Submit ORIGINAL

OMB control Number 1010-0141 OMB Approval Expires 8/31/2008

WELL ACTIVITY REPORT

BEGINNING DATE:	ENDING DATE:
REPORT IS NOT	TO EXCEED 7 DAYS (1 WEEK) IN DURATION

	RRE	CTIC	N		CHE	CK	IF TH	HIS IS	THE L	AST W	ELL	ACT	VITY	REPORT	
						G	ENE	RAL IN	IFORM	IATION	1				
1. API WELL N	2. OPERATOR NAME 6. CONTACT NAME / CONTACT TELEPHONE NUMBER /														
3. WELL NAME 4. SIDETRACK NO. 5. BYPASS NO.								NO.	6. CONTACT NAME / CONTACT TELEPHONE NUMBER / CONTACT E-MAIL ADDRESS						MBER /
7. RIG NAME	IG NAME OR PRIMARY UNIT (e.g., wireline unit, coil tubing unit, etc.) 8. WATER DEPTH (surveyed) (ft) 9. ELEVATION AT KB (Surveyed) (ft)														
				10	0. Cl	JRRI	ENT	WELL	BORE	INFOR	MAT	ION			
		SUI	RFAC	CE							В	OTT	OM		
LEASE NO.	AR	EA NA	AME		BLOC	K NO.		L	EASE N						
WELLBORE		ART ATE	TD C	DATE	STATUS	END	DATE	KOP (MD)	MD	TVD	MW PPG		T BOP DATE		OP TEST SSURE
					SU.									LOW	HIGH
				11.	WE	LLB	ORE	HISTO	RICAI	L INFO	RMA	TIOIT	1		•
WELLBORE	вотт	「OM L	EASE	STA	ART D	ATE	TD	DATE	PA [DATE	F	INAL N	ИD	FINA	AL TVD

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			IXEI OIXI							
			12. C	ASING /	LINER / TU	JBING R	ECORD			
TUBULAR TYPE	SIZE	SIZE (IN)	WEIGHT (#/ft)	GRADE	TEST PRESSURE	SHOE TEST	SETTING I	DEPTH (MD)	CEMENT QUANTITY (cubic ft.)	
	(IN)	(114)			(psi)	(EMW)	TOP	BOTTOM	(cubic n.)	
					ACTIVITY					
			Pro	vide a dail	y summary o	of well act	ivities.			
										
				14. Օլ	oen Hole L	og Data				
			ce's Technical Da y Report if any of						Form MMS-133S) to	
					conditions na	ve occurre	u ioi tilis we	inbore during	tilis period.	
	· <u></u>		ving have occurred							
			gs (Report when							
			rectionals (Repor	_	-					
	▼ Velo	city Su	ırveys, VSP's, Co	nventional	Cores, Rotary	and Percu	ission Sidew	all Cores (Re	eport when acquired)	
	≬ Com	pleted	MWD/LWD logs	and Mudloc	ıs - (Report wi	hen thev ar	e completed	1.)		
		-	ntological and Ge	_		-	-	-	tion of Borehole)	
	· · · · · · · · · · · · · · · · · · ·	i dico	mological and Co	oonemou.	oumpies dog	uncu ioi ui	iaiyolo (Nepi	ort at comple	tion of Boronole,	
	Any of the	above	have occurred; if o	hecked ther	submit Form	MMS-133S.				
				15. Sigi	nificant We	ell Event	S			
Please ch	neck as ma	ny ev	ents from the lis	st below:						
	Kick Occur	rence			☐ Well Co	ontrol Equip	ment Failure			
	Shallow Wa	ater Flo	ow		☐ H ₂ S En	counter				
	Weather ar	nd Oce	anographic Condit	ions	☐ New Te	echnology F	ailure			
	General Ri	g Equip	oment Failure		☐ Stuck F	Pipe				
	Lost Return	าร			☐ Wellbo	re Integrity F	- ailure			
	Station Kee	eping F	ailure		☐ Other					

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Please provide narrative information with regards to any significant events. Provide attachments, if necessary.

PAPERWORK REDUCTION ACT OF 1995 (PRA) STATEMENT: The PRA (44 U.S.C. 3501 et seq.) requires us to inform you that we collect this information to obtain knowledge of equipment and procedures to be used in drilling operations. MMS uses the information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operations. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.196. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for forms MMS-133 and MMS-133S is estimated to average between 0.5 - 3 hours per response, depending on whether it is a paper submittal or electronic submittal. This includes the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, NW, Washington, DC 20240.