

Public Information

**SUNDRY NOTICES AND REPORTS ON WELLS**

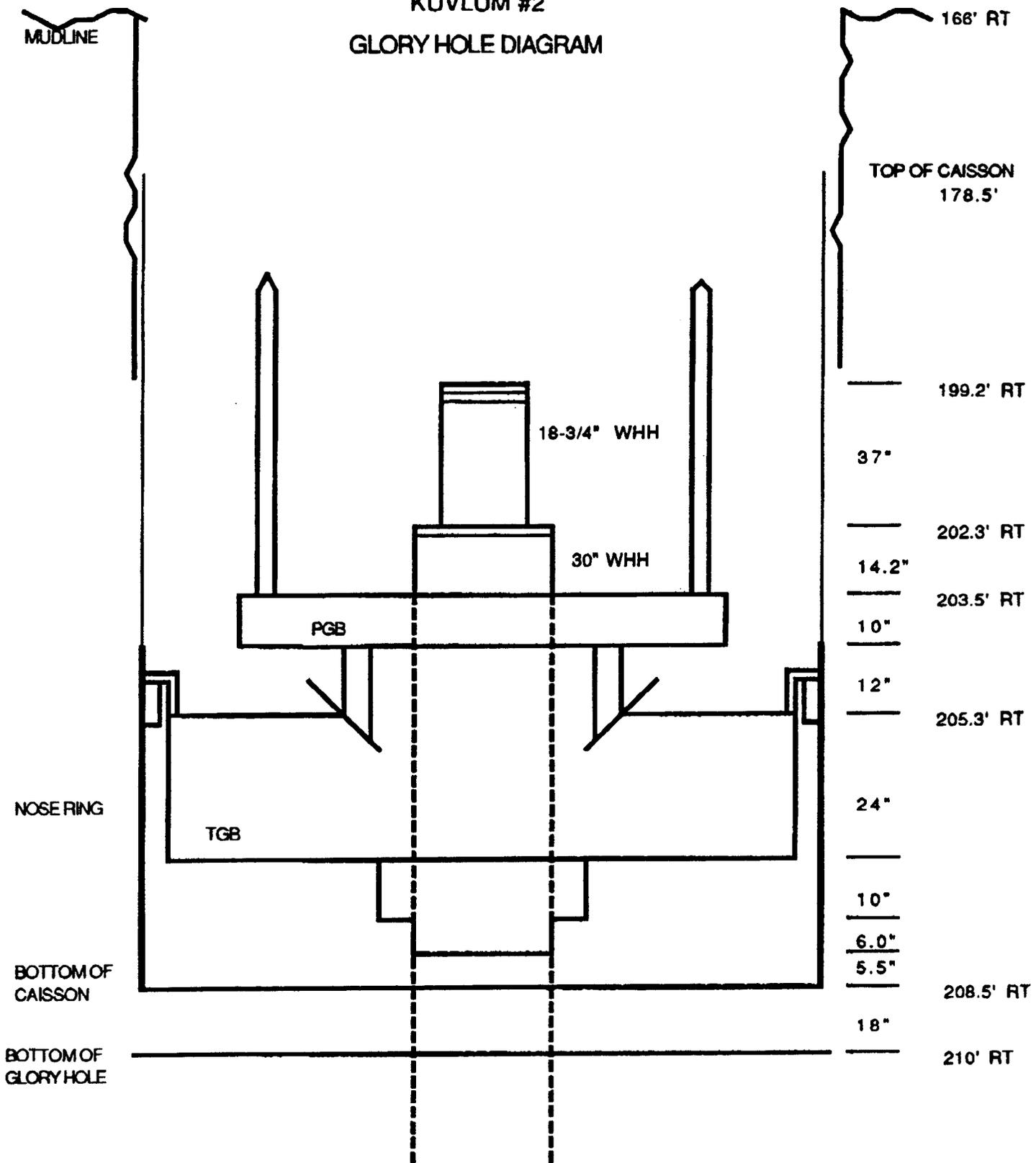
1. FIELD NAME Wildcat		2. MMS LEASE, UNIT OR COMM. NO. (6) Y 0865 0		3. MMS OPERATOR NUMBER (5) 0635																									
4. OPERATOR WELL NUMBER (6) 2		5. API NUMBER (10) or (12) STATE (2) COUNTY (3) WELL CODE (5) 55 171 00009		SIDE TRACK(2) NA	COMPLETION CODE (3) E																								
6. TYPE WELL (1) E		7. CORRECTED ELEVATION (5) NA		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																													
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OCS DISTRICT OFFICE

AUG 18 1993

MINERALS MANAGEMENT SERVICE  
ANCHORAGE, ALASKA

# KUVLUM #2 GLORY HOLE DIAGRAM



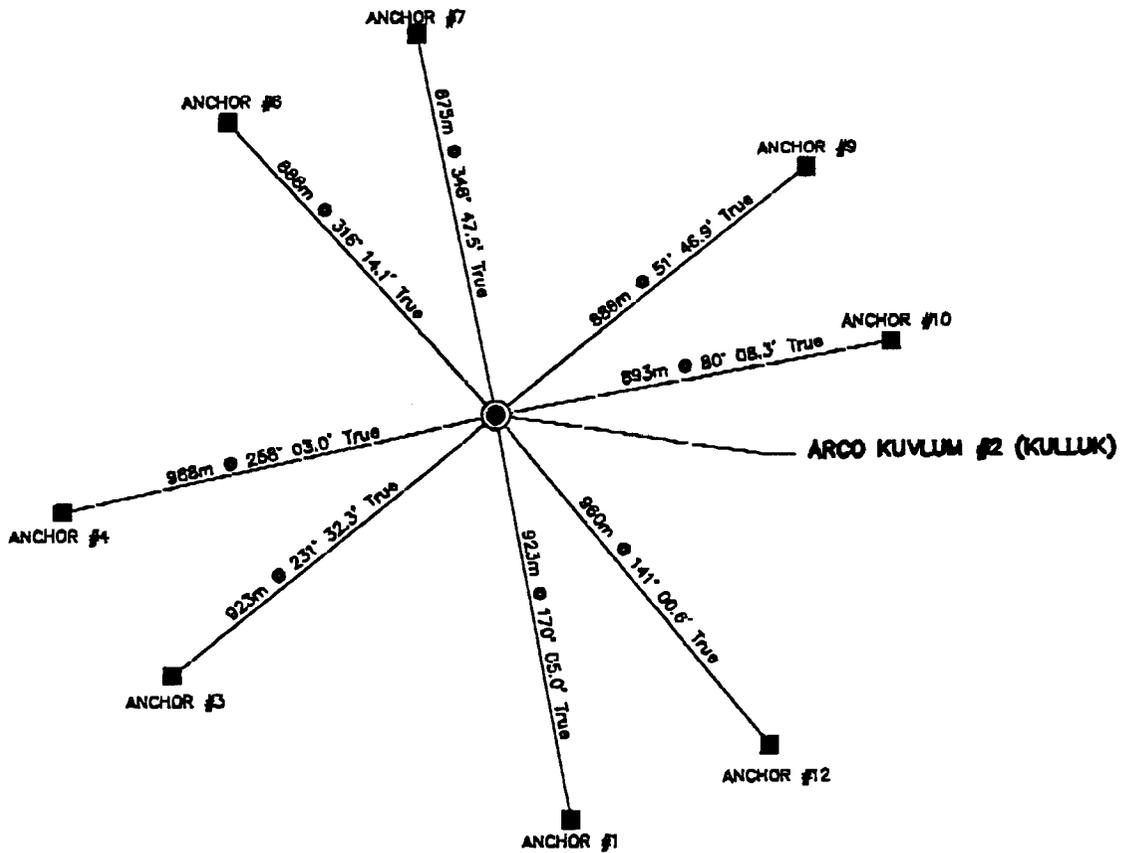
BOP HEIGHT: 22.8' FROM WELLHEAD TO TOP OF LMRP CONNECTOR (64.2' ABOVE BOTTOM OF GLORY HOLE)  
 TOP OF LMRP CONNECTOR WILL BE AT 175.8' RT OR 9.8' BELOW THE MUJDLINE

AUG 06 1993

JULY 27, 1993

Minerals Management Service  
Anchorage, Alaska

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

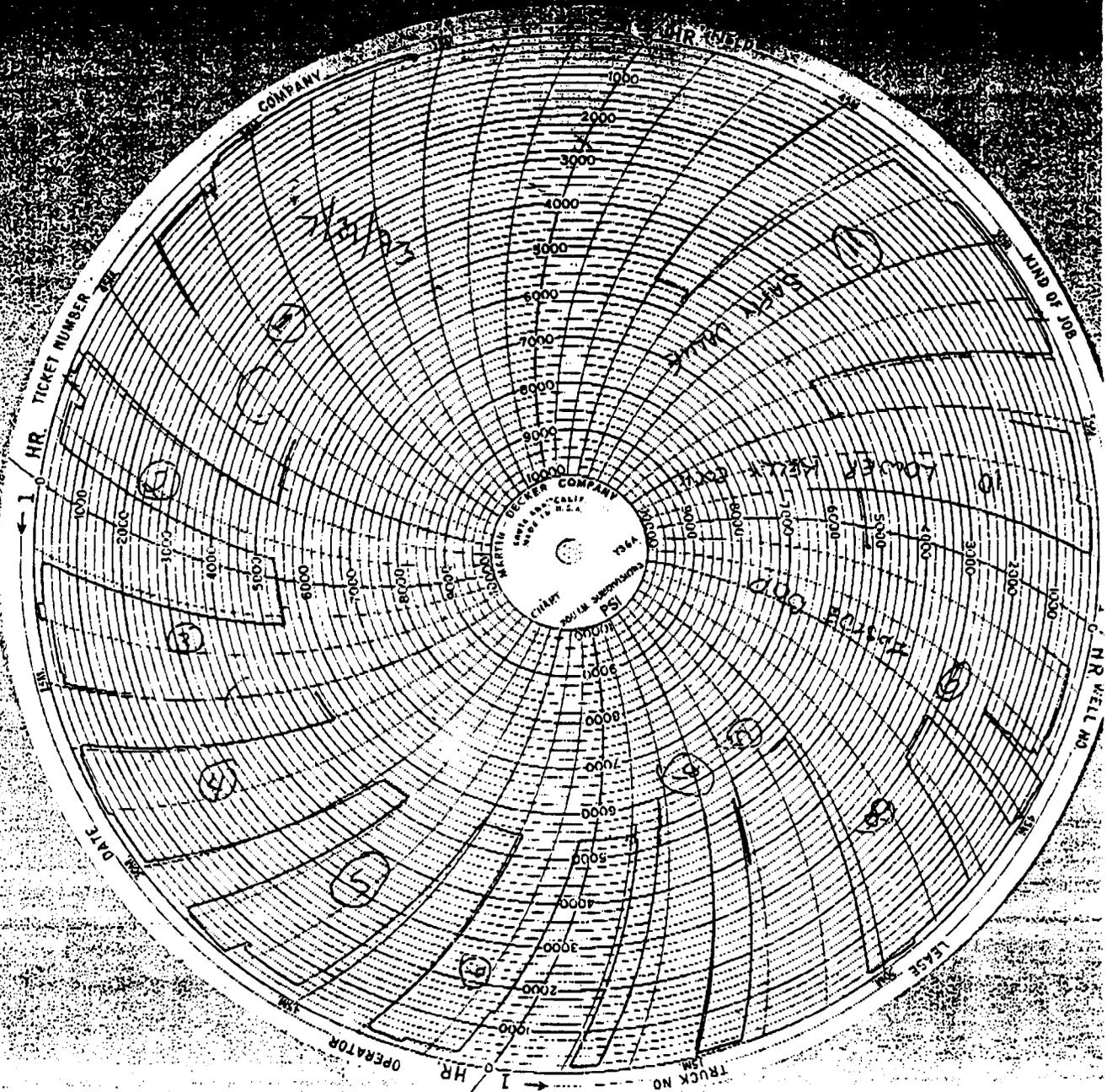


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 OCS District Office

AUG 06 1993

Minerals Management Service  
 Anchorage, Alaska

**MOORING DIAGRAM**  
 for the  
**C.D.U. KULLUK**



CHOKES MANIFOLD

OCS District Office

APR 04 1993

Minerals Management Service  
Anchorage, Alaska



## 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.

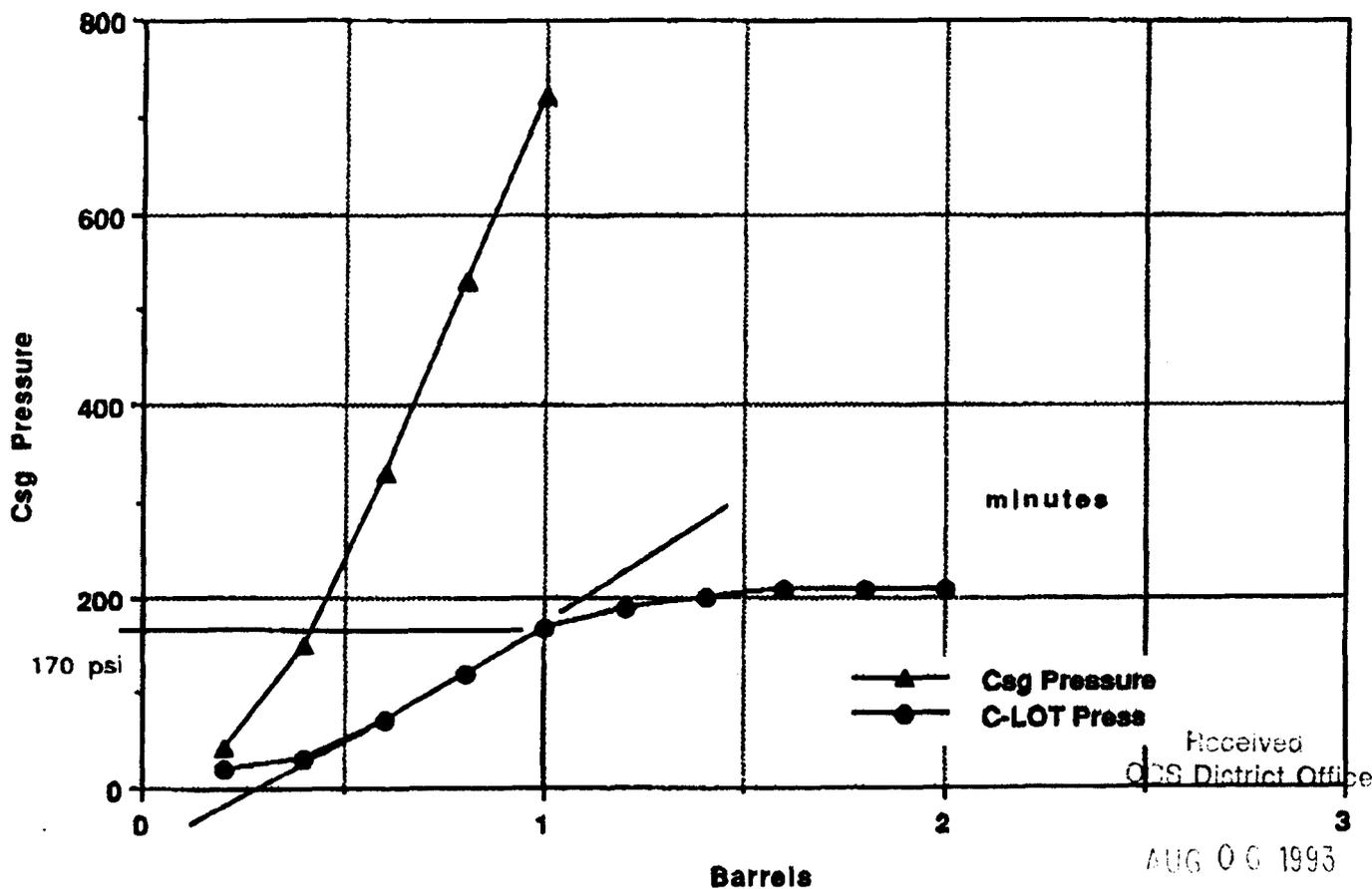
Leak-off EMW =  $((0.052 \times \text{TVD} \times \text{MW}) + (\text{Surface press})) / (\text{TVD} \times .052) = 700 / (1040 \times .052)$

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



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OCS District Office

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Minerals Management Service  
Anchorage, Alaska





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

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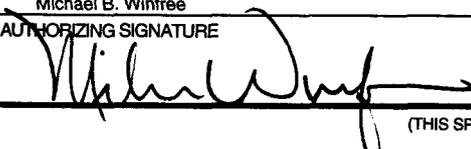
AUG 06 1993

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) 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

APPROVED BY: \_\_\_\_\_  
 ACCEPTED BY: James B. Regg TITLE Acting District Supervisor DATE 8/6/93

**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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Public Information

**SUNDRY NOTICES AND REPORTS ON WELLS**

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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																									
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Received  
OCS District Office  
AUG 06 1993  
Minerals Management Service  
Anchorage, Alaska

### FORMATION PRESSURE TEST CALCULATION TEST

WELL: KUVLUM # 2

DATE/TIME: 8/14/93, 12:00 HRS

SUPERVISOR: BRUCE CAMPBELL

LOG: CANMAR KULLUK

MUD WEIGHT = 9.8 ppg = MW

TRUE VERTICAL DEPTH = 2978' FEET = TVD (STB)

HYDROSTATIC HEAD1 (HH 1) = 0.052 x TVD x MW = 2027 psi

To 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 x TVD x 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*

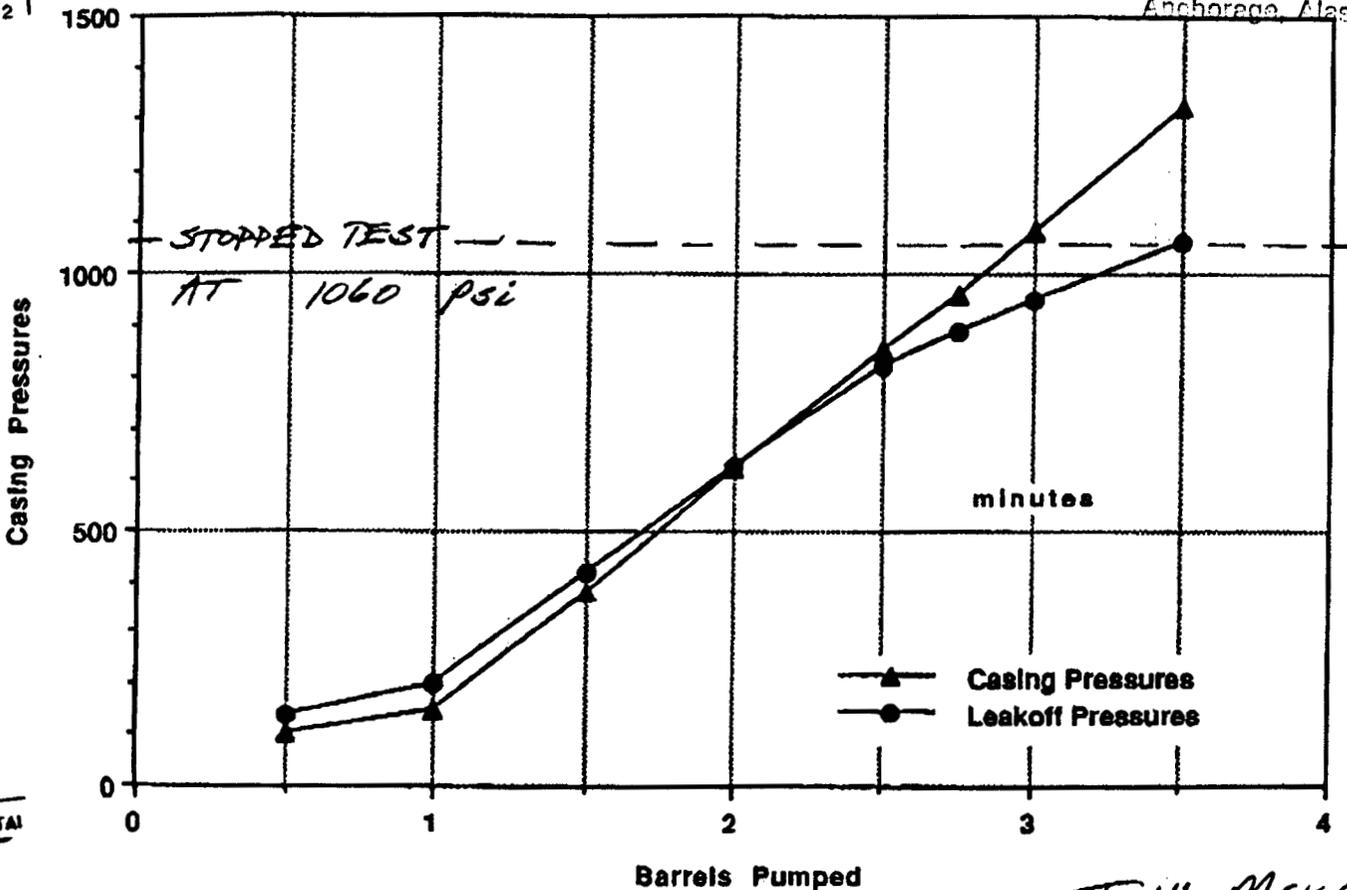
Held \_\_\_\_\_ psi for \_\_\_\_\_ minutes. Leak off? yes no

OCS District Office

AUG 16 1993

### Pressure Profiles

Minerals Management Service  
Anchorage, Alaska



volume: 1 stroke = \_\_\_\_\_ bbls

*T.W. MCKAY*

12

TOTAL

CASING / TUBING / LINER DETAIL

ARCO ALASKA INC.

13-3/8" SURFACE CASING DETAIL

WELL: Kuvlum #2

DATE: 8/9/93

PAGE: 1 OF 1

FINAL

# ITEMS	COMPLETE DISCRIPTION OF EQUIPMENT RUN	LENGTH	DEPTH (TOP)
1	5" S-135 DP	31.32	57.29
	HOWCO CEMENT HEAD	4.30	25.97
	5" S-135 DP (ABOVE ROTARY TABLE)	21.67	21.67
	5" S-135 DP (BELOW ROTARY TABLE)	40.16	
1	5" S-135 DP PUP	9.69	40.16
1	XO	2.59	49.85
	2 X 9" PONY DC'S	17.85	52.44
2	2 X 9" DC'S	61.89	70.29
	X-OVER	2.67	132.18
2	5" S-135 DP	62.99	134.85
	X-OVER	1.08	197.84
1	DRIL-QUIP RUNNING TOOL	4.35	198.92
1	DRIL-QUIP SS CSG HANGER	11.80	203.27
17	13-3/8", 68#, L-80, BT CSG	690.73	215.07
1	13-3/8" DRIL-QUIP BREAK-OUT JOINT	28.52	905.80
73	13-3/8", 68#, L-80, BT CSG	2962.95	934.32
1	FLOAT COLLAR	1.43	3,897.27
2	13-3/8", 68#, L-80, BT CSG	77.32	3,898.70
1	FLOAT SHOE	1.73	3,976.02
	BOTTOM OF FLOAT SHOE:		3,977.75
	DRILLED 12-1/4" PILOT HOLE HOLE TO 4,005'		OGS District Office
	LEAVES 27.25' RATHOLE.		
	OPENED HOLE TO 17-1/2"		1993
	NO CENTRALIZERS TO AVOID DAMAGING SS WELLHEAD		Minerals Management Service
	RE-STRAPPED CASING WHILE RUNNING,		Anchorage, Alaska
	FINAL TALLY APPROX 2 FEET SHORTER THAN 1ST TALLY.		

Engineer: McKay

Supervisor : Morrison, Straughan, Danielsen

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

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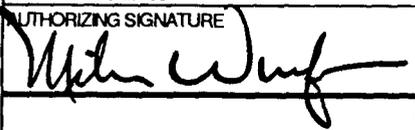
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Minerals Management Service  
Anchorage, Alaska

SUBSURFACE 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

APPROVED BY:  TITLE: DISTRICT SUPERVISOR  
 ACCEPTED BY: \_\_\_\_\_ TITLE: \_\_\_\_\_  
 DATE (6) YYMMDD: AUG 17 93

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AUG 16 1993

OMB APPROVAL NO. 1010-0045  
EXPIRES: OCTOBER 31, 1991  
SUBMIT: Original,  
two copies, and one public  
information copy.

**SUNDRY NOTICES AND REPORTS ON WELLS** Minerals Management Service  
Anchorage, Alaska

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<ol style="list-style-type: none"> <li>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% CaCl2 @ 13.5 ppg, and 500 sx Class G w/2% CaCl2 @ 15.8 ppg. Subsea launched wiper plugs were utilized. 13-3/8" casing detail attached.</li> <li>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.</li> <li>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.</li> <li>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.</li> </ol>																	

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

Approved  
OCS District Office

20 10 1993

Minerals Management Service  
Anchorage, Alaska

SUBSURFACE SAFETY VALVE: SUBSURFACE CONTROLLED  SURFACE CONTROLLED  SET AT DEPTH OF \_\_\_\_\_

MANUFACTURER: \_\_\_\_\_ MODEL NO. \_\_\_\_\_ SERIAL NO. \_\_\_\_\_

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AUTHORIZING NAME (First, MI, Last) Mike B. Winfree	TITLE New Ventures Area Drilling Engineer	
AUTHORIZING SIGNATURE <i>Mike Winfree</i>	DATE YYMMDD (6) 93 08 13	

(THIS SPACE IS FOR FEDERAL OFFICE USE)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES: ARE ATTACHED  NONE

APPROVED BY: *B. J. [Signature]* DATE (6) YYMMDD  
 ACCEPTED BY: *B. J. [Signature]* TITLE: *DISTRICT SUPERVISOR* *AUG 17, 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).

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 631, Minerals Management Service, 12203 Sunrise Valley Drive, Reston, VA 22091; and Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, DC 20503.

AUG 16 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) NA	6. TYPE WELL (1) E	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 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	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:		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"/>	Sidetrack <input type="checkbox"/>	Repair well <input type="checkbox"/>	Perforate <input type="checkbox"/>	
Change plans <input type="checkbox"/>	Reenter to complete <input type="checkbox"/> *		Deepen <input type="checkbox"/>	Plug back <input type="checkbox"/>	
Request approval <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.)					

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) 9/1/93  
YYMMDD

APPROVED BY: James B. Regg TITLE Acting District Supervisor  
 ACCEPTED BY: \_\_\_\_\_

**PAPERWORK REDUCTION ACT STATEMENT**

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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		SIDE TRACK(2) NA	COMPLETION CODE (3) E
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:					
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"/>	
Data correction <input type="checkbox"/>		Sidetrack <input type="checkbox"/>		Plug back <input type="checkbox"/>	
Change plans <input type="checkbox"/>		Reenter to complete <input type="checkbox"/> *		Multiple complete <input type="checkbox"/> *	
Request approval <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.					
<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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OCS DISTRICT OFFICE

AUG 18 1993

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. \_\_\_\_\_

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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)

*Mike Winfree*

93 08 13

(THIS SPACE IS FOR FEDERAL OFFICE USE)

CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES: ARE ATTACHED  NONE

DATE (6) 9/1/93  
YYMMDD

APPROVED BY: James B. Regg TITLE Acting District Supervisor  
 ACCEPTED BY: \_\_\_\_\_

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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) NA	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																									
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15. OPERATOR LEASE, UNIT OR COMMUNITIZATION NAME Kuvlum				16. RIG/PLATFORM NAME BeauDriI - 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", 66#, 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 style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%;">Fracture/acidize</td><td style="width:5%;"><input type="checkbox"/></td> <td style="width:25%;">Artificial Lift</td><td style="width:5%;"><input type="checkbox"/></td> <td style="width:25%;">Other</td><td style="width:5%;"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Pull or alter casing</td><td><input type="checkbox"/></td> <td>Repair well</td><td><input type="checkbox"/></td> <td>Perforate</td><td><input type="checkbox"/></td> </tr> <tr> <td>Sidetrack</td><td><input type="checkbox"/></td> <td>Deepen</td><td><input type="checkbox"/></td> <td>Plug back</td><td><input type="checkbox"/></td> </tr> <tr> <td>Reenter to complete</td><td><input type="checkbox"/></td> <td>Multiple complete</td><td><input type="checkbox"/></td> <td>Recomplete</td><td><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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<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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AUG 18 1993

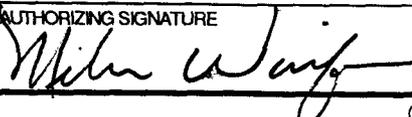
MINERALS MANAGEMENT SERVICE  
ANCHORAGE, ALASKA

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. \_\_\_\_\_

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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	

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CONDITIONS OF APPROVAL FOR SPECIAL CIRCUMSTANCES:

ARE ATTACHED NONE DATE (6)  
YYMMDD

9/1/93

 APPROVED BY:

James B. Regg

TITLE

Acting District Supervisor

 ACCEPTED BY:**PAPERWORK REDUCTION ACT STATEMENT**

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FROM IKAUUK JULY 17TH/93

CHART 16044

Received  
OCS District Office

AUG 00 1993

Minerals Management Service  
Anchorage, Alaska

### WET STORAGE ANCHOR SEQUENCE

