



United States Department of the interior

MINERALS MANAGEMENT SERVICE

ALASKA OUTER CONTINENTAL SHELF REGION
949 E. 36TH AVENUE, ROOM 110 ANCHORAGE, AK 99508-4302



SEP 22 1987

COPY

Shell Western E&P, Inc.
Attention: Mr. M. L. Woodson
601 West Fifth Avenue, Suite 810
Anchorage, Alaska 99501

Gentlemen:

In response to your Application for Determination of Producibility letter of January 7, 1987, for Well OCS-Y 0871 No. 1, "Corona," Beaufort Sea, Alaska, and in accordance with Alaska OCS Order No. 4, Well OCS-Y 0871 No. 1 is determined not capable of producing hydrocarbons in paying quantities.

Sincerely,

Orig. Sgd.) Brian Schoof

Brian F. Schoof
Supervisor, District Office
Field Operations

cc: Supervisor, ROS

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

o. LEASE NO. 000

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other wildcat

2. NAME OF OPERATOR
Shell Western E&P Inc.

3. ADDRESS OF OPERATOR (Where form is completed)
601 West Fifth Avenue, Suite 810, Anchorage, Alaska 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
AT SURFACE: Lat. 70°18'52.67"N Long. 144°45'32.90"W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

6. AREA & BLOCK
NR 6-4 Block 678

7. WELL NO.
OCS-Y 0871 #1

8. UNIT AGREEMENT
N/A

9. FIELD
Wildcat

10. EXPLORATION
DEVELOPMENT

11. ADJACENT STATE
Alaska

12. API NO.
55-171-00002

13. ELEVATIONS
RKB 39' DF

14. WATER DEPTH
116'

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO:

ACIDIZE	<input type="checkbox"/>	SUBSEQUENT REPORT OF:	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>		<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>		<input type="checkbox"/>

(Other) Subsequent report of operations

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

RECEIVED

Anchorage, Alaska

OCT 07 1986

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

No information is available

REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

RECEIVED
OCS DISTRICT OFFICE

OCT 03 1986

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

PUBLIC FILE
COPY

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct

SIGNED M. Wood TITLE Senior Drilling Superintendent DATE 10-2-86

(This space for Federal or State office use)
APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE OCT 6 1986

CONDITIONS OF APPROVAL, IF ANY

PUBLIC INFORMATION COPY

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

5. LEASE NO. OCS-Y 0871

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

6. AREA & BLOCK NR 6-4 Block 678

7. WELL NO. OCS-Y 0871 #1

8. UNIT AGREEMENT N/A

9. FIELD Wildcat

10. EXPLORATION DEVELOPMENT

11. ADJACENT STATE Alaska

12. API NO. 55-171-00002

13. ELEVATIONS RKB 39' DF

14. WATER DEPTH 116'

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2. NAME OF OPERATOR Shell Western E&P Inc.

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PERMANENT ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>		<input type="checkbox"/>

(Other) Subsequent report of operations

RECEIVED
Anchorage, Alaska
(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

OCT 07 1986

REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

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Please see the attachment for the justification for not doing any remedial work on the 20" x 13=3/8" annulus.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED M. Wood TITLE Senior Drilling Superintendent DATE 10-2-86

(This space for Federal or State office use)
APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE OCT 6 1986

CONDITIONS OF APPROVAL, IF ANY:

PRIVATE AND CONFIDENTIAL

On August 14, 1986, R. L. Cook, Shell Western E&P Inc. (SWEPI) and the Minerals Management Service (MMS) representatives, B. Schoof and N. Masri, discussed the justification for the request to leave to 20" by 13-3/8" casing annulus as is.

As is shown in the record, no returns were obtained while cementing the 13-3/8" casing job. Pressure charts from the job showed a constant pressure increase as the cement was displaced (indicating a continual rise in the cement column). Calculations of the pressures from the cement job indicated that the top of cement should have been just below the shoe of the 20" casing, if not in the shoe. A sonic log was run inside the 13-3/8" casing in an attempt to locate the top of cement. Due to processing problems on the rig, no definitive cement top could be picked (the estimated top is 1200' KB). Due to the short season, high rig cost, and the impracticality of doing remedial work at any time, the MMS was approached at the above mentioned time to discuss the merits of obtaining a waiver on the isolation of casing annuli with "cement" as is required by the regulations.

It was pointed out that there were two ways of isolating this annulus with cement:

- 1) By attempting to remove the annular pack-off in the subsea wellhead and then attempting a squeeze below the BOP stack.
- or
- 2) Perforate the 20" by 13-3/8" annulus and squeeze.

Method #1 is objectionable because it removes a 10,000 psi annular seal which was tested to 3,000 psi with a high probability that this packer could never be replaced. Discussion with the manufacturer indicated that their success rate at pulling these annular pack-offs was only 50%. The other 50% of the time the lower half of the packer is left in the hole, prohibiting either a squeeze job or replacement of the packer. This, of course, if done prior to finishing with the well, could result in the loss of mechanical integrity of the well and result in a forced abandonment of the well. After the well is completed, a second packer on the 13-3/8" by 9-5/8" annulus (which was tested on several occasions to 5,000 psi) would be in place to further isolate the annulus of concern. Attempting to remove both of these packers at the end of the well so that a top squeeze job could be attempted would only result in a 1 in 4 chance of success in retrieving the packers. When the further problems of a squeeze of this nature are considered, it would seem foolish to remove the two proven means of isolation in order to attempt to follow the strict letter of the regulations.

Concerns about possible corrosion should look at three factors:

- 1) the large portion of pack-off made of rubber and the corrosion resistant alloy of which the rest of the pack-off is made

- 2) the isolation of the 20" by 13-3/8" pack-off from the surface, and thus any oxygen, eliminates corrosion concerns
- 3) the ice cover of 9 months in the Arctic results in a low oxygen content in the water, along with the water depth, and corrosion inhibited mud to be spotted at the upper portion of the hole will result in excellent preservation of subsea wellhead goods.

For the above reasons, an attempt to isolate the annulus of concern (at any time) did not seem prudent.

Method #2 (Perforate the 20" by 13-3/8" annulus and squeeze.) also did not seem prudent because, prior to running 9-5/8" casing, this action could conceivably result in so many mechanical and potential well control problems, that this option was never seriously considered. The many potential problems with this scenario are felt to be so numerous and so obvious that it is felt no further discussion is required.

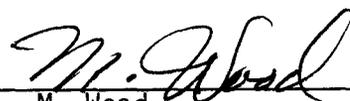
At completion of the well, the concern is the inability to judge the results of a squeeze job and the high probability that perforating the casing would only result in the creation of a path from which annular fluids could migrate to surface.

If the 9-5/8" and 13-3/8" casing strings were perforated at the shoe of the 20" casing, without pulling the annular pack-offs, the cement would most likely squeeze off into the weakest zone below the shoe. So best expected case would be having cement from just below the 20" shoe to go who knows where. Since we could only test the cement job through the perforations, all we would really be testing would be whether our perforations had been squeezed off and not whether our annulus was isolated. When later re-processing of sonic information showing that the top of cement was within a hundred foot of the 20" shoe is considered, the potential problems created by perforating these two casing strings outweigh the potential benefit of isolating with cement the 100 foot of open hole below the 20" shoe. Seismic data indicates no bright spots in this area. MWD log evaluations indicate only water zones in the interval.

It was based on these arguments that a verbal approval was granted for a waiver on the cement isolation requirement.

The notice of temporary abandonment submitted by SWEPI documents the status in which the well will be left. If any further questions on this issue arise, please contact R. L. Cook or V. E. Unger at (907) 276-2545.

CONCUR



M. Wood

Sr. Drilling Superintendent

(Expires July 31, 1986)

UNITED STATES DEPARTMENT OF THE INTERIOR MINERALS MANAGEMENT SERVICE

b. LEASE NO.	OCS-Y 0871
6. AREA & BLOCK	NR 6-4 Block 678
7. WELL NO.	OCS-Y 0871 #1
8. UNIT AGREEMENT	N/A
9. FIELD	Wildcat
10. EXPLORATION <input checked="" type="checkbox"/> DEVELOPMENT <input type="checkbox"/>	
11. ADJACENT STATE	Alaska
12. API NO.	55-171-00002
13. ELEVATIONS RKB 39' DF	
14. WATER DEPTH	116'

SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED OCS DISTRICT OFFICE

MINERALS MANAGEMENT SERVICE ANCHORAGE, ALASKA

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other wildcat

2. NAME OF OPERATOR
Shell Western E&P Inc

3. ADDRESS OF OPERATOR (Where form is completed)
601 West Fifth Ave., Suite 8 10, Anchorage, Alaska 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
AT SURFACE: Lat. 70°18'52.67"N Long. 144°45'32.90"W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>	<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>	<input checked="" type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>	<input type="checkbox"/>

(Other) _____

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

No information available.

surface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

I hereby certify that the foregoing is true and correct
ED [Signature] TITLE Senior Drilling Superintendent DATE 10-1-86

(This space for Federal or State office use)
ROVED [Signature] TITLE DISTRICT SUPERVISOR DATE JAN 14 1988
DITIONS OF APPROVAL, IF ANY:

PUBLIC INFORMATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUBMIT IN DUPLICATE*

LEASE NO.
JCS-Y 0871

6. AREA & BLOCK
NR 6-4 Block 678

7. WELL NO.
OCS-Y 0871 #1

8. UNIT AGREEMENT NAME
N/A

9. FIELD
Wildcat

10. EXPLORATION
DEVELOPMENT

11. ADJACENT STATE
Alaska

12. API NO.
55-171-00002

WELL-COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL GAS WELL DRY Other _____
b. TYPE OF COMPLETION: NEW WELL WORK OVER DEEP-EN PLUG BACK DIFF. RESVR. Other Temporary Abandon

2. NAME OF OPERATOR
Shell Western E&P Inc.

3. ADDRESS OF OPERATOR
601 West Fifth Avenue, Suite 810, Anchorage, Alaska 99501

4. LOCATION OF WELL (Report location in accordance with instructions)*
At surface Lat. 70° 18' 52.67" N, Long. 144° 45' 32.90" W
At top prod. interval reported below
At total depth Lat. 70° 18' 52.67" N, Long. 144° 45' 32.90" W

13. DATE SPUNDED 07-28-86 14. DATE T.D. REACHED 09-08-86 15. DATE COMPL. OR OPERATIONS FINALIZED 09-18-86 16. ELEVATION* RKB 38.41' DF 17. WATER DEPTH 116'

18. TOTAL DEPTH, MD & TVD 19. PLUG BACK, T.D., MD & TVD 20. IF MULTIPLE COMPL., HOW MANY*

21. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD) 22. WAS DIRECTIONAL SURVEY MADE

23. TYPE ELECTRIC AND OTHER LOGS RUN 24. WAS WELL CORED

25. CASING RECORD (Report all strings set in well)

CASING SIZE & GRADE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED

26. LINER RECORD 27. TUBING RECORD

SIZE & GRADE	TOP (MD)	BOTTOM (MD)	CU. FT. CEMENT	SCREEN (MD)	SIZE & GRADE	DEPTH SET (MD)	PACKER SET (MD)

28. PERFORATION RECORD (Interval, size and number) 29. ACID, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

30* PRODUCTION
DATE FIRST PRODUCTION PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) WELL STATUS (Producing or shut-in)

DATE OF TEST HOURS TESTED CHOKE SIZE PROD'N. FOR TEST PERIOD OIL—BBL. GAS—MCF. WATER—BBL. GAS-OIL RATIO

FLOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE OIL—BBL. GAS—MCF. WATER—BBL. OIL GRAVITY-API (CORR.)

31. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) OCS DISTRICT OFFICE TEST WITNESSED BY

32. LIST OF ATTACHMENTS NONE JAN 7 1987

33. MINERALS MANAGEMENT SERVICE ANCHORAGE, ALASKA Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

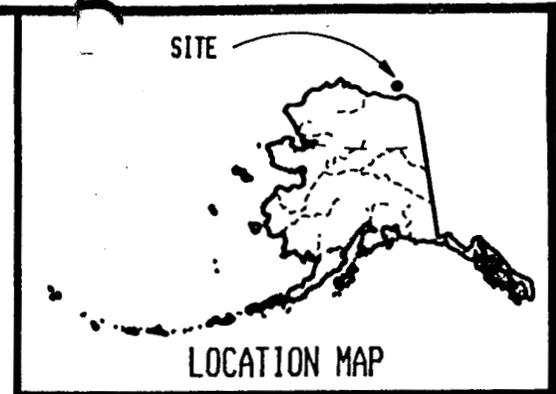
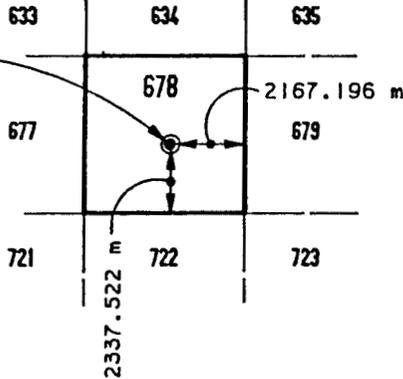
34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records
SIGNED [Signature] TITLE Senior Drilling Superintendent DATE 1-7-87

CORONA NO. 1

LAT. = 70° 18' 52.67" N
 LONG. = 144° 45' 32.90" W

U.T.M. ZONE 6.....
 Y=7,802,337.522 m
 X= 584,232.804 m

A.S.P. ZONE 3.....
 Y=5,966,203.29 ft
 X= 653,095.82 ft



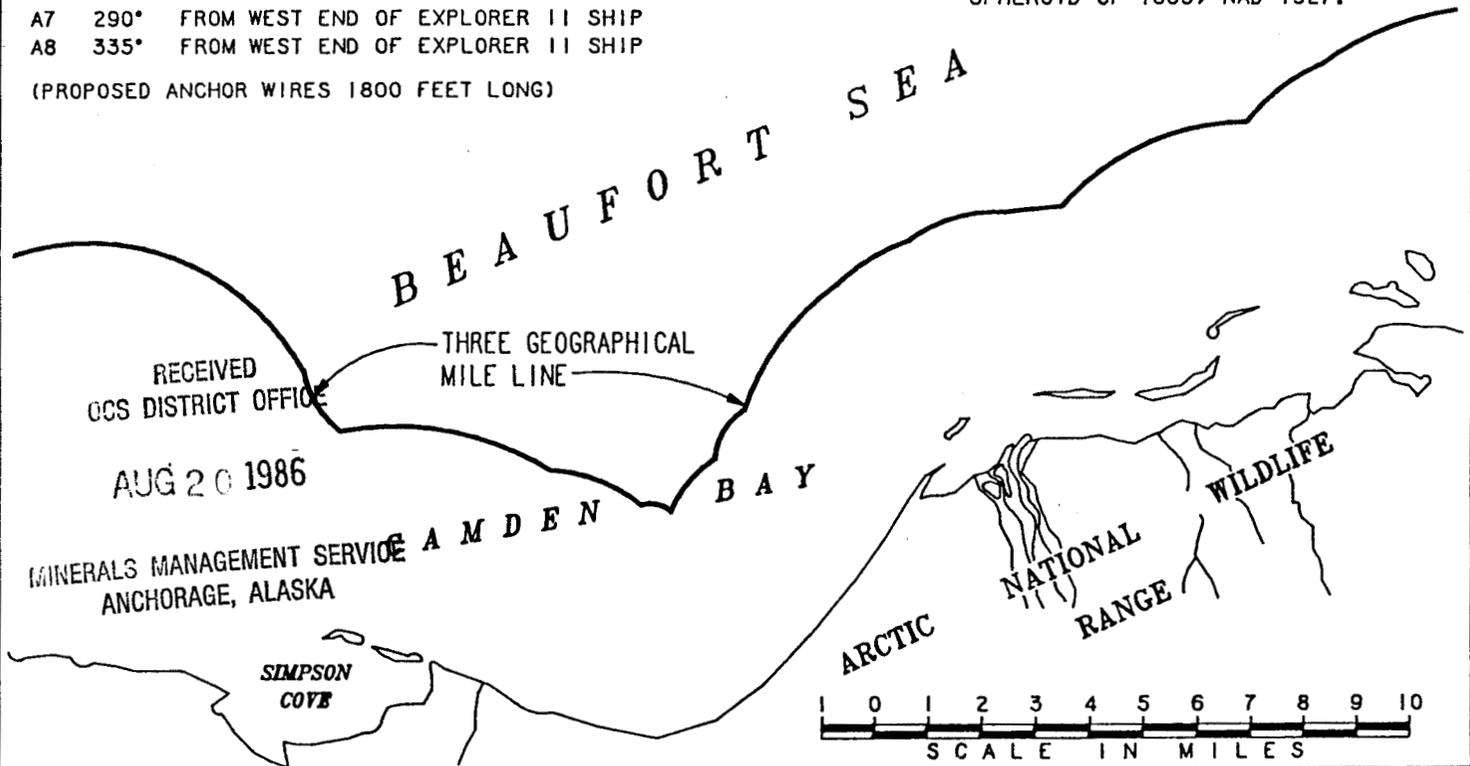
NOTES:

1. WELL LOCATED IN O.C.S. BLOCK 678, PROTRACTION DIAGRAM NR6-4 (11/10/83).
2. ALL DISTANCES AND AZIMUTHS ARE U.T.M. GRID.
3. SCALE FACTOR = 0.999687, AND CONVERGENCE = 2° 06' 36" (U.T.M. - AT WELL LOCATION)
4. COMPUTATIONS ARE BASED ON CLARKE SPHEROID OF 1866, NAD 1927.

ANCHOR LOCATIONS:

NO.	AZ.	COMMENTS
A1	5°	FROM EAST END OF EXPLORER II SHIP
A2	50°	FROM EAST END OF EXPLORER II SHIP
A3	110°	FROM EAST END OF EXPLORER II SHIP
A4	155°	FROM EAST END OF EXPLORER II SHIP
A5	185°	FROM WEST END OF EXPLORER II SHIP
A6	230°	FROM WEST END OF EXPLORER II SHIP
A7	290°	FROM WEST END OF EXPLORER II SHIP
A8	335°	FROM WEST END OF EXPLORER II SHIP

(PROPOSED ANCHOR WIRES 1800 FEET LONG)



SURVEYOR'S CERTIFICATE

I hereby certify that I am properly registered and licensed to practice land surveying in the State of Alaska and that all dimensions, computations and other details for this plat are correct.

DATE 8/15/86

F. Robert bell & ASSOC.
 ENGINEERS AND LAND SURVEYORS
 3335 ARCTIC BLVD
 ANCHORAGE, AK
 99503

CORONA No. 1
Well Location
OCS-Y 0871 No. 1

PREPARED FOR:
Shell Western E&P, Inc.

DATE: 8/15/86	DRAWN: MLS, JPD
JOB NO.: 86031	CHECKED: RLH

WELL HISTORY
OCS-Y 0871 #1
Corona #1

07/26/86	Move onto location
07/27-07/28/86	Clean out glory hole
07/29-07/30/86	Drill
07/31/86	Run 20" casing and cement
08/01/86	Wait on ice
08/02/86	Drill
08/03-08/04/86	Run 13-3/8" casing and cement
08/04/-08/10/86	Drill
08/11/86	Wait on ice
08/12-08/14/86	Reconnect and log
08/17-08/18/86	Run 9-5/8" casing and cement
08/19-08/21/86	Drill
08/22-08/30/86	Wait on ice
08/31-09/01/86	Reconnect and drill
09/01-09/02/86	Wait on ice
09/02-09/08/86	Reconnect and drill
09/08-09/13/86	Circulate and condition mud
09/13/86	Log
09/14/86	Circulate and condition mud
09/15-09/17/86	Log
09/17-09/18/86	Plug and abandon

RECEIVED
OCS DISTRICT OFFICE

JAN 7 1987

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

RELEASED TO PUBLIC FILE

DATE OCT 16 1988

WORKSHEET FOR CORONA PROSPECT

OSC-Y 871#1

Temporary Abandonment

PRIVATE AND CONFIDENTIAL

Set EZ-SV cement retainer @ 7840'.

Performed leak-off test - Results: leak-off @ 16.8 ppg.

Pumped cement @ 7835'.

Cement:

<u>Type</u>	<u>Amount</u>	<u>Density</u>	<u>Yield</u>
Class "G" w/0.6% HR-8 & 1.25% CFR-2	285 SX	17.0 ppg	0.988

Estimated volume of cement: 282 C.F.

Estimated cement: 8043-7790'

Mud wt between plugs: 16.3 ppg

Pumped cement @ 430-230'.

Cement:

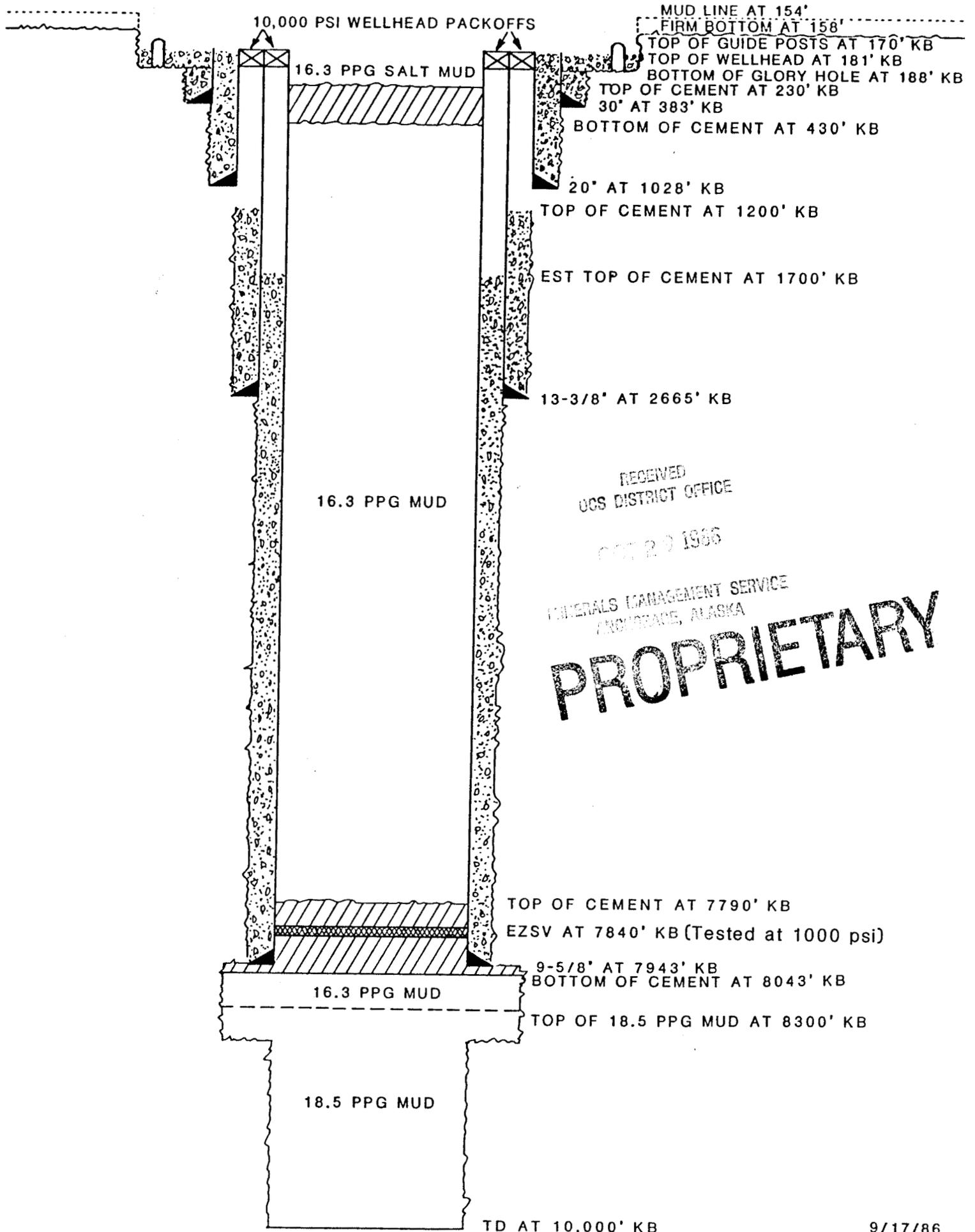
<u>Type</u>	<u>Amount</u>	<u>Density</u>	<u>Yield</u>
Permafrost w/5 lb gilsonite & 0.12 lb/sx sodium citrate	80 SX	15.3 ppg	1.0

Estimated volume of cement: 201 C.F.

Estimated cement: 230'

NOTE: From 230' to the top of wellhead (181' KB) is 16.3 ppg NaCl mud w/9.5 pH.

CORONA #1
ABANDONMENT PROCEDURE



UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUNDRY NOTICES AND REPORTS ON WELLS

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5. LEASE NO.	OCS Y-0871
6. AREA & BLOCK	NR 6-4 Block 678
7. WELL NO.	OCS Y-0871 #1
8. UNIT AGREEMENT	N/A
9. FIELD	Wildcat
10. EXPLORATION <input checked="" type="checkbox"/>	DEVELOPMENT <input type="checkbox"/>
11. ADJACENT STATE	Alaska
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13. ELEVATIONS	RKB 39 DF
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PERMANENT ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
TEMPORARY ABANDONMENT ✓	<input checked="" type="checkbox"/>		<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>		<input type="checkbox"/>
(Other)			

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)
Anchorage, Alaska

SEP 18 1986

REGIONAL SUPERVISOR

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Received
OCS District Office

SEP 16 1986

Minerals Management Service
Anchorage, Alaska

PUBLIC FILE
COPY

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED Vernon G. Unger TITLE FAO Division Operations Manager DATE 9/16/86

(This space for Federal or State office use)
APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE SEP 17 1986

CONDITIONS OF APPROVAL, IF ANY:

PUBLIC INFORMATION

O 871, #1

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

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ARTIFICIAL LIFT	<input type="checkbox"/>	<input type="checkbox"/>

(Other) _____

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See attached worksheets for the details of the abandonment plan.

LEASE NO. OCS Y-0871
6. AREA & BLOCK NR 6-4 Block 678
7. WELL NO. OCS Y- 0871 #1
8. UNIT AGREEMENT NA
9. FIELD Wildcat
10. EXPLORATION <input checked="" type="checkbox"/> DEVELOPMENT <input type="checkbox"/>
11. ADJACENT STATE Alaska
12. API NO. 55-171-00002
13. ELEVATIONS RKB 39 DF
14. WATER DEPTH 116'

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

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Received
OCS District Office

SEP 16 1986

Minerals Management Service
Anchorage, Alaska

PROPRIETARY

RECEIVED
Anchorage, Alaska

SEP 18 1986

REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED Vernon J. Unger TITLE Division Operations Manager DATE 9/16/86

(This space for Federal or State office use)
APPROVED _____ TITLE DISTRICT SUPERVISOR DATE SEP 17 1986
CONDITIONS OF APPROVAL, IF ANY:

PRIVATE & CONFIDENTIAL

AREA FILE 6-B-2
871 #1

CORONA #1

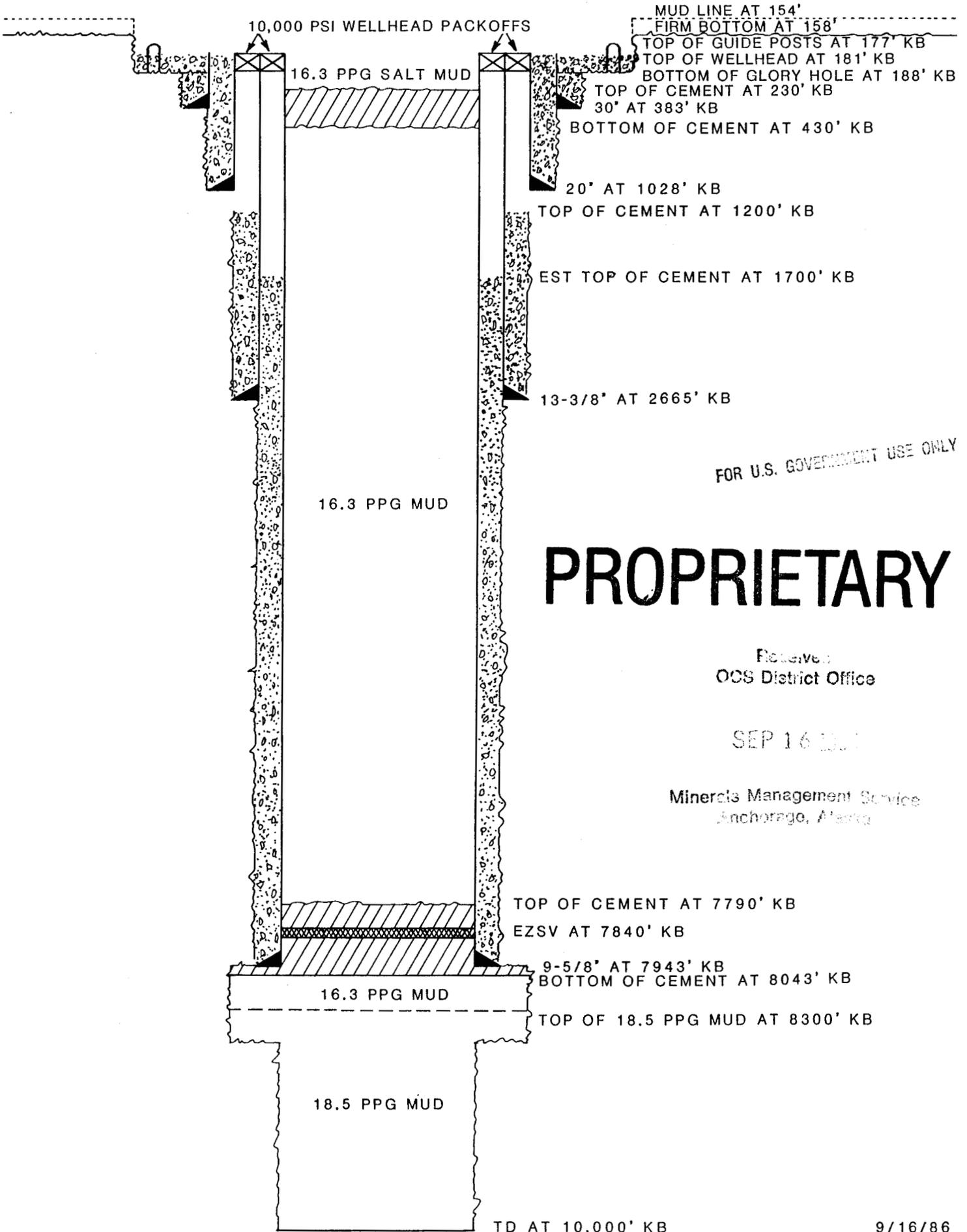
TEMPORARY
GENERAL OUTLINE OF ABANDONMENT PROCEDURE

1. Run in hole to 7840', circulate bottoms up to ensure well is dormant.
2. Set EZSV tool at 7840' KB.
3. Squeeze enough cement to fill interval from 7840' to 8043' KB.
set down 15,000# on cement retainer to verify that it is set.
4. Place 50' column of cement above EZSV (TOC = 7790' KB). *VEU 9/16/86*
5. Place 200' column of permafrost cement from 430' to 230' KB.
6. Displace 16.3 ppg freshwater mud above 230' *(with corrosion inhibitor)* with 16.3 ppg salt mud. *VEU 9/16/86*
OCS District Office
7. Pull BOP stack and guide posts.
8. Set a cover over the wellhead. *SEP 16 1986*

NOTE: Verbal approval was given from *Minerals Management Service* Brian Schoof to Lance Cook to use the 10,000 psi wellhead packoff as the seal in the 13 3/8" X 20" annulus. Logs indicate the top of cement from the 13 3/8" cement job is 1200' KB. For the 9 5/8" casing job, 1800 sx. of Class "G" cement was pumped, with full returns, through an average wellbore of 12 3/8". As a result, the estimated top of cement is 1700' KB.

NOTE: Circulating a 16.3 ppg mud (16.5 ppg ECD) results in a live well. Spotting an 18.5 ppg mud from TD to 8300' (16.7 ppg equivalent at TD) results in a dormant well. The gas feeder zone is in the bottom 50' of the wellbore. To prevent developing a live well situation, SWEPI et. al. proposes to leave the 18.5 ppg mud on bottom. Any barite settling will still result in a 16.7 ppg equivalent mud weight at TD and thus a dormant well. A 16.7 ppg leak off test prevents the mud weight from being raised. The heaviest cement capable of being pumped is 17.5 ppg thus trying to displace 18.5 ppg mud with a 17.5 ppg cement is not recommended. Also the chances of a gas channeled cement job in lieu of the conditions is quite high which could precipitate a well control problem. All zones with gas in place below the 9 5/8" casing shoe have been evaluated as impermeable based on wireline logs and side wall samples. Drilling conditions (using an 11.2 ppg mud weight) also indicate the gas bearing zones below the 9 5/8" casing shoe to just prior to TD have a very low flow potential.

CORONA #1
TEMPORARY ABANDONMENT PROCEDURE



FOR U.S. GOVERNMENT USE ONLY

PROPRIETARY

Received
OCS District Office

SEP 16 1986

Minerals Management Service
Anchorage, Alaska

UNITED STATES DEPARTMENT OF THE INTERIOR—GEOLOGICAL SURVEY
MONTHLY REPORT OF OPERATIONS—OUTER CONTINENTAL SHELF

Month October Year 1985

Lease No.: OS 2182 Yo 871

USGS Unit No.: N/A

Lease Area/Block: NR 6-4 678

Field Name: Wildcat

Company: Shell Western E&P

Address: 601 W. 5th Ave #810

Anchorage, AK99501

Signed: Brian Kvale

Refer to Outer Continental Shelf Regulations,
30 CFR Part 250.93, when preparing this form.

Lease Sales: (Include delivery in kind as sale)

Oil _____ Barrels Condensate _____ Barrels Gas _____ MCF

Fuel Gas _____ MCF Flare Gas _____ MCF Injected Gas _____ MCF

API Well No.					Well No.	Days Produced	Barrels of Oil	Barrels of Condensate	Gravity	Cu. Ft. of Gas-Well-Gas (In thousands)	Cu. Ft. of Casinghead Gas (In thousands)	Barrels of Water (If none, write 0)	Remarks (If drilling, depth; if shut down, cause; etc.)
ST	AREA	UAPI	S/T	CP									
		API# 55-171-00002			OCS Y-871 #1	0	-	-	-	-	-	0	See attached.

PUBLIC FILE COPY

RECEIVED
Anchorage, Alaska

DEC 06 1985

REGIONAL SUPERVISOR
RECEIVED OPERATION
OCS DISTRICT OFFICE
MINERALS MANAGEMENT SERVICE

NOV 22 1985

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

Lease Totals

0

The United States Criminal Code, 18 U.S.C. 1001, makes it a criminal offense to make a willfully false statement or representation to any Department or Agency of the United States as to any matter within its jurisdiction.

PUBLIC INFORMATION COPY

UNITED STATES DEPARTMENT OF THE INTERIOR—GEOLOGICAL SURVEY
MONTHLY REPORT OF OPERATIONS—OUTER CONTINENTAL SHELF

Form Approved
Budget Bureau No. 42-R 1236

Month September Year 1985

Lease No.: OS 2182 Y0871

USGS Unit No.: N/A

Lease Area/Block: NR 6-4 Bk678

Field Name: Wildcat

Company: Shell Western E&P I.

Address: 601 W. 5th Ave., #810
Anchorage, AK 99501

Signed: Brian Kehoe

Refer to Outer Continental Shelf Regulations,
30 CFR Part 250.93, when preparing this form.

Lease Sales: (Include delivery in kind as sale)

Oil _____ Barrels Condensate _____ Barrels Gas _____ MCF

Fuel Gas _____ MCF Flare Gas _____ MCF Injected Gas _____ MCF

API Well No.					Well No.	Days Produced	Barrels of Oil	Barrels of Condensate	Gravity	Cu. Ft. of Gas-Well-Gas (In thousands)	Cu. Ft. of Casinghead Gas (In thousands)	Barrels of Water (If none, write 0)	Remarks (If drilling, depth; if shut down, cause; etc.)
ST	AREA	UAPI	S/T	CP									
		API # 55- 171-00002			OCS Y- 871 #1	0	-	-	-	-	-	0	See attached

**PUBLIC FILE
COPY**

RECEIVED
OCS DISTRICT OFFICE
Anchorage, Alaska
NOV 22 1985
MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA
DEC 06 1985
REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

Lease Totals _____

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UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

LEASE NO.	OCS Y-871
6. AREA & BLOCK	NR 6-4 Block 678
7. WELL NO.	OCS Y-871 #1
8. UNIT AGREEMENT	N/A
9. FIELD	Wildcat
10. EXPLORATION <input checked="" type="checkbox"/> DEVELOPMENT <input type="checkbox"/>	
11. ADJACENT STATE	Alaska
12. API NO.	55-171-00002
13. ELEVATIONS	RKB 39' DF
14. WATER DEPTH	119'

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other Wildcat

2. NAME OF OPERATOR
Shell Western E & P Inc.

3. ADDRESS OF OPERATOR (Where form is completed)
601 West Fifth Avenue, Suite 810; Anchorage, AK

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.) 99501
AT SURFACE: x=584,246.081 y=7,802,334.601 UTM Zone 6
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>	<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>	<input type="checkbox"/>

(Other) Request approval for change of plans.

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

Please see attached note and operations worksheet for details.

RECEIVED
OCS DISTRICT OFFICE

RECEIVED
Anchorage, Alaska

AUG 30 1985

SEP 3 1985

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

REGIONAL SUPERVISOR
FIELD OFFICE
MINERALS MANAGEMENT SERVICE
Set @ _____ Ft.

Subsurface Safety Valve: Manu. and Type _____

17. I hereby certify that the foregoing is true and correct

SIGNED M. Schulradson TITLE Division Operation Manager DATE 8-30-85

(This space for Federal or State office use)
APPROVED Nell Fries TITLE DISTRICT SUPERVISOR DATE AUG 30 1985

CONDITIONS OF APPROVAL, IF ANY:

Private and Confidential

Please note that the following changes have occurred in several sections of our operations plan.

Shell Western E&P Inc. (SWEPI) is planning to decrease the amount of lost circulation material on the rig from 500 sacks to 200 sacks. We intend to have a contingent supply of this material in Deadhorse.

We are also planning to reduce the time spent on waiting on cement to the required minimums at each casing point. We intend to extend the waiting time as needed, based on the compression strength tests.

Please further note that the stump test on the BOP has been modified.

An additional change in the Permit to Drill is planned for the size of the hole to be drilled past the 20" casing shoe.

SWEPI is currently intending to not run any logs in the upper part of the hole, down to the 13-3/8" casing.

Finally, please observe that a change in the mud weight below the 20" casing point is now being planned.

OPERATIONS WORKSHEET

CORONA #1

1. Move rig onto location bearing N82E. Deploy and set anchors.
2. Jump diver, inspect glory hole, center rig, run glory hole profiler.
3. MU and run glory hole bit and deepen glory hole a minimum of 4' (if penetration rate with glory hole bit fast, go deeper).
4. Jump divers to inspect glory hole, re-run glory hole profile sonar and side scan sonar.
5. MU 26" bit on 36" hole opener (DO NOT RUN MWD. Survey with TOTCO at 200' BML).
6. Mix 500 bbls of kill mud at 1 ppg above weight of drilling mud. Mix viscous slugs as per mud program.
7. Tag bottom with 26" bit and 36" hole opener. Center bit in glory hole (need 10-1/2' minimum from all sides of GH to hole) with divers.
8. Drill 26" X 36" hole to 385'± (227'± BML). Slug hole with 50 to 100 bbls viscous mud every 30' or as indicated by hole conditions. NOTE: Drill to a depth so that 4 joints of 30" + WH joint are spaced out so that bottom of 36" hole is tagged with bottom of PGB 2' above base of glory hole.
9. Make wiper trip, circulate hole clean and spot viscous, cooled mud for casing (mud temp to be less than 45 F).
10. Drop TOTCO at TD.
11. Run and cement 30" casing as per prognosis written prior to job. Run 2 airlift systems in glory hole and have tied off to PGB so as to avoid possible damage to the 30" wellhead housing. Prior to pulling cement stinger out of 30" wellhead after cement job (i.e. when a joint is still inside 30") MU wellhead wash tool and TIH and wash profile for pin connector (Alum joint to be at end of stinger).
12. Jump divers, check angle of PGB and check fill in glory hole. PGB level should be less than 2 degrees for continued operations.
13. WOC ^{8 SBB} 12 hours minimum (test sample of permafrost cement for compressive strengths). If strengths do not exceed 500 psi after 12 hours at 30 F, do not drill out until either 500 psi is reached on test or 18 hours has passed.
14. Run pin connector and riser and test diverter system.
15. Drill 17-1/2" hole with center jet bit to 1,200" RKB.

16. Under ream hole to 26" (refer to "Contingency Play for Handling Shallow Gas Flows" for additional information. Maintain angle at 1 degree or less. Survey with MWD every 90').
17. At 1,200', circulate and check for fill. Spot viscous cooled mud on bottom. Short trip to 30" shoe. RIH and check for fill and gas.
18. Circulate and fill hole with 10.6 ppg viscous mud. Displace riser with seawater and check well for flow. POOH while strapping pipe. Check underreamer as it is pulled into 30" casing shoe.
19. Pull riser and pin connector and rig down diverter system.
20. Run and cement 20" as per prognosis to 1,158' RKB.
21. Jump divers to check 20" as it enters 30" wellhead and have them position airlift, recover guide shackles, and check PGB angle (Position 2 airlift systems and tie off on guide base so that the airlift pipes can not damage well head. Clean glory hole while cementing with airlift system. Prior to pulling airlift systems, cover wellhead with protective cover).
22. WOC ~~12~~ ^{8 SBB} hours (have test run on Class "G" shoe cement at 40 degrees F. If compressive strength is less than 500 psi after 12 hours wait until either 500 psi is reached or 18 hours has elapsed).
23. Stump test BOP to ~~2,500~~ ^{3500 SBB} psi on annulars and 5,000 psi on rams.
24. Run and land BOP and riser as per procedure to be provided (make sure well head is clean before landing - using divers - and that the choke and kill line are pumped through just prior to landing to order to clean wellhead seat).
25. Pressure test casing to 200 psi. Function test Regan preventer and diverter system. Test BOPs.
26. RIH with 17-1/2" bit and drill to shoe with seawater. Displace 20" with 10.5 ppg mud and drill 20' of new hole. Test shoe to 11.5 ppg or leak off. Drill out with MWD and drilling assembly. Drill ahead to 2,700' RKB using freshwater mud.
27. Survey every 90'. Exploration has allowed a 500' radius target at 10,000'.
28. Circulate and condition for running casing.
29. Run and cement 13-3/8" casing as per prognosis. WOC for a minimum of ~~8~~ ^{12 SBB} hours prior to drilling out of 13-3/8" shoe.
30. Test BOP stack. Refer to BOP information for test values. Pressure test casing with shear rams and seal assembly to 1,643 psi. NOTE TO MMS: We request that the 3,500 psi test pressure be waived for the shear rams and that a 1,643 psi test be accepted for both casing and shear rams.

31. Drill out 13-3/8" casing with 9-7/8" bit (displace hole with mud if seawater used to drill shoe joint), make 20' of new hole and run a formation leak off test. Use FIT data to calculate mud weight required to drill into sand at 2,990'.
32. Drill ahead with a fresh water dispersed lignosulfonate mud at 6,000' RKB. Survey every 492' (MMS requirement) using the MWD.
33. A reasonable potential exists for high pressure gas below the 13-3/8" casing shoe (2,640'). The actual pressure encountered depends on the height of the gas column. The maximum anticipated height is 850', which would cause a 263 psi kick at 2,990. This is equal to a 11.4 ppg mud weight at the shoe of the 13-3/8" casing with a 9.5 ppg mud in the hole (presuming well shut in immediately after cutting sand).
34. Extreme caution should be exercised when drilling below the 13-3/8" casing. Have at least one hole volume of 12.5 ppg mud available to circulate in case of a well kick. If formation leak off test does not indicate a greater than 13.0 ppg frac gradient at the 13-3/8" shoe then the Vermilion event will have to be drilled with a mud weight great enough to insure that the well could be killed without breaking down the 13.3/8" shoe.
35. After logging at 6,000', either the hole will be opened to 12-1/4" and 9-5/8" casing will be run or the 9-7/8" * hole will be drilled to a depth where 9-5/8" casing is required or TD is reached (the decision on running the 9-5/8" will be based on a combination of log results, hole conditions, and weather, ice, and whale conditions). If 9-5/8" casing is set, and time allows, an 8-1/2" hole will be drilled to 10,000' and evaluated as per logging program. As in the upper hole section, directional surveys will be taken at a minimum of every 492'.
36. Currently, we do not plan to test the well. Thus, the well would not require casing at TD. However, due to the uncertainties of time and logistics for the area, contingency plans are being made for a well test. If 13-3/8" casing is the last string, a full string of 7" would be run. If 9-5/8" casing is run at 6,000', then a 7" liner with 400' of overlap into the 9-5/8" casing will be run. Current plans are to log at TD and T&A as per MMS requirements.

NOTE: Currently consideration is being given to drilling a 12-1/4" hole from under the 13-3/8" in order to save the time required to open the hole.

Minor amounts of Lignosulfonate may be required to control gel strengths.

Interval - 2,650' - FTD
Mud Type - Lightly dispersed lignosulfonate mud (EPA Generic Mud #2)

Mud Properties and Chemicals -

Mud wt.	10.4-10.8 ppg	Barite
vis	40-45 sec/qt	Gel
PV	20	Control with
YP	20	Poly RX & XC-Polymer
Gels	2/5-4/10	
WL	8 or less	Drispac, Poly RX
HTHP at 150°F	16 cc	
pH	8.5-9.0	

Mud weight as required by hole conditions. The well is expected to be normally pressured. However, as already noted in the Worksheet, the potential for high pressure gas exists below 2,990'. An expected pressure gradient, frac gradient and temperature profile is attached. Mud weight used to penetrate sand at 2,990' will be determined after Formation Integrity Test.

Mud Quantities - The following minimum quantities of mud material will be maintained on the rig:

Barite	(2000 sx) 100 tons
Bentonite	60,000#
Lost circulation material	200 sxs

In addition maintain 500 sxs Class "G" neat cement on the rig.

The following mud chemicals could be used in varying concentrations:

Chemicals and additives approved for Generic muds 2, 6 and 7.

- Barite
- Bentonite
- Attapulgate
- Drispac (Polyanionic cellulose)
- CMC (Carboxymethyle cellulose)
- Spersene (Chrome lignosulphonate)
- Technisperse (lignosulfonate)
- Caustic
- Sodium Bicarbonate/Soda Ash
- Lime
- Carbonox (Lignite)
- Sea Water
- Fresh Water
- Nut Plug
- Mica
- Kwik Seal
- Aluminum Stearate

Chemicals which have required EPA approval for discharge:

Kenol ES Spotting Fluid (non-sheening mineral oil) -
Resinex/Gelex (Synthetic Resin)
DD (Drilling detergent) or MD (Mud Detergent)
Benex
XC Polymer
SAPP (sodium acid pyrophosphate)
Sulf-X ES (zinc oxide; H₂S scavenger)
Soltex (sulfonated asphalt)
NaCl
Gelite (saponite, a clay mineral similar to bentonite)
Durogel (sepiolite clay used instead of attapulgite)
Poly R X (polymer treated humate)
HEC Polymer
Sodium Nitrate
Calcium Carbide

Note: If additive not on either list do not use prior to receiving approval from EPA. Remove any products from rig which do not have EPA approval.

RLC/b1

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other Wildcat

2. NAME OF OPERATOR
Shell Western E&P Inc.

3. ADDRESS OF OPERATOR (Where form is completed)
501 West Fifth Avenue, Suite 810, Anchorage, Alaska 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
AT SURFACE: Lat. 70°18'52.67"N Long. 144°45'32.90"W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

- | | | |
|-----------------------|--------------------------|--------------------------|
| ACIDIZE | <input type="checkbox"/> | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | <input type="checkbox"/> |
| PERFORATE | <input type="checkbox"/> | <input type="checkbox"/> |
| PERMANENT ABANDONMENT | <input type="checkbox"/> | <input type="checkbox"/> |
| TEMPORARY ABANDONMENT | <input type="checkbox"/> | <input type="checkbox"/> |
| ARTIFICIAL LIFT | <input type="checkbox"/> | <input type="checkbox"/> |
- (Other) Final location plat

5. LEASE NO. OCS-Y 0871
6. AREA & BLOCK NR 6-4 Block 678
7. WELL NO. OCS-Y 0871#1
8. UNIT AGREEMENT N/A
9. FIELD Wildcat
10. EXPLORATION <input checked="" type="checkbox"/> DEVELOPMENT <input type="checkbox"/>
11. ADJACENT STATE Alaska
12. API NO. 55-171-00002
13. ELEVATIONS RKB 39' DF
14. WATER DEPTH 116'

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

PUBLIC FILE
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RECEIVED
OCS DISTRICT OFFICE
AUG 20 1986

RECEIVED
Anchorage, Alaska
AUG 22 1986

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA
REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Senior Drilling Superintendent DATE August 20, 1986

(This space for Federal or State office use)
APPROVED _____ TITLE DISTRICT SUPERVISOR DATE AUG 21 1986

CONDITIONS OF APPROVAL, IF ANY:

PUBLIC INFORMATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other Wildcat

2. NAME OF OPERATOR
Shell Western E&P Inc.

3. ADDRESS OF OPERATOR (Where form is completed)
601 West Fifth Avenue, Suite 810, Anchorage, Alaska 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
Lat. 70°18'52.67"N Long. 144°45'32.90"W
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

5. LEASE NO.
OCS-Y 0871

6. AREA & BLOCK
NR 6-4 Block 678

7. WELL NO.
OCS-Y 0871#1

8. UNIT AGREEMENT
N/A

9. FIELD
Wildcat

10. EXPLORATION
DEVELOPMENT

11. ADJACENT STATE
Alaska

12. API NO.
55-171-00002

13. ELEVATIONS
RKB 39' DF

14. WATER DEPTH
116'

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>		<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>		<input type="checkbox"/>
(Other) <u>Final location plat.</u>			

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

RECEIVED
Anchorage, Alaska

AUG 20 1986

RECEIVED
AUG 22 1986

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Senior Drilling Superintendent DATE August 20, 1986

(This space for Federal or State office use)

APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 21 1986

CONDITIONS OF APPROVAL, IF ANY:

PRIVATE & CONFIDENTIAL

G.B.2
Y 0871#1

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other Wildcat

2. NAME OF OPERATOR
Shell Western E&P Inc.

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601 West Fifth Avenue, Suite 810, Anchorage, Alaska 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
Lat. 70°18'52.67"N Long. 144°45'32.90"W
AT SURFACE:
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

LEASE NO.
OCS-Y 0871

6. AREA & BLOCK
NR 6-4 Block 678

7. WELL NO.
OCS-Y 0871#1

8. UNIT AGREEMENT
N/A

9. FIELD
Wildcat

10. EXPLORATION
DEVELOPMENT

11. ADJACENT STATE
Alaska

12. API NO.
55-171-00002

13. ELEVATIONS
RKB 39' DF

14. WATER DEPTH
116'

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

ACIDIZE	<input type="checkbox"/>		<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>		<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>		<input type="checkbox"/>
(Other) Subsequent report			

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

No information available.

RECEIVED

Anchorage, Alaska

AUG 22 1986

REGIONAL SUPERVISOR
RECEIVED FIELD OPERATION
OCS MINERALS MANAGEMENT SERVICE

PUBLIC FILE
COPY

AUG 20 1986

Minerals Management Service
Anchorage, Alaska

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED M. Wood TITLE Senior Drilling Superintendent DATE August 20, 1986

(This space for Federal or State office use)

APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 21 1986
CONDITIONS OF APPROVAL, IF ANY:

PUBLIC INFORMATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other Wildcat

2. NAME OF OPERATOR
Shell Western E&P Inc.

3. ADDRESS OF OPERATOR (Where form is completed)
601 West Fifth Avenue, Suite 810, Anchorage, Alaska 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
 Lat. 70°18'52.67"N Long. 144°45'32.90"W
 AT SURFACE:
 AT TOP PROD. INTERVAL:
 AT TOTAL DEPTH:

LEASE NO.
OCS-Y 0871

6. AREA & BLOCK
NR 6-4 Block 678

7. WELL NO.
OCS-Y 871#1

8. UNIT AGREEMENT
N/A

9. FIELD
Wildcat

10. EXPLORATION DEVELOPMENT

11. ADJACENT STATE
Alaska

12. API NO.
55-171-00002

13. ELEVATIONS
RKB 39' DF

14. WATER DEPTH
116'

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>	<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>	<input type="checkbox"/>

(Other) Subsequent report of running 9-5/8" casing.

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

See attached worksheet for details.

Received
OCS District Office

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Anchorage, Alaska

AUG 22 1986

AUG 20 1986

REGIONAL SUPERVISOR
FIELD OPERATION
Minerals Management Service
ANCHORAGE, ALASKA

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED M. Work TITLE Senior Drilling Superintendent DATE August 20, 1986

(This space for Federal or State office use)
APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 21 1986
CONDITIONS OF APPROVAL, IF ANY:

PRIVATE & CONFIDENTIAL

G.B.L.
Y0871

RECEIVED
Anchorage, Alaska

AUG 22 1986

WORKSHEET FOR CORONA PROSPECT #1

OSC Y-871#1

9-5/8" Casing

REGIONAL SUPERVISOR
RECEIVED FIELD OPERATION
OCS District Office MINERALS MANAGEMENT SERVICE

AUG 20 1986

Casing:

Type: 9-5/8", 53.5#/ft, L-80, BTC
Joints: 197
Amount: 7859'
Depth: 187' RKB
Shoe at: 7943' RKB

Minerals Management Service
Anchorage, Alaska

Cement:

<u>Type</u>	<u>Amount</u>	<u>Density</u>	<u>Yield</u>
Class "G" w/0.5% Halad 344, 0.25% CFR-2, and 0.15% LWL	1800 sx	15.8 ppg	1.15 CF/sx

Date of Operations:

Casing Run On: 08/17 - 08/18/86
Cemented On: 08/18/86
Cement Tested On: 08/18/86
Tested To: 1760 psi
Leak Off Tested On: 08/19/86 (16.7 ppg equivalent mud weight)

NOTE: WOC 17 hours

PROPRIETARY

8-8-86

AUG 8 1986

CERTIFIED MAIL--
RETURN RECEIPT REQUESTED

Shell Western E&P, Inc.
Attention: Dave Yesland
601 West 5th Ave., Suite 810
Anchorage, AK 99501

Gentlemen:

Enclosed are your copies of the approved subsequent reports of running 20" and 13-3/8" casings and the request for approval to change 9-5/8" casing depth for Well OCS-Y 0871 No. 1.

Please note the Conditions of Approval for the subsequent report for the 13-3/8" casing.

Sincerely,

(Orig. Sgd.) Brian Schoof

Brian F. Schoof
Supervisor, District Office
Field Operations

3 Enclosures

bcc: OCS-Y 0871, Well No. 1, ^{6B} ~~6B~~ Area/District w/cy encl
(PROPRIETARY-FOR U.S. GOV'T USE ONLY)

Chron Area/District
Circ Chron
RD Chron

NMasri:lw:8-8-86

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

LEASE NO.

OSC Y-871

6. AREA & BLOCK

NR6-4 Block 678

7. WELL NO.

OSC Y-871#1

8. UNIT AGREEMENT

N/A

9. FIELD

Wildcat

10.

EXPLORATION

DEVELOPMENT

11. ADJACENT STATE

Alaska

12. API NO.

55-171-00002

13. ELEVATIONS

RKB 39' DF

14. WATER DEPTH

116'

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other Wildcat

2. NAME OF OPERATOR SHELL WESTERN E&P INC.

3. ADDRESS OF OPERATOR (Where form is completed)
601 W. 5th Ave., Suite 810 Anchorage, AK 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
AT SURFACE: Lat. 70° 18' 52.67" N Long 144° 45' 32.90" W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO:

- | | | | |
|-----------------------|--------------------------|-----------------------|--------------------------|
| ACIDIZE | <input type="checkbox"/> | SUBSEQUENT REPORT OF: | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | | <input type="checkbox"/> |
| PERFORATE | <input type="checkbox"/> | | <input type="checkbox"/> |
| PERMANENT ABANDONMENT | <input type="checkbox"/> | | <input type="checkbox"/> |
| TEMPORARY ABANDONMENT | <input type="checkbox"/> | | <input type="checkbox"/> |
| ARTIFICIAL LIFT | <input type="checkbox"/> | | <input type="checkbox"/> |

(Other) Subsequent report of running 13-3/8" casing

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

RECEIVED

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

AUG 08 1986

REGIONAL SUPERVISOR
FIELD OPERATION

MINERALS MANAGEMENT SERVICE

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COO DISTRICT OFFICE

AUG 06 1986
MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Sr. Drilling Superintendent DATE 8-6-86

(This space for Federal or State office use)

APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 8 1986

CONDITIONS OF APPROVAL, IF ANY:

PUBLIC INFORMATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

LEASE NO.

OSC Y-871

SUNDRY NOTICES AND REPORTS ON WELLS

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AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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ACIDIZE	<input type="checkbox"/>	SUBSEQUENT REPORT OF:	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>		<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>		<input type="checkbox"/>
(Other) Subsequent report of running 13-3/8" casing			

6. AREA & BLOCK
NR6-4 Block 678

7. WELL NO.
OSC Y-871 #1

8. UNIT AGREEMENT
N/A

9. FIELD
Wildcat

10. EXPLORATION
DEVELOPMENT

11. ADJACENT STATE
Alaska

12. API NO.
55-171-00002

13. ELEVATIONS
RKB 39' DF

14. WATER DEPTH
116'

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Anchorage, Alaska

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

AUG 08 1986

REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

Please see attached worksheet for the details of running the casing

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MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA
PROPRIETARY

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED M. Wood TITLE Sr. Drilling Superintendent DATE 8-6-86

(This space for Federal or State office use)
APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 8 1986

CONDITIONS OF APPROVAL, IF ANY. Upon abandonment, any annular space open to the drilled hole shall be sealed in accordance with the requirements in OCS Order No. 3.

PRIVATE AND CONFIDENTIAL

AREA FILE 6.B.2
Y-871 #1

WORKSHEET FOR CORONA PROSPECT #1

OSC Y-871 #1

13-3/8" Casing String

Casing:

Type: 13-3/8" 72#, N&L-80, BTC
Joints: 63
Amount: 2468'
Depth: 2655'
Shoe at: 2655'

Cement:

<u>Type</u>	<u>Amount</u>	<u>Density</u>	<u>Yield</u>
Class "G": w/0.75% CFR-2, 2% CaCl ₂ , 2.25% PHG	725 SX	13.2 ppg	1.78 CF/SX
Class "G" w/0.75% CFR-2, 2% CaCl ₂ (Tail slurry)	575 SX	16.2 ppg	1.09 CF/SX

Operations Performed On

Casing Run On: 08/03-08/04/86
Cemented On: 08/04/86
Leak Off Performed On: 08/04/86
Leak Off Tested To: 14.0 ppg

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ANCHORAGE, ALASKA

PROPRIETARY

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Anchorage, Alaska

AUG 08 1986

REGIONAL SUPERVISOR
FIELD OPERATIONS
MINERALS MANAGEMENT SERVICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

5. LEASE NO.	OCS Y-871
6. AREA & BLOCK	NR6-4 Block 678
7. WELL NO.	OCS Y-871#1
8. UNIT AGREEMENT	N/A
9. FIELD	Wildcat
10. EXPLORATION <input checked="" type="checkbox"/> DEVELOPMENT <input type="checkbox"/>	
11. ADJACENT STATE	Alaska
12. API NO.	55-171-00002
13. ELEVATIONS	RKB 39' DF
14. WATER DEPTH	116'

1. oil well gas well other Wildcat

2. NAME OF OPERATOR SHELL WESTERN E&P INC.

3. ADDRESS OF OPERATOR (Where form is completed)
601 W 5th Ave., Suite 810 Anchorage, AK 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
AT SURFACE: Lat. 70° 18' 52.67" N Long. 144° 45' 32.90" W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO:

ACIDIZE	<input type="checkbox"/>	SUBSEQUENT REPORT OF:	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>		<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>		<input type="checkbox"/>

(Other) Subsequent report of running 20" casing

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)
Anchorage, Alaska

AUG 08 1986

REGIONAL SUPERVISOR

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all marked zones pertinent to this work.)*

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OCS DISTRICT OFFICE

AUG 06 1986
MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED M. Wood TITLE Sr. Drilling Superintendent DATE 8-6-86

(This space for Federal or State office use)
APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 8 1986
CONDITIONS OF APPROVAL, IF ANY:

PUBLIC INFORMATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

LEASE NO.	OCS Y-871
6. AREA & BLOCK	NR6-4 Block 678
7. WELL NO.	OCS Y-871#1
8. UNIT AGREEMENT	N/A
9. FIELD	Wildcat
10. EXPLORATION <input checked="" type="checkbox"/> DEVELOPMENT <input type="checkbox"/>	
11. ADJACENT STATE	Alaska
12. API NO.	55-171-00002
13. ELEVATIONS	RKB 39' DF
14. WATER DEPTH	116'

SUNDRY NOTICES AND REPORTS ON WELLS

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AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

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ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>	<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>	<input type="checkbox"/>

(Other) Subsequent report of running 20" casing

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Anchorage, Alaska

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

AUG 08 1986

REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including date of 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.)*

Please see attached worksheet for the casing details.

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MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

PROPRIETARY

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED M. [Signature] TITLE Sr. Drilling Superintendent DATE 8-6-86

(This space for Federal or State office use)
APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 8 1986

CONDITIONS OF APPROVAL, IF ANY:

PRIVATE AND CONFIDENTIAL

WORKSHEET FOR CORONA PROSPECT #1

OSC Y-871#1

20" Casing String

Casing:

Type: 133#/ft, X-56, LS-2
Joints: 21
Amount: 884'
Depth: 1028'
Shoe at: 1028'

Cement:

<u>Type</u>	<u>Amount</u>	<u>Density</u>	<u>Yield</u>
Permafrost	1665 SX	14.7 ppg	1.11 CF/SX
Permafrost (tail slurry)	600 SX	15.6 ppg	1.15 CF/SX

NOTE: Cement returns observed in airlift while pumping lead slurry.
(Henry Hite notified)

Operations Performed On

Casing Run On: 07/30-7/31/86
Cemented On: 07/31/86
Cement Tested On: 08/02/86 (500 psi o.k.)
Leak Off Performed On: 08/02/86
Leak Off Tested To: 11.7 ppg

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AUG 06 1986

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

PROPRIETARY

RECEIVED
Anchorage, Alaska

AUG 08 1986

REGIONAL SUPERVISOR
FIELD OPERATIONS
MINERALS MANAGEMENT SERVICE

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

5. LEASE NO.
OCS Y-871

6. AREA & BLOCK
NR 6-4 Block 678

7. WELL NO.
OCS Y-871 #1

8. UNIT AGREEMENT
N/A

9. FIELD
Wildcat

10. EXPLORATION
DEVELOPMENT

11. ADJACENT STATE
Alaska

12. API NO.
55-171-00002

13. ELEVATIONS
RKB 39' DF

14. WATER DEPTH
116'

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other Wildcat

2. NAME OF OPERATOR
SHELL WESTERN E&P INC.

3. ADDRESS OF OPERATOR (Where form is completed)
601 W 5th Ave., Suite 810, Anchorage, AK 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
AT SURFACE: Lat. 70° 18' 52.56" N Long. 144° 45' 31.64" W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>	<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>	<input type="checkbox"/>

(Other) Request for approval to change plan

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

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Anchorage, Alaska

AUG 08 1986

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)

REGIONAL SUPERVISOR
FIELD OPERATION

MINERALS MANAGEMENT SERVICE

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Received
OCS District Office

AUG 8 1986

Minerals Management Service
Anchorage, Alaska

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct

SIGNED M. Wood TITLE Sr. Drilling Superintendent DATE 8-5-86

(This space for Federal or State office use)

APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 8 1986

CONDITIONS OF APPROVAL, IF ANY:

PUBLIC INFORMATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

LEASE NO.
OCS Y-871

SUNDRY NOTICES AND REPORTS ON WELLS

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AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

6. AREA & BLOCK
NR 6-4 Block 678

7. WELL NO.
OCS Y-871 #1

8. UNIT AGREEMENT
N/A

9. FIELD
Wildcat

10. EXPLORATION
DEVELOPMENT

11. ADJACENT STATE
Alaska

12. API NO.
55-171-00002

13. ELEVATIONS
RKB 39' DF

14. WATER DEPTH
116'

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO:

ACIDIZE	<input type="checkbox"/>	SUBSEQUENT REPORT OF:	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>		<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>		<input type="checkbox"/>

(Other) Request approval to change 9 5/8" casing depth

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

Shell Western E&P Inc. is requesting that the casing depth for the 9 5/8" casing point be variable; from 6,000' to a maximum of 8,000'. The depth at which the casing will be set is dependent upon when the bit is dulled. Time will be saved by not pulling out of the hole in the middle of a bit run.

Please see attached revised casing design criteria for the details.

OCS District Office

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

Minerals Management Service
Anchorage, Alaska

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Sr. Drilling Superintendent DATE 8/5/86

(This space for Federal or State office use)

APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 8 1986

CONDITIONS OF APPROVAL, IF ANY:

PRIVATE AND CONFIDENTIAL

6.0.2
Y-871 #1

CORONA #1 EAST BEAUFORT SEA
CASING DESIGN CRITERIA

Size	Depth RKB/BML	Mud Wt. @ Setting Depth	Est. F.G. @ Csg. Shoe	Depth to Next Csg. String	Mud Wt. @ Next Csg. String	Max. SICP (1/3 BHP)
20"	1154/1000	9.2	.48	2,700	9.3	410
13-3/8"	2650/2496	9.3	.73	8,000	12.2	1935
9-5/8"	8158/8000	12.2 (design)	.78	12,000	9.5	5920 (max.SITP)
7"	12,000/11,846	9.5	.87			5920 (max.SITP)

CASING DESIGN

Size	(RKB/BML) Interval	Description	Design Conditions			Casing Rating/Design Factors		
			T# Wt. in Mud	B psi 1/3 BHP	C psi 1/3 Drw.D	T#	B psi	C psi
20"	1158/1000	133#/ft.X-56 Vetco LS-2 conn	116,000	410	446	1.4MM/12.0	1500/3.3	1500/3.3
13-3/8"	2650/2492	72#/ft.N-80 BT&C	174,000	1935	1250	1,545M/6.77	5380/2.79	2670/2.38
9-5/8"	8158/8000	53.5#/ft.L-80 LT&C	368,000	5920(SITP)	5065 Full evac.	1.047MM/2.84	7930/1.34	6620/1.31
7"	12,000/11,846 or (TOL/BOL) 7600/12,000	35#/ft.L-80 LTC-ABC 35#/ft.L-80 LTC-ABC	361,000	5920(SITP)	5920 Full evac.	.60MM/1.66	9240B*/1.56	10180/1.72

*B = Coupling leak pressure

NOTE: Burst designs do not account for increased strengths due to tension. Before testing deep zones (12,000') 9-5/8" casing will either be calipered for wear or pressure tested.

Inherco's Management Services
 Anchorage, Alaska
 410 0 1111
 Reserver
 OOS District Office

PUBLIC INFORMATION COPY

MONTHLY REPORT OF OPERATIONS
CORONA PROSPECT
OCS Y-871 #1

10-01 - 10-03-85 Wait on ice because whale migration
restrictions prohibit ice management.
10-04 - 10-05-85 Prepare site.
10-05 - 10-13-85 Wait on ice because whale migration
restrictions prohibit ice management.
10-14-85 Prepare Eric site.
10-15 - 10-21-85 Wait on whale migration.
NOTE: Whale migration over, the evening
of 10-20-85.
10-22 - 10-30-85 Wait on ice.
10-30-85 Rig released for winter storage.

PUBLIC FILE
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Anchorage, Alaska

DEC 06 1985

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OCS DISTRICT OFFICE

REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

NOV 22 1985

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

LEASE NO.
OCS Y-871
6. AREA & BLOCK NR6-4 Block 678
7. WELL NO. OCS Y-871 #1
8. UNIT AGREEMENT N/A
9. FIELD WILDCAT
10. EXPLORATION <input checked="" type="checkbox"/> DEVELOPMENT <input type="checkbox"/>
11. ADJACENT STATE ALASKA
12. API NO. 55-171-00002
13. ELEVATIONS RKB 39' DF
14. WATER DEPTH 116'

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other WILDCAT

2. NAME OF OPERATOR
SHELL WESTERN E&P INC.

3. ADDRESS OF OPERATOR (Where form is completed)
601 W. 5th Avenue, Anchorage, Alaska 9950

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
AT SURFACE: 70° 18' 52.67" N & 144° 45' 32.90"W UTM ZONE 6
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>	<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>	<input type="checkbox"/>
(Other) <u>Submission of final prognosis</u>		

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

PUBLIC FILE
COPY

RECEIVED
OCS DISTRICT OFFICE
AUG 5 1986

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Sr. Staff Environmental Engineer DATE 8-1-86

(This space for Federal or State office use)

APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 5 1986

CONDITIONS OF APPROVAL, IF ANY:

PUBLIC INFORMATION

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other WILDCAT

2. NAME OF OPERATOR
SHELL WESTERN E&P INC.

3. ADDRESS OF OPERATOR (Where form is completed)
601 West Fifth Avenue, Suite 810; Anchorage, Alaska 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
AT SURFACE: Lat. 70 18' 52.56" N Long. 144 45' 31.64" W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

LEASE NO.
OCS Y-871

6. AREA & BLOCK
NR6-4 Block 678

7. WELL NO.
OCS Y-871

8. UNIT AGREEMENT
N/A

9. FIELD
WILDCAT

10. EXPLORATION
DEVELOPMENT

11. ADJACENT STATE
ALASKA

12. API NO.
55-171-00002

13. ELEVATIONS
RKB 39' DF

14. WATER DEPTH
119'

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:

ACIDIZE	<input type="checkbox"/>	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>	<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>	<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>	<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>	<input type="checkbox"/>
(Other) <u>CHANGE OF PLANS</u>	<input type="checkbox"/>	<input type="checkbox"/>

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

PUBLIC FILE
COPY

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Senior Drilling Superintendent DATE 7-23-86

(This space for Federal or State office use)

APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE JUL 25 1986
CONDITIONS OF APPROVAL, IF ANY:

RECEIVED
OCS DISTRICT OFFICE

APPROVAL SUBJECT TO ATTACHED REQUIREMENTS

JUL 24 1986

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE
ALASKA OCS REGION

CONDITIONS OF APPROVAL TO DRILL FOR OIL OR GAS

OCS-Y 0871 Well No. 1

Send submittals to the Supervisor, District Office, at this address:

U.S. Dept. of Interior
Minerals Management Service
District Office
P.O. Box 101159
Anchorage, AK 99510

1. Submit the well's surface location as soon as the final surveyed location and the K.B. elevation have been determined, on Form 9-331, "Sundry Notices and Reports on Wells", in triplicate plus two public information copies, to the Supervisor, District Office. Specify the well location (latitude/longitude, distance from lease lines, Mercadian, Loran C), the location of each anchor, and the amount of chain and wire rope deployed. Notify the U.S. Coast Guard Office of Jurisdiction of the location for listing in the local notice to mariners.
2. Submit a daily drilling report until the final status of the well is established (one copy, no prescribed form) outlining the following: drilling depth, bottom hole location (if a directional well), mud weight, principal items of work done during the previous day (running casing, testing, coring, sidewall sampling, logging, etc.), zones of abnormal pressure, lost circulation, depth of kicks, other hole difficulties encountered.
3. Submit as soon as available one copy of all field prints of well logs and directional surveys. Submit mudlog and MWD log data on a daily basis as stated in the Shell Western E&P, Inc.'s letter of September 26, 1985, (Security Procedures for OCS-Y 0871).
4. Submit as soon as available but no later than 30 days after completion of the well, three copies (two blue-line and one sepia) of all final well logs including composite mud logs and MWD logs if run; two copies of the composite directional surveys, and one copy of the digitized magnetic well log tapes if run or prepared.
5. Submit within 30 days of completion of the well, two copies (plus two public information copies) of a Completion Report (Form 9-330) and a Well Summary Report. Note all occurrences of oil, gas, sulfur, and other minerals of potential geological interest on the Completion Report, including all important zones of porosity and contents thereof; cored intervals; and complete details of all drill stem or formation tests. Identify rock units in time-stratigraphic terms showing, the depths to the tops of the

Upper Pliocene, Middle Pliocene, Lower Pliocene, Upper Miocene, Middle Miocene, etc., on the Completion Report or on a marked electric log.

6. Submit a written notification (Sundry Notice, Form 9-331, in triplicate, plus two public information copies), of intent to change any approved plan of operations for approval. Emergency approval may be obtained verbally, but must be followed by the written notice.

A subsequent report for the casing string run is to be furnished on Form 9-331 for each string of casing run. When a leak-off test is performed at the casing shoe, furnish the results along with the casing report.

Applications for Approval to Abandon a Well shall be submitted in accordance with Subsections 1.1 and 1.2 of OCS Order No. 3.

7. Submit two copies of all well reports, geochemical analyses and core analyses as soon as available.
8. Submit as soon as available two copies of a paleontological identification report of all foraminifera, nannoplankton and/or palynomorphs by depth, if prepared, and two copies of velocity surveys, if run.
9. The Supervisor, District Office, will require sufficient time to examine well records before completion, suspension, or abandonment activities are commenced, or before approval of the proposed disposition of a well is granted.
10. Prior to coring or testing, notice will be given to the Minerals Management Service so that such operations may be witnessed if deemed necessary by the District Supervisor.

Submit a written notification (Sundry Notice, Form 9-331, in triplicate, plus two public information copies) of the intent to test. This notice should include:

- a. The current and anticipated condition of the well.
 - b. The sequence of proposed operations, the perforated test interval depths, the surface and subsurface equipment schematics, planned pressure testing of tubular and other equipment, plugging or isolating of perforated intervals, disposal produced gas or fluids, and any other pertinent information.
11. Submit two copies of field well test data within 48 hours of such tests. Two copies of the interpreted results of these tests should be submitted as soon as available.

12. Ship samples of all cores, representative cuts, unwashed bulk and washed (dry) ditch samples to the Minerals Management Service, Regional Supervisor, Offshore Resource Evaluation, 949 E. 36th Ave., Third Floor, Suite 316, Anchorage, AK 99508.
13. All operations shall be subject to inspection by Federal inspectors designated by the District Supervisor.
14. Maintain an emergency standby vessel/vehicle at all times during operations. No operations shall be conducted unless there is a standby vessel/vehicle within the immediate vicinity of the drilling unit but no farther away than 5 miles or 20 minutes steaming distance, whichever is less.
15. Should a well be successfully completed for production or recompleted for production in a new interval, this office must be notified when the well is placed in a producing status. Notification may be provided orally but must be confirmed in writing and received in this office no later than the fifth business day following the date on which the well is placed on production. Provide the following information with the notification:
 - a. Operator name.
 - b. Well name, number, and location.
 - c. Date well was placed on production.
 - d. The lease, communitized tract, or unit participating area to which the well's production is attributable.

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other WILDCAT

2. NAME OF OPERATOR
SHELL WESTERN E&P INC.

3. ADDRESS OF OPERATOR (Where form is completed)
601 West Fifth Avenue, Suite 810; Anchorage, Alaska 99501

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.)
AT SURFACE: Lat. 70 18' 52.56" N Long. 144 45' 31.64" W
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

LEASE NO.
JCS Y-871

6. AREA & BLOCK
NR6-4 Block 678

7. WELL NO.
OCS Y-871#1

8. UNIT AGREEMENT
N/A

9. FIELD
WILDCAT

10. EXPLORATION DEVELOPMENT

11. ADJACENT STATE
ALASKA

12. API NO.
55-171-00002

13. ELEVATIONS
RKB 30' DF

14. WATER DEPTH
119'

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO:

ACIDIZE	<input type="checkbox"/>	SUBSEQUENT REPORT OF:	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>		<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>		<input type="checkbox"/>
CHANGE ZONES	<input type="checkbox"/>		<input type="checkbox"/>
PERFORATE	<input type="checkbox"/>		<input type="checkbox"/>
PERMANENT ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
TEMPORARY ABANDONMENT	<input type="checkbox"/>		<input type="checkbox"/>
ARTIFICIAL LIFT	<input type="checkbox"/>		<input type="checkbox"/>
(Other) <u>CHANGE OF PLANS</u>	<input type="checkbox"/>		<input type="checkbox"/>

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

Please see the attached for the details of the changes.

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct

SIGNED [Signature] TITLE Senior Drilling Superintendent DATE 7-23-86

(This space for Federal or State office use)

APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE JUL 25 1986

CONDITIONS OF APPROVAL, IF ANY: _____ RECEIVED _____
OCS DISTRICT OFFICE

APPROVAL SUBJECT TO ATTACHED REQUIREMENTS

JUL 24 1986

WORKSHEET FOR CORONA PROSPECT
OCS Y-871 #1

Summary of Changes:

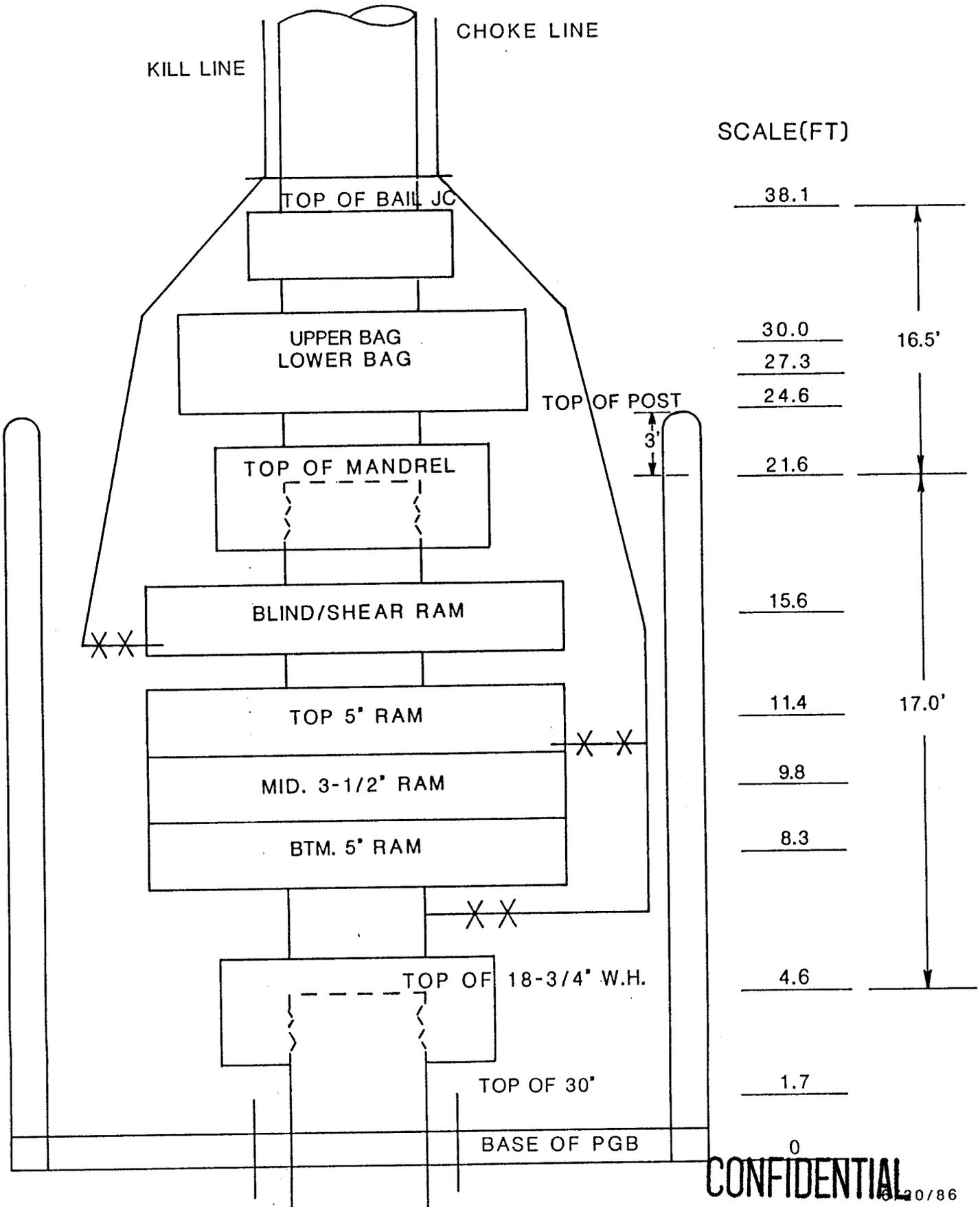
1. Plan to drill out of 30" W/26" bit for 25' before running riser - pin connector.
2. Ram arrangement has been changed to (from bottom) 5", 3-1/2", 5", blind-shear, double annulars (see following pages).
3. 7", 35#, L-80 LTC-ABC casing will be run instead of 7", 26#, L-80 (see following pages).
4. Plan to lower stump test pressure for annulars from 5000 psi to 3500 psi (see following pages).
5. Plan to hold both high and low BOP tests for 3 minutes on each function (see following pages).

RECEIVED
OCS DISTRICT OFFICE

JUL 24 1986

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

BOPE STACK EXPLORER II



CORONA #1 EAST BEAUFORT SEA
CASING DESIGN CRITERIA

<u>Size</u>	<u>Depth RKB/BML</u>	<u>Mud Wt. @ Setting Depth</u>	<u>Est. F.G. @ Csg. Shoe</u>	<u>Depth to Next Csg. String</u>	<u>Mud Wt. @ Csg. String</u>	<u>Max. SICP (1/3 BHP)</u>
20"	1154/1000	9.2	.48	2700	9.3	410
13-3/8"	2650/2496	9.3	.72 (design)	10,000	9.5	1643
9-5/8"	6000/5846	12.2 (design)	.78	10,000	9.5	3900 (max.SITP)
7"	10,000/9846	9.5	.87			3900 (max.SITP)

CASING DESIGN

<u>Size</u>	<u>(RKB/BML) Interval</u>	<u>Description</u>	<u>Design Conditions</u>			<u>Casing Rating/Design Factors</u>		
			<u>T# Wt. in Mud</u>	<u>B psi 1/3 BHP</u>	<u>C psi 1/3 Drw.D</u>	<u>T#</u>	<u>B psi</u>	<u>C psi</u>
20"	1158/1000	133#/ft.X-56 Vetco LS-2 conn	116,000	410	446	1.4MM/12.0	1500/3.3	1500/3.3
13-3/8"	2650/2492	72#/ft.N-80 BT&C	174,000	1643	1250	1,545M/6.77	5380/3.05	2670/2.3
9-5/8"	6000/5842	53.5#/ft.L-80 LT&C	263,000	3900(SITP)	3800 Full evac.	1.047MM/3.98	7930/1.96	6620/1.66
7"	10,000/9842 or 5600/10,000	35#/ft.L-80 LTC-ABC (0-5000) 35#/ft.L-80 LTC-ABC	223,000	3900(SITP)	4930 Full evac.	.60MM/2.7	9240B*/2.3	10180/2.1

* = Coupling leak pressure

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JUL 24 1986

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

CONFIDENTIAL

Corona #1
OCS-Y-871 #1
BOP & Wellhead Equipment
BOP Test Procedure

<u>Interval</u>	<u>Description</u>	<u>Max. Antic. Kick Press.</u>	<u>Blind Shear Ram</u>	<u>Pipe Ram</u>	<u>Annular</u>
Below 30" to 20" csg pt	Returns will be taken at base of glory hole for the first 25' drilled out of the 30". Afterwards, returns will be brought to the drillship via the riser. A function test of the Regan/Diverter system will be performed. As long as surface diverter system will be used, a daily function test should be performed.				
Below 20" to 13-3/8" csg pt	10 M-18-3/4" RT R AA Diverter-500 psi Regan KFDS	410	1000 psi	1000 psi	1000 psi
Below 13-3/8"	10 M-18-3/4" RT R AA	1643 psi	1650 psi*	3500 psi	3500 psi
Below 9-5/8" (if run)	10 M-18-3/4" RT R AA	1643 psi	1650 psi*	5000 psi	3500 psi

*Request that we be allowed by MMS to test casing string and blind rams simultaneously at the csg test pressures indicated above has been approved by the MMS. Blind rams will only be tested prior to drilling shoe of any casing string set.

Notes:

- When stump testing BOP's, bleed off hydraulic pressure (Kooomey pressure) from rams while they are in the closed position to insure that mechanical lock functions properly (i.e. insure that rams will stay closed if pressure is lost).
- Stump test BOP A-3500, R-7500
- Weekly BOP test required in addition to test at casing point
- Maximum anticipated kick pressure based on 1/3 estimated bottomhole pressure at deepest exposed depth.
- See attached "Contingency Plan for Handling Shallow Gas Flows" for additional details on well control procedures.
- In the event of a kick below 20", the initial shut-in will be on the subsea annular preventer using the soft shut-in technique. If while choking back while shutting in, the pressure reaches the maximum pressure allowable to preclude breaking down the 20" shoe, the well will either be circulated with the maximum allowable choke pressure while kill mud is pumped; or the surface annular will be closed and the subsea annular(s) will be opened and the well will be diverted to the down wind side of the rig.
- All high pressure tests on BOP & choke manifold will be preceded by a 250 psi low pressure test.
- Rams will be run (from bottom to top) 5", 3 1/2", 5", and blinds.
- RT = triple rams; R = ram; AA = double annulars
- Hold Low tests for 3 minutes; 3 minutes on High test

RLC/52

RECEIVED
OCS DISTRICT OFFICE

JUL 24 1986

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA
CONFIDENTIAL

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE
ALASKA OCS REGION

CONDITIONS OF APPROVAL TO DRILL FOR OIL OR GAS

OCS-Y 0871 Well No. 1

Send submittals to the Supervisor, District Office, at this address:

U.S. Dept. of Interior
Minerals Management Service
District Office
P.O. Box 101159
Anchorage, AK 99510

1. Submit the well's surface location as soon as the final surveyed location and the K.B. elevation have been determined, on Form 9-331, "Sundry Notices and Reports on Wells", in triplicate plus two public information copies, to the Supervisor, District Office. Specify the well location (latitude/longitude, distance from lease lines, Mercadian, Loran C), the location of each anchor, and the amount of chain and wire rope deployed. Notify the U.S. Coast Guard Office of Jurisdiction of the location for listing in the local notice to mariners.
2. Submit a daily drilling report until the final status of the well is established (one copy, no prescribed form) outlining the following: drilling depth, bottom hole location (if a directional well), mud weight, principal items of work done during the previous day (running casing, testing, coring, sidewall sampling, logging, etc.), zones of abnormal pressure, lost circulation, depth of kicks, other hole difficulties encountered.
3. Submit as soon as available one copy of all field prints of well logs and directional surveys. Submit mudlog and MWD log data on a daily basis as stated in the Shell Western E&P, Inc.'s letter of September 26, 1985, (Security Procedures for OCS-Y 0871).
4. Submit as soon as available but no later than 30 days after completion of the well, three copies (two blue-line and one sepia) of all final well logs including composite mud logs and MWD logs if run; two copies of the composite directional surveys, and one copy of the digitized magnetic well log tapes if run or prepared.
5. Submit within 30 days of completion of the well, two copies (plus two public information copies) of a Completion Report (Form 9-330) and a Well Summary Report. Note all occurrences of oil, gas, sulfur, and other minerals of potential geological interest on the Completion Report, including all important zones of porosity and contents thereof; cored intervals; and complete details of all drill stem or formation tests. Identify rock units in time-stratigraphic terms showing, the depths to the tops of the

Upper Pliocene, Middle Pliocene, Lower Pliocene, Upper Miocene, Middle Miocene, etc., on the Completion Report or on a marked electric log.

6. Submit a written notification (Sundry Notice, Form 9-331, in triplicate, plus two public information copies), of intent to change any approved plan of operations for approval. Emergency approval may be obtained verbally, but must be followed by the written notice.

A subsequent report for the casing string run is to be furnished on Form 9-331 for each string of casing run. When a leak-off test is performed at the casing shoe, furnish the results along with the casing report.

Applications for Approval to Abandon a Well shall be submitted in accordance with Subsections 1.1 and 1.2 of OCS Order No. 3.

7. Submit two copies of all well reports, geochemical analyses and core analyses as soon as available.
8. Submit as soon as available two copies of a paleontological identification report of all foraminifera, nannoplankton and/or palynomorphs by depth, if prepared, and two copies of velocity surveys, if run.
9. The Supervisor, District Office, will require sufficient time to examine well records before completion, suspension, or abandonment activities are commenced, or before approval of the proposed disposition of a well is granted.
10. Prior to coring or testing, notice will be given to the Minerals Management Service so that such operations may be witnessed if deemed necessary by the District Supervisor.

Submit a written notification (Sundry Notice, Form 9-331, in triplicate, plus two public information copies) of the intent to test. This notice should include:

- a. The current and anticipated condition of the well.
 - b. The sequence of proposed operations, the perforated test interval depths, the surface and subsurface equipment schematics, planned pressure testing of tubular and other equipment, plugging or isolating of perforated intervals, disposal produced gas or fluids, and any other pertinent information.
11. Submit two copies of field well test data within 48 hours of such tests. Two copies of the interpreted results of these tests should be submitted as soon as available.

12. Ship samples of all cores, representative cuts, unwashed bulk and washed (dry) ditch samples to the Minerals Management Service, Regional Supervisor, Offshore Resource Evaluation, 949 E. 36th Ave., Third Floor, Suite 316, Anchorage, AK 99508.
13. All operations shall be subject to inspection by Federal inspectors designated by the District Supervisor.
14. Maintain an emergency standby vessel/vehicle at all times during operations. No operations shall be conducted unless there is a standby vessel/vehicle within the immediate vicinity of the drilling unit but no farther away than 5 miles or 20 minutes steaming distance, whichever is less.
15. Should a well be successfully completed for production or recompleted for production in a new interval, this office must be notified when the well is placed in a producing status. Notification may be provided orally but must be confirmed in writing and received in this office no later than the fifth business day following the date on which the well is placed on production. Provide the following information with the notification:
 - a. Operator name.
 - b. Well name, number, and location.
 - c. Date well was placed on production.
 - d. The lease, communitized tract, or unit participating area to which the well's production is attributable.

Shell Western E&P Inc.



601 West Fifth Avenue • Suite 810
Anchorage, Alaska 99501

FILE

RECEIVED
Anchorage, Alaska

October 8, 1985

OCT 15 1985

REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

U. S. Department of the Interior
Minerals Management Service
Alaska OCS Region
ATTN Rodney Smith
P. O. Box 101159
Anchorage, Alaska 99510

Gentlemen:

SUBJECT: EXPLORER II SHEEN

On October 4, 1985, a ribbon-like sheen was noticed coming from the Explorer II by a Shell Western E&P Inc. (SWEPI) Foreman, Rick Fox. He immediately notified the MMS representative on board, Randy Howell, and then proceeded to notify the U. S. Coast Guard. The sheen was approximately 1/2 mile long and 2 1/2 feet wide. It was estimated that less than 1/2 gallon of oil escaped onto the surface of the water.

The spill was the result of an inadvertant discharge of oily washwater. Due to the layout of the rig, it is possible to discharge water from collection pits without first skimming off the oily washwater. A new rig hand was cleaning some pumps in the cement and mud rooms, and consequently oily washwater built up in the collection pits. The hand turned on the discharge pumps to drain the pits before removing the oily washwater and the sheen resulted.

The SWEPI Foremen organized a meeting on the rig to discuss possible corrective measures. The MMS representative, contractor representatives, and SWEPI personnel were present. It was decided that a sign should be placed above the washwater pump, detailing proper operating procedures. Additionally, it was agreed that a sump should be installed to make it easier to skim off the oily water prior to discharge.

These corrective measures were noted in the Notice of Non-Compliance which was submitted October 4, 1985.

Please direct further questions to Susan Brown at (907) 263-9613.

Very truly yours,

D. L. Yesland
Sr. Staff Environmental Engineer
Alaska Division

SBB/kka

JRA/2.1

Original to
0871 BB file

Make Copy for
1401-02 minor accident
file

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use Form MMS-331-C for such proposals.)

1. oil well gas well other Wildcat

2. NAME OF OPERATOR
Shell Western E & P Inc.

3. ADDRESS OF OPERATOR (Where form is completed)
601 W. Fifth Avenue, Suite 810; Anchorage, AK

4. LOCATION OF WELL (Report location in accordance with instructions* and Item 16.) 99501
AT SURFACE: x=584,246.081 y=7,802,334.601 UTM Zone 6
AT TOP PROD. INTERVAL:
AT TOTAL DEPTH:

15. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA REQUEST FOR APPROVAL TO:

- | | | | |
|-----------------------|--------------------------|-----------------------|--------------------------|
| ACIDIZE | <input type="checkbox"/> | SUBSEQUENT REPORT OF: | <input type="checkbox"/> |
| REPAIR WELL | <input type="checkbox"/> | | <input type="checkbox"/> |
| PULL OR ALTER CASING | <input type="checkbox"/> | | <input type="checkbox"/> |
| MULTIPLE COMPLETE | <input type="checkbox"/> | | <input type="checkbox"/> |
| CHANGE ZONES | <input type="checkbox"/> | | <input type="checkbox"/> |
| PERFORATE | <input type="checkbox"/> | | <input type="checkbox"/> |
| PERMANENT ABANDONMENT | <input type="checkbox"/> | | <input type="checkbox"/> |
| TEMPORARY ABANDONMENT | <input type="checkbox"/> | | <input type="checkbox"/> |
| ARTIFICIAL LIFT | <input type="checkbox"/> | | <input type="checkbox"/> |

(Other) Request approval for change of plans.

16. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of 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.)*

5. LEASE NO. <u>OCS Y-871</u>
6. AREA & BLOCK <u>NR 6-4 Block 678</u>
7. WELL NO. <u>OCS Y-871 #1</u>
8. UNIT AGREEMENT <u>N/A</u>
9. FIELD <u>Wildcat</u>
10. EXPLORATION <input checked="" type="checkbox"/> DEVELOPMENT <input type="checkbox"/>
11. ADJACENT STATE <u>Alaska</u>
12. API NO. <u>55-171-00002</u>
13. ELEVATIONS <u>RKB 39' DF</u>
14. WATER DEPTH <u>119'</u>

(NOTE: Report results of multiple completion or zone change on Form MMS-330.)

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SEP 3 1985

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RECEIVED
OCS DISTRICT OFFICE REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

AUG 30 1985

MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

Subsurface Safety Valve: Manu. and Type _____ Set @ _____ Ft.

17. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Division Operations Manager DATE 8-30-85

(This space for Federal or State office use)
APPROVED [Signature] TITLE DISTRICT SUPERVISOR DATE AUG 30 1985
CONDITIONS OF APPROVAL, IF ANY:

PUBLIC INFORMATION COPY

PUBLIC INFORMATION COPY

MONTHLY REPORT OF OPERATIONS
CORONA PROSPECT
OCS Y-871 #1

09-25-85	Move rig to location.
09-26-85	Prepare site.
09-27-85	Move off location.
09-28 - 09-30-85	Wait on ice because whale migration prohibited ice management.

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United States Department of the Interior

MINERALS MANAGEMENT SERVICE ALASKA OCS REGION

Mailing Address: P.O. Box 101159
Anchorage, AK 99510

NM:DO

16 JUL 1985

**PUBLIC FILE
COPY**

Shell Western E&P Inc.
Attn: Mr. G. J. Anderson
601 West Fifth Ave, Ste 8103
Anchorage, AK 99501

Gentlemen:

Your Application for Permit to Drill, OCS-Y 0871, Well No. 1, in Sale 87 Area of the Beaufort Sea, (copy enclosed), which was submitted May 17, 1985, with subsequent revisions, is hereby approved, subject to the following:

1. The attached "Conditions of Approval to Drill...".
2. All other applicable conditions required in the Exploration Plan approval letter of April 12, 1985.
3. Approval of the drill rig by the Minerals Management Service prior to spudding of the well, and Shell Western E&P Inc. submitting the Current American Bureau of Shipping Classification, U. S. Coast Guard Certificate of Inspection, or other appropriate classification, with operational limitations.

When the operation conditions reach the state specified as an "Alert 3", as defined in the "Critical Operations and Curtailment Plan", the recording frequency should be increased from every three hours to once an hour, and the data should be noted on the daily drilling reports.

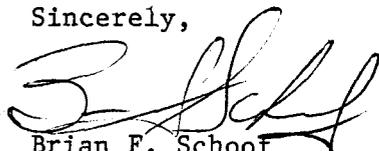
The possibility of abnormally pressured, gas charged sediments occurring at this location cannot be ruled out. Although your "Contingency Plan for Handling Shallow Gas Flows" and your Well Program should adequately handle the possible occurrence of gas, caution is advised.

Shell Western E&P Inc., Attn: G. Anderson, Anchorage, AK 99501

2

This well has been designated API No. 55-171-00002.

Sincerely,



Brian F. School
Supervisor, District Office
Field Operations

Enclosure (1)

cc: Dave Yesland, Shell Western E&P Inc., 601 W. 6th Ave. Ste 810,
Anchorage, AK 99501

**PUBLIC FILE
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UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE
ALASKA OCS REGION

PUBLIC FILE
COPY

CONDITIONS OF APPROVAL TO DRILL FOR OIL OR GAS

OCS-Y 0871 Well No. 1

Send submittals to the Supervisor, District Office, at this address:

U.S. Dept. of Interior
Minerals Management Service
District Office
P.O. Box 101159
Anchorage, AK 99510

1. Submit the well's surface location as soon as the final surveyed location and the K.B. elevation have been determined, on Form 9-331, "Sundry Notices and Reports on Wells", in triplicate plus two public information copies, to the Supervisor, District Office. Specify the well location (latitude/longitude, distance from lease lines, Mercadian, Loran C), the location of each anchor, and the amount of chain and wire rope deployed. Notify the U.S. Coast Guard Office of Jurisdiction of the location for listing in the local notice to mariners.
2. Submit a daily drilling report until the final status of the well is established (one copy, no prescribed form) outlining the following: drilling depth, bottom hole location (if a directional well), mud weight, principal items of work done during the previous day (running casing, testing, coring, sidewall sampling, logging, etc.), zones of abnormal pressure, lost circulation, depth of kicks, other hole difficulties encountered.
3. Submit as soon as available one copy of all field prints of well logs, directional surveys, and preliminary well test data. Submit mud logs on a weekly basis.
4. Submit as soon as available but no later than 30 days after completion of the well, three copies (two blue-line and one sepia) of all final well logs including composite mud logs; two copies of the composite directional surveys.
5. Submit within 30 days of completion of the well, two copies (plus two public information copies) of a Completion Report (Form 9-330) and a Well Summary Report. Note all occurrences of oil, gas, sulfur, and other minerals of potential geological interest on the Completion Report, including all important zones of porosity and contents thereof; cored intervals; and complete details of all drill stem or formation tests. Identify rock units in time-stratigraphic terms showing, the depths to the tops of the

Upper Pliocene, Middle Pliocene, Lower Pliocene, Upper Miocene, Middle Miocene, etc., on the Completion Report or on a marked electric log.

6. Submit a written notification (Sundry Notice, Form 9-331, in triplicate, plus two public information copies), of intent to change any approved plan of operations for approval. Emergency approval may be obtained verbally, but must be followed by the written notice.

A subsequent report for the casing string run is to be furnished on Form 9-331 for each string of casing run. When a leak-off test is performed at the casing shoe, furnish the results along with the casing report.

Applications for Approval to Abandon a Well shall be submitted in accordance with Subsections 1.1 and 1.2 of OCS Order No. 3.

7. Submit two copies of all well reports, geochemical analyses and core analyses as soon as available.
8. Submit as soon as available two copies of a paleontological identification report of all foraminifera, nannoplankton and/or palynomorphs by depth, if prepared, and two copies of velocity surveys, if run.
9. The Supervisor, District Office, will require sufficient time to examine well records before completion, suspension, or abandonment activities are commenced, or before approval of the proposed disposition of a well is granted.
10. Before coring or testing, notice will be given to the Minerals Management Service so that such operations may be witnessed.
11. Ship samples of all cores, representative cuts, unwashed bulk and washed (dry) ditch samples to the Minerals Management Service, Regional Supervisor, Offshore Resource Evaluation, 949 E. 36th Ave., Third Floor, Suite 316, Anchorage, AK 99508.
12. All operations shall be subject to inspection by Federal inspectors designated by the District Supervisor.
13. Maintain an emergency standby vessel/vehicle at all times during operations. No operations shall be conducted unless there is a standby vessel/vehicle within the immediate vicinity of the drilling unit but no farther away than 5 miles or 20 minutes steaming distance, whichever is less.

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COPY**

14. Should a well be successfully completed for production or recompleted for production in a new interval, this office must be notified when the well is placed in a producing status. Notification may be provided orally but must be confirmed in writing and received in this office no later than the fifth business day following the date on which the well is placed on production. Provide the following information with the notification:

- a. Operator name.
- b. Well name, number, and location.
- c. Date well was placed on production.
- d. The lease, communitized tract, or unit participating area to which the well's production is attributable.

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SALE 87
UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY
INDIVIDUAL WELL RECORD
OUTER CONTINENTAL SHELF OPERATIONS

Area Beaufort Sea
Block 678
Lease No. OCS-Y 0871
Unit Area NA
Well No. 1
API No. 55-171-00002

Date January 14, 1988

Field Wildcat Adj. State Alaska Water Depth 116'
RKB to Ocean Floor 154.4
RKB to WL 38.4

Lessee _____ Type of Lease, Sec. NA

Operator Shell Western E&P, Inc.

UTM Zone 6 Lat: 70° 18' 52.67" N
SURFACE LOCATION Long: 144° 45' 32.90" W BOTTOM-HOLE
Lambert Grid: Lambert Grid:
X = 584,246.081m Y = 7,802,334.601m X = _____ Y = _____
Area _____ Block _____ Area _____ Block _____
_____ feet from (north) (south) line _____ feet from (north) (south) line
_____ feet from (east) (west) line _____ feet from (east) (west) line

Drilling Rig Name and Type Carmar Explorer II (Drillship)

Drilling Approved 7/16/85 Drilling Ceased 9/8/86

Drilling Commenced 7/28/86 Completion Date 9/18/86

Meas. Depth 10,000 Vert. Depth 10,000 Plugged Back Depth 230'

Completion Status Temporary Abandoned S.R.A. Approved 1/14/88

Prod. Interval #1 Interval Perf.
Initial Prod.: Choke Press. BOPD BWPD MCF/D GOR GR.
_____ / _____

Prod. Interval #2 Interval Perf.
Initial Prod.: Choke / Press. BOPD BWPD MCF/D GOR GR.
_____ / _____

Prod. Interval #3 Interval Perf.
Initial Prod.: Choke Press. BOPD BWPD MCF/D GOR GR.
_____ / _____

Changes in Well Status Formation, Depth, Production, Etc.
Date _____ From _____ To **AREA** Rec'd. APD MMS-331C 5/17/85
Rec'd CR MMS-330 1/7/87

FILE 6B-2

UNITED STATES
DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

5. LEASE/PERMIT NO.
~~OS 2182~~ **OCS-Y0871**

6. AREA & BLOCK
NR 6-4 Block 678

7. WELL NO.
OCS Y-871 #1

8. UNIT AGREEMENT
N/A

9. FIELD
Wildcat

10. EXPLORATORY DEVELOPMENT

11. ADJACENT STATE
Alaska

1a. TYPE OF WORK
DRILL DEEPEN PLUG BACK

b. TYPE OF WELL
OIL WELL GAS WELL OTHER Wildcat SINGLE ZONE MULTIPLE ZONE

2. NAME OF OPERATOR
Shell Western E & P, Inc.

3. ADDRESS OF OPERATOR (Where form is completed)
601 West Fifth Avenue, Suite 810; Anchorage, Ak 99501

4. LOCATION OF WELL (Report location in accordance with instructions*)
At surface UTM Zone 6 x=584,246.081M y=7,802,334.601M
At proposed prod. zone

12. DISTANCE IN MILES AND DIRECTION FROM NEAREST ONSHORE POINT OF DEPARTURE
24 miles WNW of Barter Island

13. NO. OF ACRES IN LEASE
5693.29

14. DISTANCE FROM PROPOSED LOCATION TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.
N/A

15. PROPOSED DEPTH
MD 12,000' TVD same

16. RIG NAME & TYPE
Explorer II (Drill ship)

17. ELEVATIONS (Show whether DF or RKB)
39' RKB

18. WATER DEPTH
119'

19. APPROX. DATE WORK WILL START*
September 20, 1985

20. PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE AND GRADE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	QUANTITY OF CEMENT (CU. FT.)

RECEIVED
Anchorage, Alaska

JUL 17 1985

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RECEIVED SUPERVISOR
OCS DISTRICT OFFICE
MINERALS MANAGEMENT SERVICE
MAY 17 1985
MINERALS MANAGEMENT SERVICE
ANCHORAGE, ALASKA

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: GIVE BLOWOUT PREVENTER PROGRAM AND MUD PROGRAM OR ATTACH DRILLING PROGNOSIS CONTAINING INFORMATION REQUIRED BY OCS ORDERS.

21. SIGNED [Signature] TITLE Sr. Staff Environmental Engineer DATE 5-16-85

(This space for Federal or State office use)

APR PERMIT NO. 55-171-00003 APPROVAL DATE _____

APPROVED BY [Signature] TITLE DISTRICT SUPERVISOR DATE 16 JUL 1985

CONDITIONS OF APPROVAL IS SUBJECT TO THE ATTACHED REQUIREMENTS AND IS GOOD THRU 16 JAN 1987 • AFTER THIS DATE, THIS APPROVAL IS NULL AND VOID AND PRIOR TO COMMENCING THE OPERATIONS THE APD MUST BE RESUBMITTED UNLESS PRIORITY APPROVAL IS GRANTED IN WRITING.

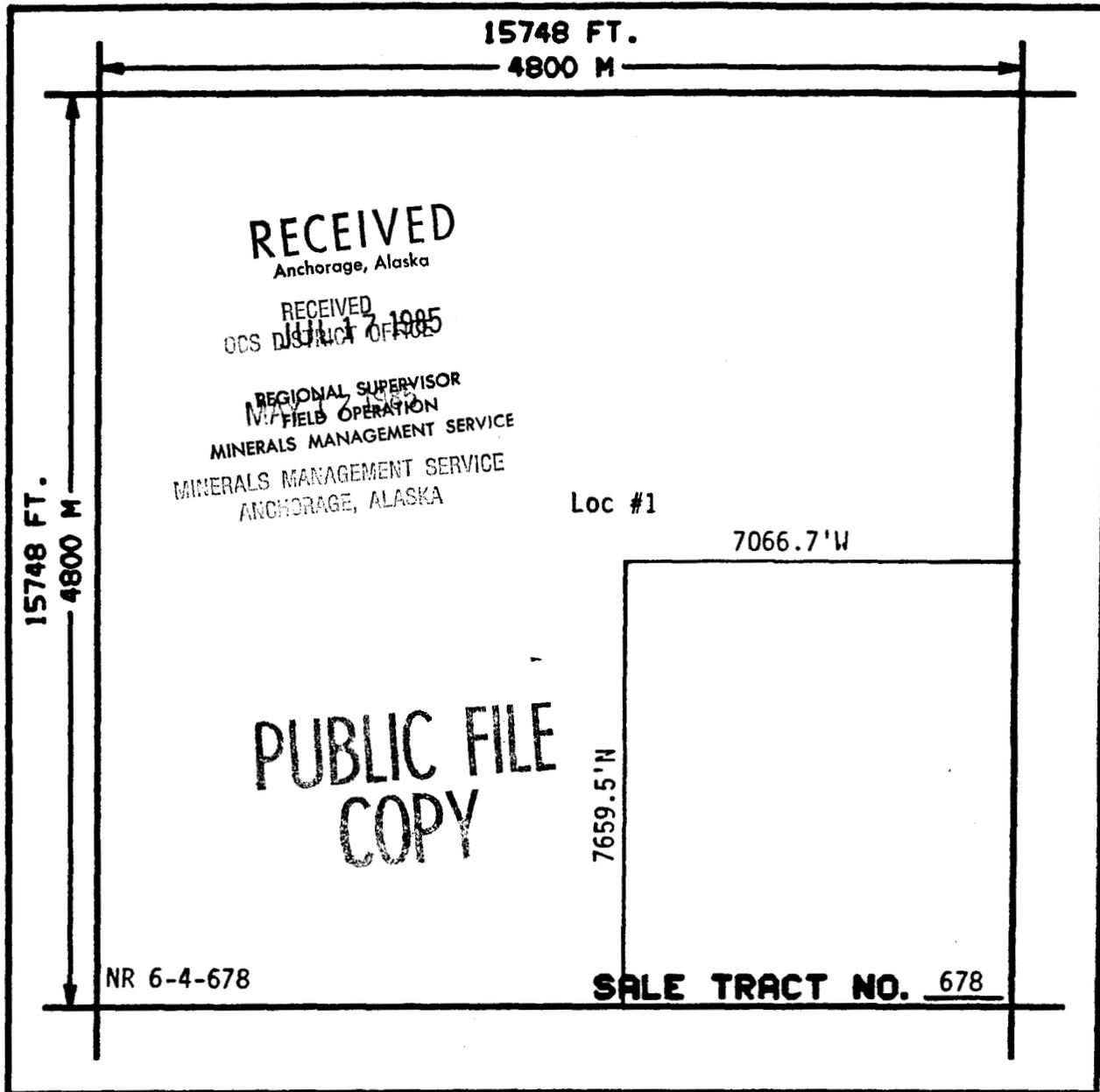
PUBLIC INFORMATION COPY

WELL LOCATION PLAT

FIELD NAME: _____

PROSPECT NAME: CORONA

WELL: NO. 1 OCS LEASE: OCS Y-871



WELL LOCATION:

UTM ZONE 6 X = 584,246.081 M Y = 7,802,334.601 M

AK STATE ZONE 3 X = 653,139.227 FT. Y = 5,966,192.975 FT.

LONGITUDE 144° 45' 31.64"W LATITUDE 70° 18' 52.56"N

I HEREBY CERTIFY THAT THE ABOVE PLAT IS A CORRECT REPRESENTATION OF THE FEDERAL OCS MINERALS LEASE NO. OCS-Y-0871 AND THAT THE PERMITTED LOCATION FOR THE DRILLING WELL NO. 1 ON THAT LEASE WILL BE AS STATED ON THIS PLAT

Steve Zigan
GEOLOGIST

Shell Western E&P Inc.



601 West Fifth Avenue • Suite 810
Anchorage, Alaska 99501

FILE

RECEIVED
Anchorage, Alaska

October 8, 1985

OCT 15 1985

U. S. Department of the Interior
Minerals Management Service
Alaska OCS Region
ATTN Rodney Smith
P. O. Box 101159
Anchorage, Alaska 99510

REGIONAL SUPERVISOR
FIELD OPERATION
MINERALS MANAGEMENT SERVICE

Gentlemen:

SUBJECT: EXPLORER II SHEEN

On October 4, 1985, a ribbon-like sheen was noticed coming from the Explorer II by a Shell Western E&P Inc. (SWEPI) Foreman, Rick Fox. He immediately notified the MMS representative on board, Randy Howell, and then proceeded to notify the U. S. Coast Guard. The sheen was approximately 1/2 mile long and 2 1/2 feet wide. It was estimated that less than 1/2 gallon of oil escaped onto the surface of the water.

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Please direct further questions to Susan Brown at (907) 263-9613.

Very truly yours,

D. L. Yesland
Sr. Staff Environmental Engineer
Alaska Division

SBB/kka

JRA/2.1

Original to
0871 BB file

Make Copy for
1401-02 minor accident
file

cc:

U. S. Department of the Interior
Minerals Management Service
Alaska OCS Region
ATTN Brian Schoof
P. O. Box 101159
Anchorage, Alaska 99510

U. S. Coast Guard
Marine Safety Branch
701 "C" Street, Box 17
Anchorage, Alaska 99513