

UNITED STATES DEPARTMENT OF THE INTERIOR
MINERALS MANAGEMENT SERVICE
GULF OF MEXICO REGION
ACCIDENT INVESTIGATION REPORT

1. OCCURRED

DATE: 03-AUG-2005 TIME: 0100 HOURS

2. OPERATOR: BP Exploration & Production Inc.

REPRESENTATIVE: Susan Wilson

TELEPHONE: (281) 366-0969

3. LEASE: G16806

AREA: GC LATITUDE: 27.1556577

BLOCK: 821 LONGITUDE: -90.4954773

4. PLATFORM:

RIG NAME T.O. MARIANAS

5. ACTIVITY: EXPLORATION(POE)

DEVELOPMENT/PRODUCTION (DOCD/POD)

6. TYPE: FIRE

EXPLOSION

BLOWOUT

COLLISION

INJURY NO. _____

FATALITY NO. _____

POLLUTION

OTHER _____

7. OPERATION: PRODUCTION

DRILLING

WORKOVER

COMPLETION

MOTOR VESSEL

PIPELINE SEGMENT NO. _____

OTHER _____

8. CAUSE: EQUIPMENT FAILURE

HUMAN ERROR

EXTERNAL DAMAGE

SLIP/TRIP/FALL

WEATHER RELATED

LEAK

UPSET H2O TREATING

OVERBOARD DRILLING FLUID

OTHER weather related

9. WATER DEPTH: 3944 FT.

10. DISTANCE FROM SHORE: 138 MI.

11. WIND DIRECTION: SW

SPEED: 9 M.P.H.

12. CURRENT DIRECTION: NNE

SPEED: 2 M.P.H.

13. SEA STATE: 2 FT.

16. OPERATOR REPRESENTATIVE/
SUPERVISOR ON SITE AT TIME OF INCIDENT:

Bill Daugherty

CITY: Houston

STATE: TX

TELEPHONE: (281) 366-2000

CONTRACTOR: Transocean Offshore

CONTRACTOR REPRESENTATIVE/
SUPERVISOR ON SITE AT TIME OF INCIDENT:

Ken Brown

CITY: Houston

STATE: TX

TELEPHONE: (832) 587-8500

17. DESCRIBE IN SEQUENCE HOW ACCIDENT HAPPENED:

Drilling operations were temporarily suspended due to loop currents. Synthetic base mud was being conditioned and circulated through the boost line. During the operation, a loss of volume was noticed when the returns were not equal to the circulating volume. At this moment, circulation was shut down and a pressure test was performed. After the test failed, the boost line was displaced with saltwater.

18. LIST THE PROBABLE CAUSE(S) OF ACCIDENT:

No failure point could be found after the BOP and riser were brought to surface. However, BP will change their procedures in order to prevent a possible future failure. The boost line will be pressure tested prior to circulation.

19. LIST THE CONTRIBUTING CAUSE(S) OF ACCIDENT:

none

21. PROPERTY DAMAGED:

none

NATURE OF DAMAGE:

n/a

ESTIMATED AMOUNT (TOTAL):

\$

22. RECOMMENDATIONS TO PREVENT RECURRENCE NARRATIVE:

none

23. POSSIBLE OCS VIOLATIONS RELATED TO ACCIDENT: **NO**

24. SPECIFY VIOLATIONS DIRECTLY OR INDIRECTLY CONTRIBUTING. NARRATIVE:

none

25. DATE OF ONSITE INVESTIGATION:

26. ONSITE TEAM MEMBERS:

Amy Gresham /

29. ACCIDENT INVESTIGATION

PANEL FORMED: **NO**

OCS REPORT:

30. DISTRICT SUPERVISOR:

Michael J. Saucier

APPROVED

DATE: **26-OCT-2005**

POLLUTION ATTACHMENT

1. VOLUME: GAL 6.5 BBL
YARDS LONG X YARDS WIDE

APPEARANCE: **DARK BROWN**

2. TYPE OF HYDROCARBON RELEASED: OIL
 DIESEL
 CONDENSATE
 HYDRAULIC
 NATURAL GAS
 OTHER Synthetic base mud

3. SOURCE OF HYDROCARBON RELEASED: **Boost line**

4. WERE SAMPLES TAKEN? **NO**

5. WAS CLEANUP EQUIPMENT ACTIVATED? **NO**

IF SO, TYPE: SKIMMER
 CONTAINMENT BOOM
 ABSORPTION EQUIPMENT
 DISPERSANTS
 OTHER _____

6. ESTIMATED RECOVERY: GAL BBL

7. RESPONSE TIME: HOURS

8. IS THE POLLUTION IN THE PROXIMITY OF AN ENVIRONMENTALLY SENSITIVE AREA (CLASS I)? **NO**

9. HAS REGION OIL SPILL TASK FORCE BEEN NOTIFIED? **NO**

10. CONTACTED SHORE: **NO** IF YES, WHERE:

11. WERE ANY LIVE ANIMALS OBSERVED NEAR: **NO**

12. WERE ANY OILED OR DEAD ANIMALS OBSERVED NEAR SPILL: **NO**