccurate reporting. Failure to report as required under the terms of the lease, permit, or contract may result in suspension of operations or other enforcement actions.

| | | |
|--|-------------------------------------|----------------------|
| CONTACT NAME (First, MI, Last) | PHONE NUMBER (10) | EXTENSION NUMBER (4) |
| Tim Billingsley | (907) 265-6575 | |
| AUTHORIZING NAME (First, MI, Last) | TITLE | |
| Mike B. Winfree | New Ventures Area Drilling Engineer | |
| AUTHORIZING SIGNATURE | DATE YYMMDD (6) | |
|  | 93 08 13 | |

(THIS SPACE IS FOR FEDERAL OFFICE USE)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐NONE ☒

DATE (6)

YYMMDD

9/1/93

☒ APPROVED BY:☐ ACCEPTED BY:

JAMES B. REGG

TITLE

Acting District Supervisor

PAPERWORK REDUCTION ACT STATEMENT

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that: This information is being collected to obtain knowledge of the equipment and procedures to be used during well-completion, workover, and production operations. This information will be used by the District Supervisor to evaluate and approve or disapprove the adequacy of the equipment and procedures to safely perform the proposed operations. Response to this request is mandatory (43 U.S.C. 1334).

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EXPIRES: OCTOBER 31, 1991

SUBMIT: Original,

two copies, and one public
information copy.

SUNDRY NOTICES AND REPORTS ON WELLS

| | | | | | | |
|---|--|---|---|--|---|--|
| 1. FIELD NAME Wildcat | | | 2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0865 0 | | 3. MMS OPERATOR NUMBER (5) 0635 | |
| 4. OPERATOR WELL NUMBER (6) 2 | | 5. API NUMBER (10) or (12) STATE (2) COUNTY (3) WELL CODE (5) 55 171 00009 | | SIDE TRACK(2) NA | COMPLETION CODE (3) E | 6. TYPE WELL (1) E |
| 7. CORRECTED ELEVATION (5) -166' (ML-RKB) | | | | 8. OPERATOR NAME AND ADDRESS (SUBMITTING OFFICE) ARCO Alaska, Inc. PO Box 100360 Anchorage, AK 99510-0360 | | 9. CURRENT WELL DEPTH (5) MD 10,000' TVD 10,000' LEAVE BLANK |
| 10. CORRECTED WATER DEPTH (5) 101' | | | | 11. CORRECTED LOCATION OF WELL (12) Surface: 6985' FWL and 3000' FSL of Block 672 Production zone: NA Total depth: NA | | 12. OPERATING AREA CODE (2) FI |
| 13. BLOCK NUMBER (6) 0672 | | | | 14. MAP OR OFFICIAL PROTRACTOR DIAGRAM NUMBER (7) NR 6-4, Flaxman Island | | |
| 15. OPERATOR LEASE, UNIT OR COMMUNITIZATION NAME Kuvlum | | | 16. RIG/PLATFORM NAME BeauDril - Kulluk | | 17. RIG TYPE (2) SS | |
| 18. WELL STATUS, e.g., shut-in, drilling, etc. Drilling | | 19. LAST CASING STRING: size, lb/ft, grade, and setting depth (MD) 13-3/8", 68#, L-80, BTC @ 3978' MD | | | 20. APPROXIMATE START DATE (6) YYMMDD 93 07 28 | |
| 21. PRESENT PRODUCTION ZONE, IF ANY, AND PRODUCTIVE CAPABILITY NA | | | | | | |
| 22. CHECK APPROPRIATE ACTIVITY: | | | | | | |
| Data correction <input type="checkbox"/> | | Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | | |
| Change plans <input type="checkbox"/> | | Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | | |
| Request approval <input type="checkbox"/> | | Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | | |
| Subsequent report <input checked="" type="checkbox"/> | | Reenter to complete <input type="checkbox"/> | Multiple complete <input type="checkbox"/> | Recomplete <input type="checkbox"/> | | |
| <p>Note: Submit a separate Well (Re) Completion Report and a subsequent report of operations on this form for each completion. Alternatively, submit a Well (Re) Completion Report for each completion with a narrative as in item 23 of this form.</p> | | | | | | |
| 23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details in this space and on the reverse, and/or on an attachment, and give pertinent dates, including estimated date for starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) | | | | | | |
| <p>1. Waiver is requested to continue drilling 12-1/4" hole below 10,000' until current bit is worn out or to a maximum TD of 12,000'. Verbal approval was obtained from Mr. Brian Schoof on 8/17/93.</p> | | | | | | |

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ANCHORAGE, ALASKA

23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (continued from page 1)

SUBSURFACE SAFETY VALVE: SUBSURFACE CONTROLLED ☐ SURFACE CONTROLLED ☐ SET AT DEPTH OF _____

MANUFACTURER: _____ MODEL NO. _____ SERIAL NO. _____

WARNING: PUBLIC LAW 97-451 provides civil and criminal penalties for false or inaccurate reporting. Failure to report as required under the terms of the lease, permit, or contract may result in suspension of operations or other enforcement actions.

CONTACT NAME (First, MI, Last)

Tim Billingsley

PHONE NUMBER (10)

(907) 265-6575

EXTENSION NUMBER (4)

AUTHORIZING NAME (First, MI, Last)

Mike B. Winfree

TITLE

New Ventures Area Drilling Engineer

AUTHORIZING SIGNATURE

DATE YYMMDD (6)

93 08 13

(THIS SPACE IS FOR FEDERAL OFFICE USE)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐NONE ☒DATE (6)
YYMMDD

9/1/93

☒ APPROVED BY:

James B. Regg

☐ ACCEPTED BY:

TITLE

Acting District Supervisor

PAPERWORK REDUCTION ACT STATEMENT

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that: This information is being collected to obtain knowledge of the equipment and procedures to be used during well-completion, workover, and production operations. This information will be used by the District Supervisor to evaluate and approve or disapprove the adequacy of the equipment and procedures to safely perform the proposed operations. Response to this request is mandatory (43 U.S.C. 1334).

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SUNDRY NOTICES AND REPORTS ON WELLS

| | | | | | | | | | | | | | | | | | | | |
|---|--|---|---|--|---|--|--|---|--|---|---|--------------------------------------|------------------------------------|------------------------------------|---------------------------------|------------------------------------|--|--|---------------------------------------|
| 1. FIELD NAME Wildcat | | | 2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0866 0 | | 3. MMS OPERATOR NUMBER (5) 0635 | | | | | | | | | | | | | | |
| 4. OPERATOR WELL NUMBER (6) 3 | | 5. API NUMBER (10) or (12) STATE (2) COUNTY (3) WELL CODE (5) 55 171 00010 | | 6. TYPE WELL (1) E | | 7. CORRECTED ELEVATION (5) RKB MSL= 66' est | | | | | | | | | | | | | |
| 8. OPERATOR NAME AND ADDRESS (SUBMITTING OFFICE) ARCO Alaska, Inc. PO Box 100360 Anchorage, AK 99510-0360 | | | | 9. CURRENT WELL DEPTH (5) MD TVD LEAVE BLANK | | 10. CORRECTED WATER DEPTH (5) 110' est. | | | | | | | | | | | | | |
| 11. CORRECTED LOCATION OF WELL (12) Surface: 5100' FWL and 5400' FNL of Block 673 Production zone: NA Total depth: NA | | | | 12. OPERATING AREA CODE (2) FI | | 13. BLOCK NUMBER (6) 0673 | | | | | | | | | | | | | |
| | | | | 14. MAP OR OFFICIAL PROTRACTION DIAGRAM NUMBER (7) NR 6-4, Flaxman Island | | | | | | | | | | | | | | | |
| 15. OPERATOR LEASE, UNIT OR COMMUNITIZATION NAME Kuvlum | | | | 16. RIG/PLATFORM NAME BeauDril - Kulluk | | 17. RIG TYPE (2) SS | | | | | | | | | | | | | |
| 18. WELL STATUS, e.g., shut-in, drilling, etc. Pre-spud | | 19. LAST CASING STRING: size, lb/ft, grade, and setting depth (MD) | | | 20. APPROXIMATE START DATE (6) YYMMDD 93 08 26 | | | | | | | | | | | | | | |
| 21. PRESENT PRODUCTION ZONE, IF ANY, AND PRODUCTIVE CAPABILITY NA | | | | | | | | | | | | | | | | | | | |
| 22. CHECK APPROPRIATE ACTIVITY: | | <table border="0" style="width:100%;"> <tr> <td>Fracture/acidize <input type="checkbox"/></td> <td>Artificial Lift <input type="checkbox"/></td> <td>Other <input checked="" type="checkbox"/></td> </tr> <tr> <td>Pull or alter casing <input type="checkbox"/></td> <td>Repair well <input type="checkbox"/></td> <td>Perforate <input type="checkbox"/></td> </tr> <tr> <td>Sidetrack <input type="checkbox"/></td> <td>Deepen <input type="checkbox"/></td> <td>Plug back <input type="checkbox"/></td> </tr> <tr> <td>Reenter to complete <input type="checkbox"/>*</td> <td>Multiple complete <input type="checkbox"/>*</td> <td>Recomplete <input type="checkbox"/>*</td> </tr> </table> <p>Note: Submit a separate Well (Re) Completion Report and a subsequent report of operations on this form for each completion. Alternatively, submit a Well (Re) Completion Report for each completion with a narrative as in item 23 of this form.</p> | | | | | | Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | Reenter to complete <input type="checkbox"/> * | Multiple complete <input type="checkbox"/> * | Recomplete <input type="checkbox"/> * |
| Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | | | |
| Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | | | | | | | | | | | | | | | | | |
| Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | | | | | | | | | | | | | | | | | |
| Reenter to complete <input type="checkbox"/> * | Multiple complete <input type="checkbox"/> * | Recomplete <input type="checkbox"/> * | | | | | | | | | | | | | | | | | |
| <p>23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details in this space and on the reverse, and/or on an attachment, and give pertinent dates, including estimated date for starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)</p> <p>1. Waiver to allow weekly instead of daily H2S monitoring equipment test was verbally approved by Mr. Lee Sires on 8/4/93.</p> <p>2. Waiver to allow riser inspection by divers to occur with routine dives rather than daily was verbally granted by Mr. Brian Schoof on 8/13/93.</p> <p>3. Waiver to allow diverter testing to occur with weekly BOPE test rather than daily and diverter test would not be to total closure was verbally granted by Mr. Brian Schoof on 8/13/93.</p> | | | | | | | | | | | | | | | | | | | |

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ANCHORAGE, ALASKA

23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (continued from page 1)

SUBSURFACE SAFETY VALVE: SUBSURFACE CONTROLLED ☐ SURFACE CONTROLLED ☐ SET AT DEPTH OF _____

MANUFACTURER: _____ MODEL NO. _____ SERIAL NO. _____

WARNING: PUBLIC LAW 97-451 provides civil and criminal penalties for false or inaccurate reporting. Failure to report as required under the terms of the lease, permit, or contract may result in suspension of operations or other enforcement actions.

CONTACT NAME (First, MI, Last)

Tim Billingsley

PHONE NUMBER (10)

(907) 265-6575

EXTENSION NUMBER (4)

AUTHORIZING NAME (First, MI, Last)

Mike B. Winfree

TITLE

New Ventures Area Drilling Engineer

AUTHORIZING SIGNATURE

DATE YYMMDD (6)

93 08 13

(THIS SPACE IS FOR FEDERAL OFFICE USE)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐NONE ☒DATE (6)
YYMMDD

9/1/93

☒ APPROVED BY:☐ ACCEPTED BY:

James B. Regg

TITLE

Acting District Supervisor

PAPERWORK REDUCTION ACT STATEMENT

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that: This information is being collected to obtain knowledge of the equipment and procedures to be used during well-completion, workover, and production operations. This information will be used by the District Supervisor to evaluate and approve or disapprove the adequacy of the equipment and procedures to safely perform the proposed operations. Response to this request is mandatory (43 U.S.C. 1334).

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AUG 10 1993

OMB APPROVAL NO. 1010-0045

EXPIRES: OCTOBER 31, 1991

SUBMIT: Original,

two copies, and one public information copy.

Public Information

Minerals Management Service
Anchorage, Alaska

SUNDRY NOTICES AND REPORTS ON WELLS

| | | | | | | | | | | | | | | | | | |
|---|--|---|--|---|---------------------------------------|---|--|---|---|--------------------------------------|------------------------------------|------------------------------------|---------------------------------|------------------------------------|--|--|---------------------------------------|
| 1. FIELD NAME Wildcat | | 2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0865 0 | | 3. MMS OPERATOR NUMBER (5) 0635 | | | | | | | | | | | | | |
| 4. OPERATOR WELL NUMBER (6) 2 | 5. API NUMBER (10) or (12) STATE (2) COUNTY (3) WELL CODE (5) 55 171 00009 | | SIDE TRACK (2) NA | COMPLETION CODE (3) E | 6. TYPE WELL (1) NA | | | | | | | | | | | | |
| 8. OPERATOR NAME AND ADDRESS (SUBMITTING OFFICE) ARCO Alaska, Inc. PO Box 100360 Anchorage, AK 99510-0360 | | | 9. CURRENT WELL DEPTH (5) MD TVD LEAVE BLANK | | 10. CORRECTED WATER DEPTH (5) 101' | | | | | | | | | | | | |
| 11. CORRECTED LOCATION OF WELL (12) Surface: 6985' FWL and 3000' FSL of Block 672 Production zone: Total depth: | | | 12. OPERATING AREA CODE (2) FI | | 13. BLOCK NUMBER (6) 0672 | | | | | | | | | | | | |
| 15. OPERATOR LEASE, UNIT OR COMMUNITIZATION NAME Kuvium | | | 16. RIG/PLATFORM NAME BeauDril - Kuljuk | | 17. RIG TYPE (2) SS | | | | | | | | | | | | |
| 18. WELL STATUS, e.g., shut-in, drilling, etc. Drilling | | 19. LAST CASING STRING: size, lb/ft, grade, and setting depth (MD) 13-3/8", 68#/ft, L-80, @ 3978' | | 20. APPROXIMATE START DATE (6) YYMMDD 93 07 28 | | | | | | | | | | | | | |
| 21. PRESENT PRODUCTION ZONE, IF ANY, AND PRODUCTIVE CAPABILITY NA | | | | | | | | | | | | | | | | | |
| 22. CHECK APPROPRIATE ACTIVITY: | | <table border="0"> <tr> <td>Fracture/acidize <input type="checkbox"/></td> <td>Artificial Lift <input type="checkbox"/></td> <td>Other <input checked="" type="checkbox"/></td> </tr> <tr> <td>Pull or alter casing <input type="checkbox"/></td> <td>Repair well <input type="checkbox"/></td> <td>Perforate <input type="checkbox"/></td> </tr> <tr> <td>Sidetrack <input type="checkbox"/></td> <td>Deepen <input type="checkbox"/></td> <td>Plug back <input type="checkbox"/></td> </tr> <tr> <td>Reenter to complete <input type="checkbox"/>*</td> <td>Multiple complete <input type="checkbox"/>*</td> <td>Recomplete <input type="checkbox"/>*</td> </tr> </table> | | | | Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | Reenter to complete <input type="checkbox"/> * | Multiple complete <input type="checkbox"/> * | Recomplete <input type="checkbox"/> * |
| Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | | | | | | | | | | | | | | | |
| Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | | | | | | | | | | | | | | | |
| Reenter to complete <input type="checkbox"/> * | Multiple complete <input type="checkbox"/> * | Recomplete <input type="checkbox"/> * | | | | | | | | | | | | | | | |
| Data correction <input type="checkbox"/> Change plans <input type="checkbox"/> Request approval <input type="checkbox"/> Subsequent report <input checked="" type="checkbox"/> | | Note: Submit a separate Well (Re) Completion Report and a subsequent report of operations on this form for each completion. Alternatively, submit a Well (Re) Completion Report for each completion with a narrative as in item 23 of this form. | | | | | | | | | | | | | | | |
| 23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details in this space and on the reverse, and/or on an attachment, and give pertinent dates, including estimated date for starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) | | | | | | | | | | | | | | | | | |

23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (continued from page 1)

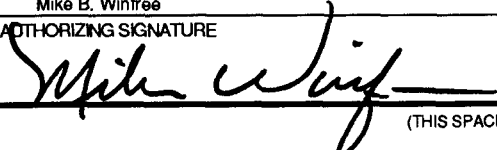
Received
OCS District Office

AUG 10 1993

Minerals Management Service
Anchorage, AlaskaSUBSURFACE SAFETY VALVE: SUBSURFACE CONTROLLED ☐ SURFACE CONTROLLED ☐ SET AT DEPTH OF _____

MANUFACTURER: _____ MODEL NO. _____ SERIAL NO. _____

WARNING: PUBLIC LAW 97-451 provides civil and criminal penalties for false or inaccurate reporting. Failure to report as required under the terms of the lease, permit, or contract may result in suspension of operations or other enforcement actions.

| | | |
|---|--|----------------------|
| CONTACT NAME (First, MI, Last) Tim Billingsley | PHONE NUMBER (10) (907) 265-6575 | EXTENSION NUMBER (4) |
| AUTHORIZING NAME (First, MI, Last) Mike B. Winfree | TITLE New Ventures Area Drilling Engineer | |
| AUTHORIZING SIGNATURE  | DATE YYMMDD (6) 93 08 13 | |

(THIS SPACE IS FOR FEDERAL OFFICE USE)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐NONE ☐DATE (6)
YYMMDD☒ APPROVED BY: ☐ ACCEPTED BY: _____

TITLE

DISTRICT SUPERVISOR AUG 10, 93

PAPERWORK REDUCTION ACT STATEMENT

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that: This information is being collected to obtain knowledge of the equipment and procedures to be used during well-completion, workover, and production operations. This information will be used by the District Supervisor to evaluate and approve or disapprove the adequacy of the equipment and procedures to safely perform the proposed operations. Response to this request is mandatory (43 U.S.C. 1334).

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AUG 16 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Minerals Management Service
Anchorage, Alaska

| | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|-----------------------------|--|--|---|--|---|---|--------------------------------------|------------------------------------|------------------------------------|---------------------------------|------------------------------------|--|--|-------------------------------------|
| 1. FIELD NAME Wildcat | | | | 2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0865 0 | | 3. MMS OPERATOR NUMBER (5) 0635 | | | | | | | | | | | | | |
| 4. OPERATOR WELL NUMBER (6) 2 | | 5. API NUMBER (10) or (12) STATE (2) COUNTY (3) WELL CODE (5) 55 171 00009 | | SIDE TRACK(2) NA | COMPLETION CODE (3) E | 6. TYPE WELL (1) E | | | | | | | | | | | | | |
| 7. CORRECTED ELEVATION (5) -166' (ML-RKB) | | | | 8. OPERATOR NAME AND ADDRESS (SUBMITTING OFFICE) ARCO Alaska, Inc. PO Box 100360 Anchorage, AK 99510-0360 | | 9. CURRENT WELL DEPTH (5) MD 4005' TVD 4005' LEAVE BLANK | | | | | | | | | | | | | |
| 10. CORRECTED WATER DEPTH (5) 101' | | | | 11. CORRECTED LOCATION OF WELL (12) Surface: 6985' FWL and 3000' FSL of Block 672 Production zone: NA Total depth: NA | | | | | | | | | | | | | | | |
| 12. OPERATING AREA CODE (2) FI | | | | 13. BLOCK NUMBER (6) 0672 | | | | | | | | | | | | | | | |
| 14. MAP OR OFFICIAL PROTRACTION DIAGRAM NUMBER (7) NR 6-4, Flaxman Island | | | | 15. OPERATOR LEASE, UNIT OR COMMUNITIZATION NAME Kuvlum | | | | | | | | | | | | | | | |
| 16. RIG/PLATFORM NAME BeauDril - Kulluk | | | | 17. RIG TYPE (2) SS | | | | | | | | | | | | | | | |
| 18. WELL STATUS, e.g., shut-in, drilling, etc. Drilling | | 19. LAST CASING STRING: size, lb/ft, grade, and setting depth (MD) 13-3/8", 68#, L-80, BTC @ 3978' MD | | 20. APPROXIMATE START DATE (6) YYMMDD 93 07 28 | | | | | | | | | | | | | | | |
| 21. PRESENT PRODUCTION ZONE, IF ANY, AND PRODUCTIVE CAPABILITY NA | | | | | | | | | | | | | | | | | | | |
| 22. CHECK APPROPRIATE ACTIVITY: | | <table border="0" style="width:100%;"> <tr> <td>Fracture/acidize <input type="checkbox"/></td> <td>Artificial Lift <input type="checkbox"/></td> <td>Other <input checked="" type="checkbox"/></td> </tr> <tr> <td>Pull or alter casing <input type="checkbox"/></td> <td>Repair well <input type="checkbox"/></td> <td>Perforate <input type="checkbox"/></td> </tr> <tr> <td>Sidetrack <input type="checkbox"/></td> <td>Deepen <input type="checkbox"/></td> <td>Plug back <input type="checkbox"/></td> </tr> <tr> <td>Reenter to complete <input type="checkbox"/></td> <td>Multiple complete <input type="checkbox"/></td> <td>Recomplete <input type="checkbox"/></td> </tr> </table> | | | | | | Fracture/acidize <input type="checkbox"/> | Artificial Lift <input type="checkbox"/> | Other <input checked="" type="checkbox"/> | Pull or alter casing <input type="checkbox"/> | Repair well <input type="checkbox"/> | Perforate <input type="checkbox"/> | Sidetrack <input type="checkbox"/> | Deepen <input type="checkbox"/> | Plug back <input type="checkbox"/> | Reenter to complete <input type="checkbox"/> | Multiple complete <input type="checkbox"/> | Recomplete <input type="checkbox"/> |
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| 23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details in this space and on the reverse, and/or on an attachment, and give pertinent dates, including estimated date for starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work. | | | | | | | | | | | | | | | | | | | |
| 1. 13-3/8" Surface Casing installed 7-27-93. CIP @ 05:00 hrs 7-28-93. Casing was cemented with 1050 sx Class G w/2% gel and 2% CaCl ₂ @ 13.5 ppg, and 500 sx Class G w/2% CaCl ₂ @ 15.8 ppg. Subsea launched wiper plugs were utilized. 13-3/8" casing detail attached. | | | | | | | | | | | | | | | | | | | |
| 2. A formation 'Leak Off Test' was performed after drilling 10' of new formation below the 13-3/8" casing shoe. A 14.9 ppg EMW test was obtained. Pressure / Rate / Volume chart is attached. | | | | | | | | | | | | | | | | | | | |
| 3. Waiver to allow riser inspection by divers to occur with routine dives rather than daily was verbally granted by Mr. Brian Schoof on 8/13/93. | | | | | | | | | | | | | | | | | | | |
| 4. Waiver to allow diverter testing to occur with weekly BOPE test rather than daily and diverter test would not be to total closure was verbally granted by Mr. Brian Schoof on 8/13/93. | | | | | | | | | | | | | | | | | | | |

23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (continued from page 1)

Received
OCS District Office

AUG 16 1993

Minerals Management Service
Anchorage, AlaskaSUBSURFACE SAFETY VALVE: SUBSURFACE CONTROLLED ☐ SURFACE CONTROLLED ☐ SET AT DEPTH OF _____

MANUFACTURER: _____ MODEL NO. _____ SERIAL NO. _____

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CONTACT NAME (First, MI, Last)

Tim Billingsley

PHONE NUMBER (10)

(907) 265-6575

EXTENSION NUMBER (4)

AUTHORIZING NAME (First, MI, Last)

Mike B. Winfree

TITLE

New Ventures Area Drilling Engineer

AUTHORIZING SIGNATURE

DATE YYMMDD (6)

93 08 13

(THIS SPACE IS FOR FEDERAL OFFICE USE)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐NONE ☐

DATE (6)

YYMMDD

☒ APPROVED BY: _____☐ ACCEPTED BY: _____

TITLE

DISTRICT SUPERVISOR AUG 17 1993

PAPERWORK REDUCTION ACT STATEMENT

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08/12/93

SECURE-FX TRANSMISSION

05:34

LUN 11 - 907 265 1393

NO. 732 015

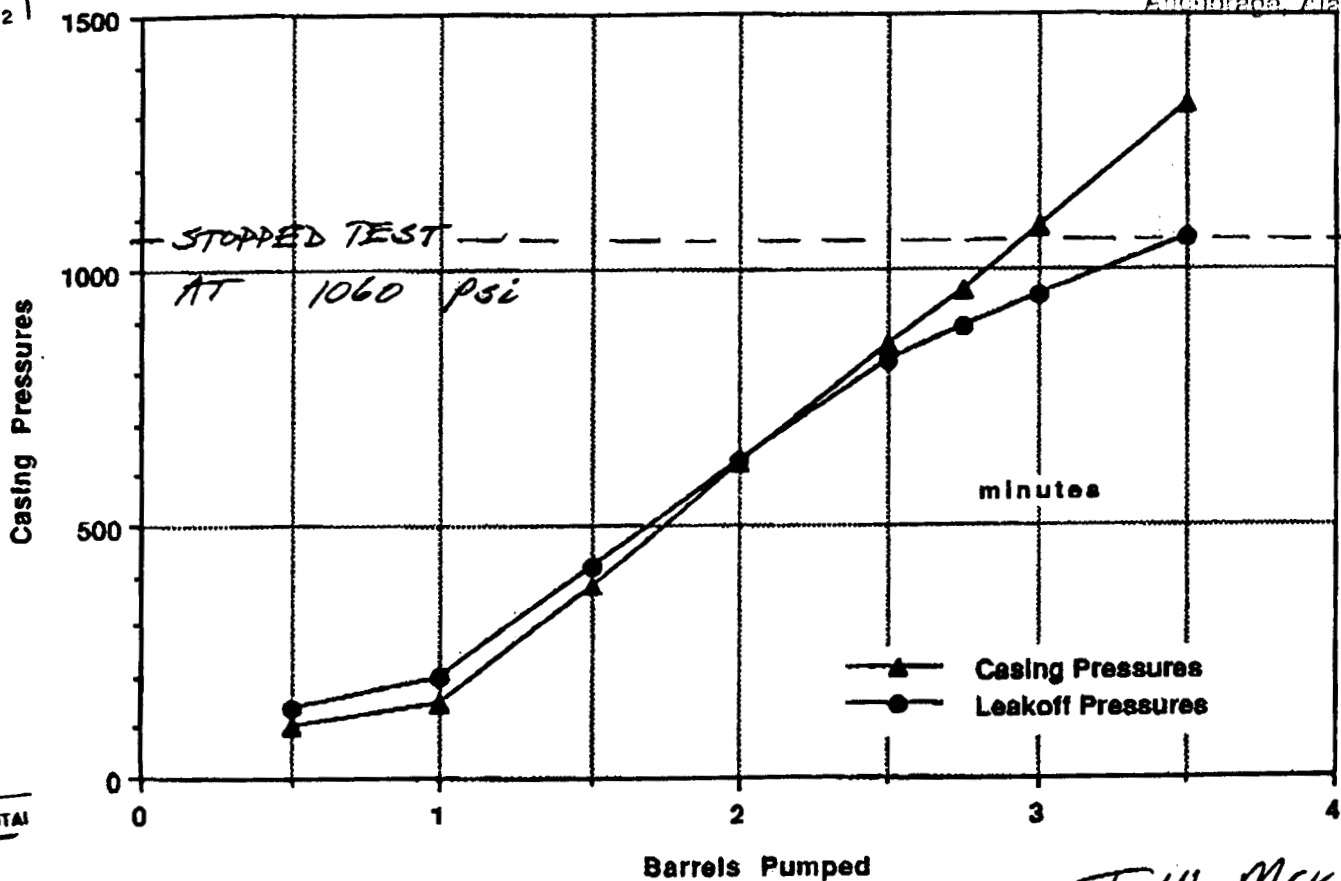
FORMATION PRESSURE TEST
CALCULATION TESTWELL: KUVLUM #2DATE/TIME: 8/14/93, 12:00 HRSSUPERVISOR: BRUCE CAMPBELLPIC: CANMAR KULLUKMUD WEIGHT = 9.8 ppg = MWTRUE VERTICAL DEPTH = 3978' FEET = TVD (STB)HYDROSTATIC HEAD1 (HH 1) = $0.052 \times \text{TVD} \times \text{MW} =$ 2027 psiTo calculate the pressure necessary to obtain a 14.9 equivalent mud weight (EMW) it is necessary to determine the hydrostatic head which would be obtained with a 14.9 ppg mud.HYDROSTATIC HEAD 2 (HH 2) = $0.052 \times \text{TVD} \times \text{EMW} =$ 3082 psi.To obtain the surface pressure required to give a 14.9 ppg EMW, subtract HH 1 from HH 2.HH 2 - HH 1 = required surface pressure = 1055 psi. OR APPROX 1060 psi AS SHOWN ON PLOT

Held _____ psi for _____ minutes. Leak off? yes no

OCS District Office

AUG 10 1993

Pressure Profiles

Minerals Management Service
Anchorage, Alaska

volume: 1 stroke = _____ bbls

T.W. McKay

Public Information

SUNDRY NOTICES AND REPORTS ON WELLS

| | | | | | | | |
|---|--|--|---|--|--|---------------------------------------|----------------------------------|
| 1. FIELD NAME Wildcat | | | 2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0865 0 | | 3. MMS OPERATOR NUMBER (5) 0635 | | |
| 4. OPERATOR WELL NUMBER (6) 2 | | 5. API NUMBER (10) or (12) STATE (2) COUNTY (3) WELL CODE (5) 55 171 00009 | | SIDE TRACK(2) NA | COMPLETION CODE (3) E | 6. TYPE WELL (1) E | 7. CORRECTED ELEVATION (5) NA |
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| 18. WELL STATUS, e.g., shut-in, drilling, etc. Drilling | | 19. LAST CASING STRING: size, lb/ft, grade, and setting depth (MD) 20", 133#/ft, X-56, @ 1017' MD | | | 20. APPROXIMATE START DATE (6) YYMMDD 93 07 28 | | |
| 21. PRESENT PRODUCTION ZONE, IF ANY, AND PRODUCTIVE CAPABILITY NA | | | | | | | |
| 22. CHECK APPROPRIATE ACTIVITY: | | Fracture/acidize <input type="checkbox"/> Artificial Lift <input type="checkbox"/> Other <input checked="" type="checkbox"/> Pull or alter casing <input type="checkbox"/> Repair well <input type="checkbox"/> Perforate <input type="checkbox"/> Sidetrack <input type="checkbox"/> Deepen <input type="checkbox"/> Plug back <input type="checkbox"/> Reenter to complete <input type="checkbox"/> * Multiple complete <input type="checkbox"/> * Recomplete <input type="checkbox"/> * Data correction <input type="checkbox"/> Change plans <input type="checkbox"/> Request approval <input type="checkbox"/> Subsequent report <input checked="" type="checkbox"/> | | | | | |
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Received
OCS District Office
AUG 06 1993
Minerals Management Service
Anchorage, Alaska

23. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (continued from page 1)

Received
OOB District Office

AUG 06 1993

Minerals Management Service
Anchorage, AlaskaSUBSURFACE SAFETY VALVE: SUBSURFACE CONTROLLED ☐ SURFACE CONTROLLED ☐ SET AT DEPTH OF _____

MANUFACTURER: _____ MODEL NO. _____ SERIAL NO. _____

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CONTACT NAME (First, MI, Last)

Tim A. Billingsley

PHONE NUMBER (10)

(907) 265-6575

EXTENSION NUMBER (4)

AUTHORIZING NAME (First, MI, Last)

Michael B. Winfree

TITLE

New Ventures Area Drilling Engineer

AUTHORIZING SIGNATURE

DATE YYMMDD (6)

93 08 03

(THIS SPACE IS FOR FEDERAL OFFICE USE)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED ☐NONE ☒

DATE (6)

YYMMDD

8/6/93

☐ APPROVED BY:☒ ACCEPTED BY:

TITLE

James B. Regg Acting District Supervisor

PAPERWORK REDUCTION ACT STATEMENT

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CASING / TUBING / LINER DETAIL
ARCO ALASKA / Subsidiary of Atlantic Richfield
30" CASING DETAIL

WELL: Kuvlum #2
DATE: 7/28/93
PAGE: 1

FINAL

| # ITEMS | COMPLETE DESCRIPTION OF EQUIPMENT RUN | LENGTH | DEPTH |
|---------|--|--------|--------|
| | | | |
| | | | |
| | RKB to top of DrilQuip 30" Wellhead Housing | | 201.70 |
| | | | |
| 1 ea | 30" DrilQuip Wellhead Housing c/w extension Vetco ST-2 Box | 8.28 | 209.98 |
| 1 ea | 30" 457 lb/ft, X-52, ST-2 Pin Up x D-60-MT Pin Down | 40.45 | 250.43 |
| 1 ea | 30" 457 lb/ft, X-52, D-60-MT Box Up x Pin Down | 41.11 | 291.54 |
| 1 ea | 30" 457 lb/ft, X-52, D-60MT, Box up Casing Cutoff | 10.42 | 301.96 |
| | | | |
| | TD of 30" Casing Shoe | | 301.96 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | 30" Casing was drilled in | | |
| | | | |
| | 30" shoe was cut with an internal bevel | | |
| | | | |
| | Make-up torque on D-60-MT connector was 30,000 ft-lbs | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

RAN:

Received
OCS District Office

Aug 06 1993

Supervisor: B. Campbell

Minerals Management Service
Anchorage, Alaska

Supervisor : Campbell, Straughan, Danielsen

Data from "KUVLUM #2, 20" LOT"

WELL: Kuvlum #2, 20" Leak Off Test

DATE/TIME: 8/1/93, 11:45 PM

SUPERVISOR: T.B.CAMPBELL

RIG: CDU KULLUK

MUD WEIGHT = 9.8 ppg = MW

TRUE VERTICAL DEPTH = 1040 FEET = TVD

HYDROSTATIC HEAD = $0.052 \times \text{TVD} \times \text{MW} = 530 \text{ psi}$

Leak-off test pressure taken from graph @ 170 psi with 1 barrel pumped.

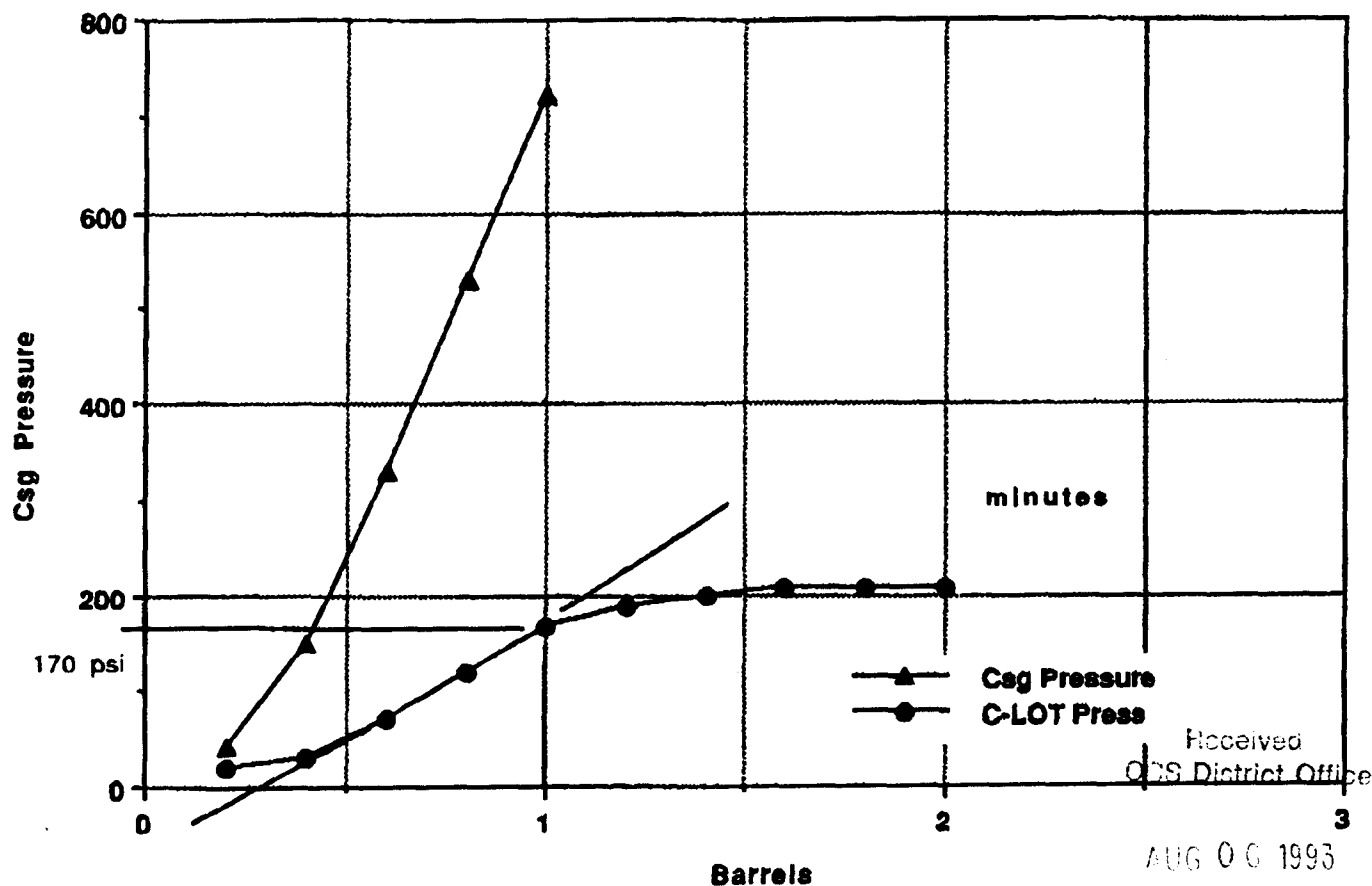
Leak-off EMW = $((0.052 \times \text{TVD} \times \text{MW}) + (\text{Surface press})) / (\text{TVD} \times .052) = 700 / (1040 \times .052)$

Leak-off EMW = 12.94 ppg

Both Casing baseline and Leak-off tests taken @ 1/2 BPM using Dowell pump unit

Held pressure shut-in for 5 minutes. Leak off? yes, bled from 210 psi to 60 psi in 5 min.

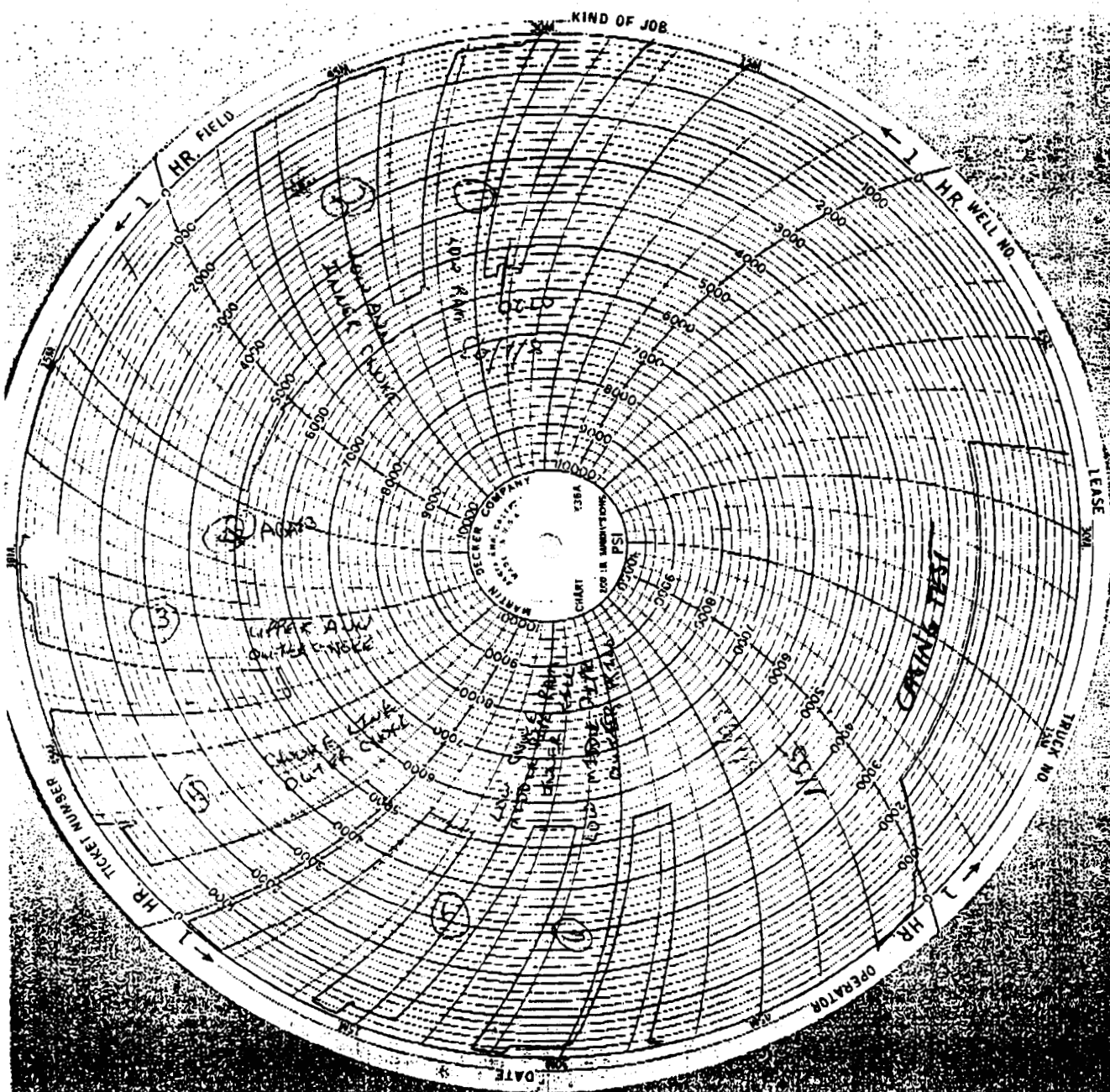
Pressure Profiles



Received
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Minerals Management Service
Anchorage, Alaska

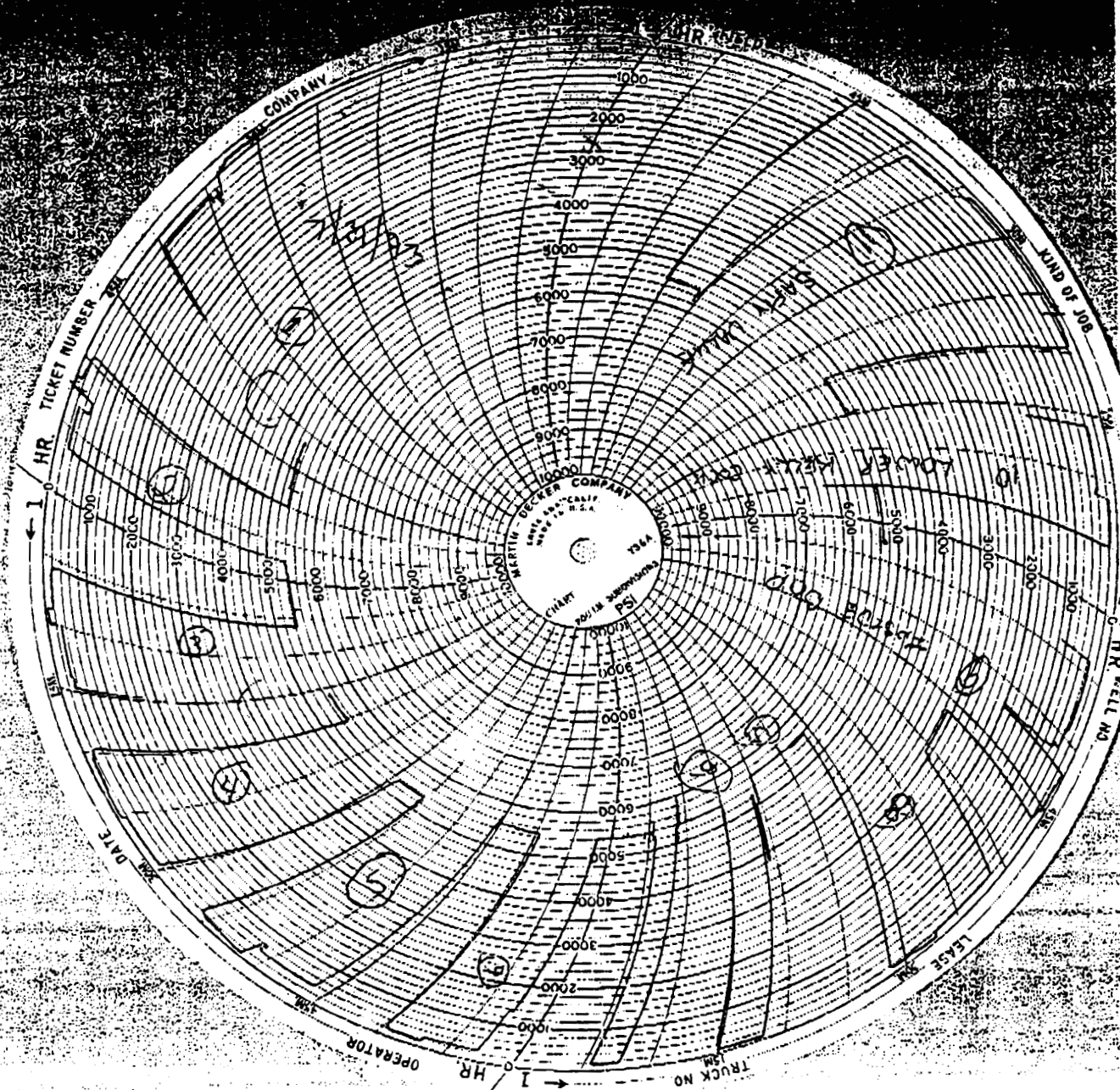


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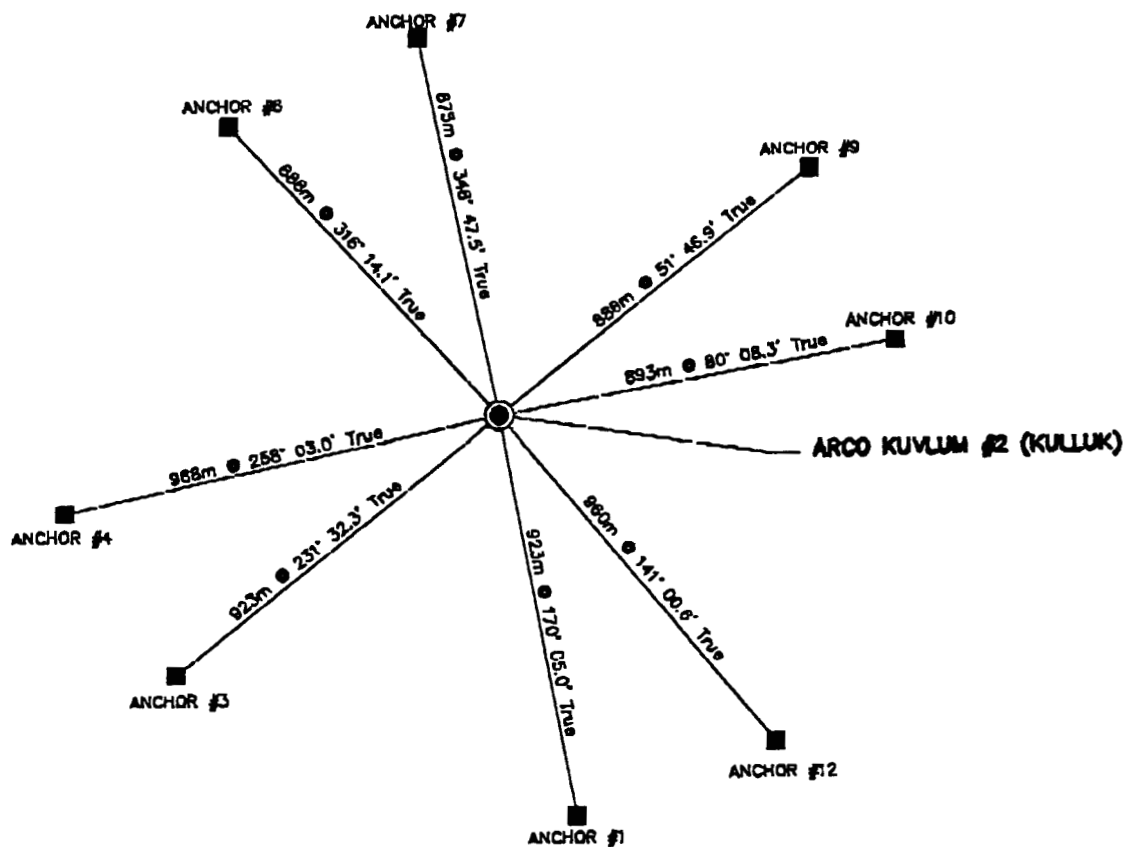
CHOKE MANIFOLD

003 District Office

AUG 03 1993

Minerals Management Service
Anchorage, Alaska

ARCO KUVLUM #2 EXPLORATORY WELL
BLOCK 672
CAMDEN BAY, ALASKA
July 19, 1993



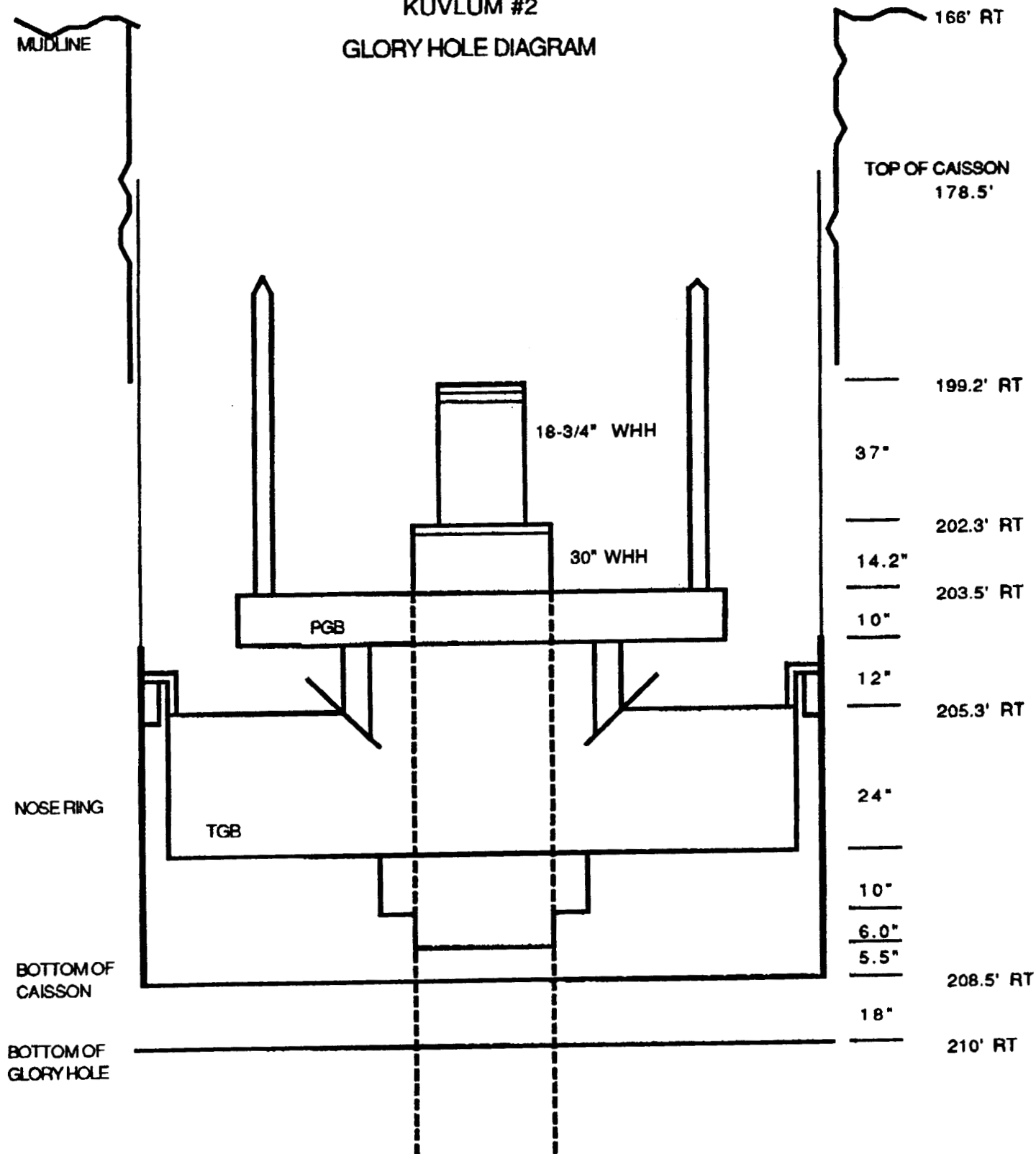
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Anchorage, Alaska

MOORING DIAGRAM
for the
C.D.U. KULLUK

KUVLUM #2 GLORY HOLE DIAGRAM



BOP HEIGHT: 22.8' FROM WELLHEAD TO TOP OF LMRP CONNECTOR (34.2' ABOVE BOTTOM OF GLORY HOLE)
 TOP OF LMRP CONNECTOR WILL BE AT 175.8' RT OR 9.8' BELOW THE MUDLINE

AUG 06 1993

JULY 27, 1993

Minerals Management Service
 Anchorage, Alaska

07/21/93

08:14

ARCO KUULUM II → 907 265 1393

NO. 543

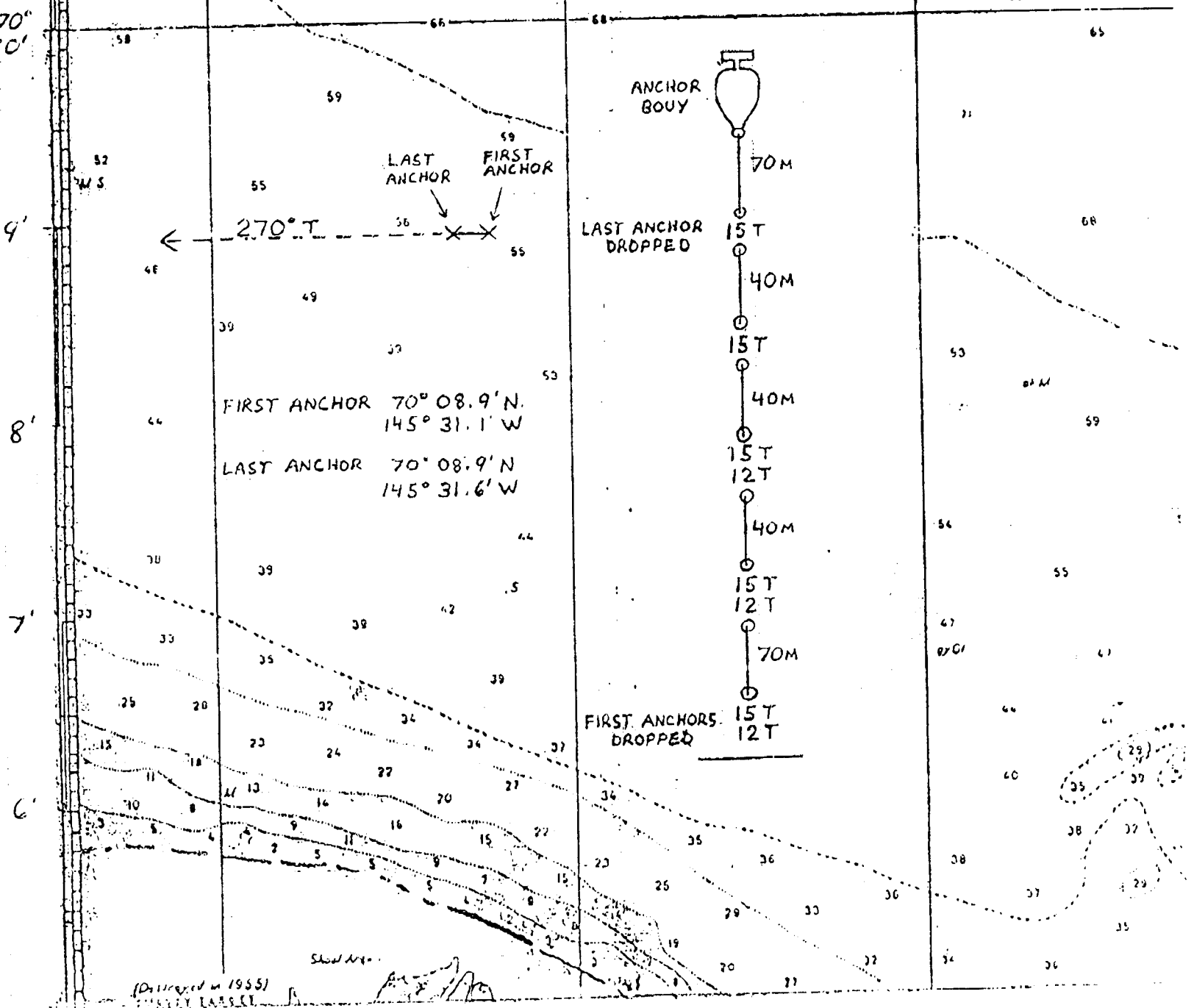
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FROM IKAHUK July 17th/93

CHART 16044

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Minerals Management Service
Anchorage, AlaskaWET STORAGE
ANCHOR SEQUENCE(Distorted in 1955)
SOUNDINGS

PUBLIC INFORMATION COPY

| APPLICATION FOR PERMIT TO DRILL | | | | | | INITIAL DRILLING OF WELL ONLY | |
|---|------------------------------------|---|---|--|--|-------------------------------|--|
| 1. FIELD NAME <i>Wildcat</i> | | | 2. MMS LEASE UNIT OR COMM. NO. (6) <i>Y 0865 0</i> | | 3. MMS OPERATOR NUMBER (5) <i>00635</i> | | |
| 4. OPERATOR WELL NUMBER (6) <i>2</i> | | 5. TYPE OF WELL (1) LEAVE BLANK <i>E</i> | | | 6. ESTIMATED ELEVATION (5) <i>RKB-MSL=66'</i> | | |
| 7. OPERATOR NAME AND ADDRESS (SUBMITTING OFFICE) <i>ARCO Alaska, Inc. P.O. Box 100360 Anchorage, AK 99510-0360</i> | | | 8. PROPOSED WELL DEPTH (5) <i>MD 12000' TVD 12,000'</i> LEAVE BLANK | | 9. ESTIMATED WATER DEPTH (5) <i>96</i> | | |
| 10. PROPOSED LOCATION OF WELL (12) <i>Surface: 7000' FWL & 3000' FSL Block 672</i> <i>Production zone: Same</i> <i>Total depth: Same</i> | | | 11. OPERATING AREA CODE (2) <i>FI</i> | | 12. BLOCK NUMBER (6) <i>0672</i> | | |
| | | | 13. MAP OR OFFICIAL PROTRACTION DIAGRAM NUMBER (7) <i>NR 6-4, Flaxman Island</i> | | | | |
| | | | | | | | |
| 14. OPERATOR LEASE UNIT OR COMMUNITIZATION NAME <i>Kuvlum</i> | | | 15. RIG/PLATFORM NAME <i>BeauDril Kulluk</i> | | 16. RIG TYPE (2) <i>SS</i> | | |
| 17. DISTANCE IN FEET FROM NEAREST WELL DRILLING, PRODUCING, OR ABANDONED (6) <i>18922'</i> <i>Kuvlum #1</i> | | 18. DISTANCE IN MILES FROM PROPOSED (3) LOCATION TO NEAREST SHORELINE <i>12.5</i> | | 19. APPROXIMATE START DATE (6) YYMMDD <i>93 08 01</i> | | | |
| 20. PROPOSED CASING AND CEMENTING PROGRAM (Attach complete well prognosis) | | | | | | | |
| HOLE SIZE (4) | CASING SIZE (4), LB/FT (5) & GRADE | SETTING DEPTH MD (5) TVD (5) | | QUANTITY OF CEMENT (Cu. Ft./type) | | | |
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| | | | | | | | |
| CASING DESIGN SAFETY FACTORS | | | | | | | |
| CASING SIZE | COLLAPSE | TENSION | BURST | ASSUMPTIONS USED TO ARRIVE AT THESE VALUES: (Attach a separate sheet, if necessary, showing all assumptions and calculations) | | | |
| | | | | | | | |

APPLICATION FOR PERMIT TO DRILL

21. COMMENTS

WARNING: PUBLIC LAW 97-451 provides civil and criminal penalties for false or inaccurate reporting. Failure to report as required under the terms of the lease, permit, or contract may result in suspension of operations or other enforcement actions.

CONTACT NAME (First, MI, Last)

T.W. McKay

PHONE NUMBER (10)

(907) 265-6890

EXTENSION NUMBER (4)

AUTHORIZING NAME (First, MI, Last)

M.B. Winfree

TITLE

New Ventures Area Drilling Engineer

AUTHORIZING SIGNATURE

DATE YYMMDD (6)

93-02-05

API WELL NUMBER (10)

(This space is for MMS use)

STATE

COUNTY

SEQUENCE

(2)

(3)

(5)

55-171-00009

ASSIGNED BY

BRIAN F. SCHOOF

DATE

5/7/93

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES: ARE ATTACHED ☐ NONE ☐

APPROVED BY

Orig. Sgnd. By Brian Schoof

TITLE

DISTRICT SUPERVISOR

DATE

6/25/93

PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that this information is being collected to obtain knowledge of equipment and procedures to be used in drilling operations. This information will be used by MMS District Supervisors to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operation. Response to this request is mandatory (43 U.S.C. 1334).

Public reporting burden for this form is estimated to average 1/2 hour per response, including 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 2300, Minerals Management Service, 361 Elden Street, Herndon, VA 22070-4817; and Office of Management and Budget, Paperwork Reduction Project (OMB No. 1010-0044), Washington, D.C. 20503.

ATTACHMENTS

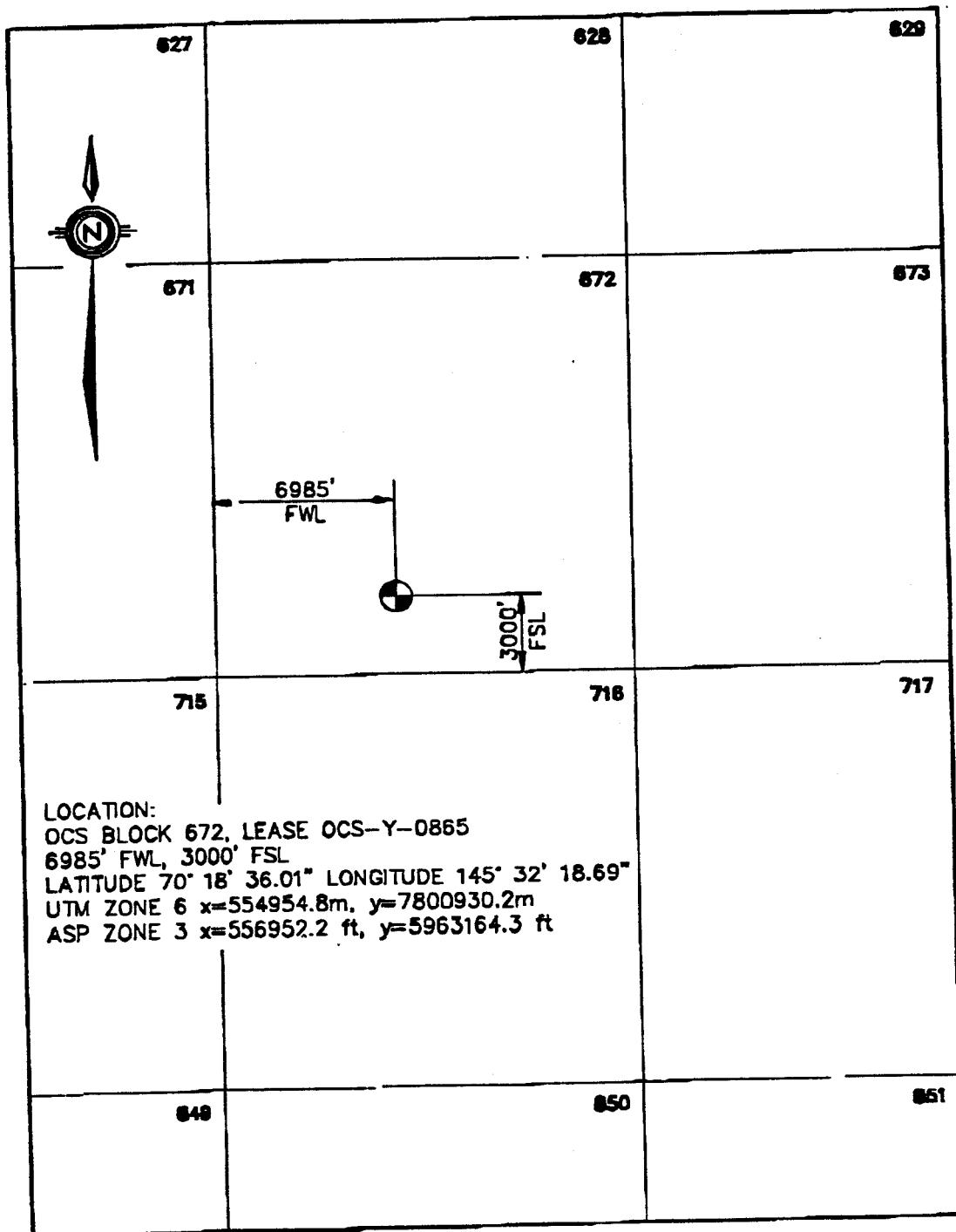
The following check list is provided for your convenience: (Refer to 30 CFR 250.64 for complete details)

a. Mobile drilling units ** Vessel Certifications and Inspections for 1993 operations will be scheduled later; certifications exist for 1992 operation.

- ☒ 1. Environmental and operational maximums of unit
- ☐ 2. Vessel certification
 - ☐ (a) American Bureau of Shipping classifications, and
 - ☐ (b) U.S. Coast Guard
 - ☐ (1) Certificate of Inspection (U.S. flag vessel), or
 - ☐ (2) Letter of Compliance (foreign flag vessel)
- ☒ 3. Operating or design limitations and applicable contingency plans.
- ☒ 4. Program for drilling from floater or semisubmersible without returns

b. All APD's

- ☒ 1. Location plot at 2000'/1" scale
- ☒ 2. Design criteria for well control
- ☒ 3. BOP equipment program
- ☒ 4. Casing program
- ☒ 5. Drilling prognosis
- ☒ 6. Cementing program
- ☒ 7. Mud program
- ☒ 8. Directional survey program (directional wells)
- ☒ 9. Plot of estimated pore pressures and formation fracture gradients
- ☒ 10. Hydrogen sulfide contingency plan
- ☒ 11. Any additional information required



Received
OCS District Office

AUG 06 1993

Minerals Management Service
Anchorage, Alaska

ARCO KUVLUM #2
BLOCK 672
FINAL WELL POSITION

SUBMIT: Original,
two copies, and one
public information
copy.

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

OMB APPROVAL NO. 1010-0044
EXPIRES: OCTOBER 31, 1994

| APPLICATION FOR PERMIT TO DRILL | | | | | | INITIAL DRILLING OF WELL ONLY |
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| 17. DISTANCE IN FEET FROM NEAREST WELL <i>18922'</i> | | 18. DISTANCE IN MILES FROM PROPOSED (3) <i>Kuvlum #1</i> | | 19. APPROXIMATE START DATE (6) YYMMDD <i>LOCATION TO NEAREST SHORELINE 12.5 93 08 01</i> | | |
| 20. PROPOSED CASING AND CEMENTING PROGRAM (Attach complete well prognosis) | | | | | | |
| HOLE SIZE (4) | CASING SIZE (4), LB/FT (5) & GRADE | SETTING DEPTH | | QUANTITY OF CEMENT (Cu. Ft./type) | | |
| | | MD (5) | TVD (5) | | | |
| <i>N/A</i> | <i>30" 310# X-52</i> | <i>300'</i> | <i>300'</i> | <i>30" to be drilled in, no cement required</i> | | |
| <i>26"</i> | <i>20" 133# X-56</i> | <i>1000'</i> | <i>1000'</i> | <i>1650 ft3 Arctic Set I-Permafrost Cement</i> | | |
| <i>17-1/2"</i> | <i>13-3/8" 68# L-80</i> | <i>4000'</i> | <i>4000'</i> | <i>1730 ft3 Lead, 575 ft3 Class G Tail Cement</i> | | |
| <i>12-1/4"</i> | <i>9-5/8" 53.5# L-80</i> | <i>10000'</i> | <i>10000'</i> | <i>630 ft3 Lead, 1250 ft3 Class G Tail Cement</i> | | |
| <i>8-1/2"</i> | <i>7" 35# L-80</i> | <i>12000'</i> | <i>12000'</i> | <i>Contingency Liner, 500 ft3 Class G Cement</i> | | |
| | | | | <i>Actual cement volumes will be based on caliper</i> | | |
| | | | | <i>logs, hole conditions & hydrocarbon intervals encountered</i> | | |
| CASING DESIGN SAFETY FACTORS | | | | | | |
| CASING SIZE | COLLAPSE | TENSION | BURST | ASSUMPTIONS USED TO ARRIVE AT THESE VALUES: (Attach a separate sheet, if necessary, showing all assumptions and calculations) | | |
| <i>30"</i> | <i>(See text in APD package attached)</i> | | | <i>Structural Casing</i> | | |
| <i>20"</i> | | | | <i>Conductor Casing</i> | | |
| <i>13-3/8"</i> | | | | <i>Surface Casing</i> | | |
| <i>9-5/8"</i> | | | | <i>Intermediate/Production Casing</i> | | |
| <i>7"</i> | | | | <i>Contingency Liner</i> | | |

PROPRIETARY

APPLICATION FOR PERMIT TO DRILL

FORM MMS-331C

PAGE 2

21. COMMENTS

The Kuvlum #2 well (OCS-Y-0865-1, Block 672) is a follow-up delineation well to the Kuvlum #1 well drilled in 1992.

The Kuvlum #2 is being permitted to a depth of 12,000', however the planned depth is 10,000'.

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T.W. McKay

PHONE NUMBER (10)

(907) 265-6890

EXTENSION NUMBER (4)

AUTHORIZING NAME (First, MI, Last)

M.B. Winfree

TITLE

New Ventures Area Drilling Engineer

AUTHORIZING SIGNATURE

DATE YYMMDD (6)

93-02-05

API WELL NUMBER (10)

(This space is for MMS use)

STATE

COUNTY

SEQUENCE

(2)

(3)

(5)

55-171-00009

ASSIGNED BY

BRIAN F. SCHOFF

DATE

5/7/93

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES

ARE ATTACHED



NONE



APPROVED BY

TITLE

DIST. SUPERVISOR

DATE

5/12/93

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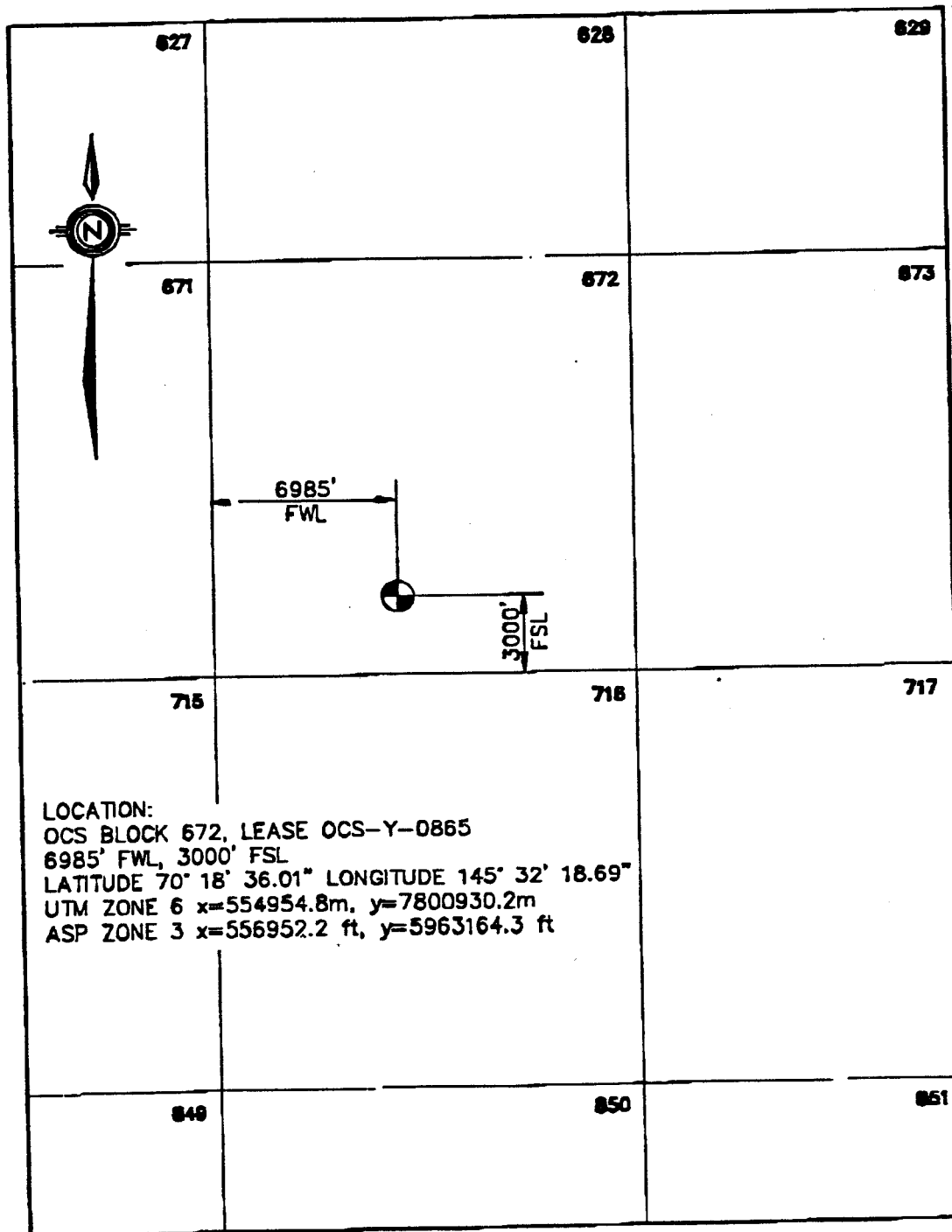
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Minerals Management Service
Anchorage, Alaska

ARCO KUVLUM #2
BLOCK 672
FINAL WELL POSITION