

WELL POTENTIAL TEST REPORT (WPT)

1. <input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> CORRECTION	4. LEASE NO. G01241	3. WELL NO. CA006 ST02BP00	2. API NO. (with Completion Code) 177154005702-S04	11. OPERATOR NAME and ADDRESS (Submitting Office) Arena Offshore, LP 2103 Research Forest Drive, Suite 200 The Woodlands, Texas 77380		
8. FIELD NAME ST 52	5. AREA NAME ST	6. BLOCK NO. 52	50. RESERVOIR NAME 7600 B			
88. TYPE OF REQUEST <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> RECOMPLETION <input type="checkbox"/> REWORK <input type="checkbox"/> RECLASSIFICATION <input type="checkbox"/> REESTABLISH	89. ATTACHMENTS PER §§ 250.1151(a) and 250.1167 LOG SECTION RESERVOIR STRUCTURE MAP OTHER _____	7. OPD NO. LA6	10. BSEE OPERATOR NO. 02628	43. DATE OF FIRST PRODUCTION 20210708		
		9. UNIT NO. N/A	90. RESERVOIR CLASSIFICATION <input type="checkbox"/> SENSITIVE <input checked="" type="checkbox"/> NONSENSITIVE			
WELL TEST						
92. DATE of TEST 20210726	93. PRODUCTION METHOD FL	94. TYPE OF WELL <input checked="" type="checkbox"/> OIL <input type="checkbox"/> GAS	95. HOURS TESTED 24	96. CHOKE SIZE (Test) 96	97. PRETEST TIME 24	
98. CHOKE SIZE (Pretest) 96	99. SHUT-IN WELLHEAD PRESSURE (Gas wells only)	100. FLOWING TUBING PRESSURE 114		101. STATIC BHP (Omit on Public Info. Copy)		
102. LINE PRESSURE (Gas wells only)		103. TOP PERFORATED INTERVAL (md) 9078'		104. BOTTOM PERFORATED INTERVAL (md) 9090'		
TEST PRODUCTION - 24 HOUR RATES						
105. OIL (BOPD) 157	106. GAS (MCFPD) 235	107. WATER (BWPD) 557	108. API @ 14.73 PSI & 60° F 36	109. SP GR GAS @ 14.73 PSI & 60° F 0.6494		
115. OTHER ACTIVE COMPLETIONS IN RESERVOIR (Continue in Remarks or attach an additional sheet if necessary.)						
LEASE NO.	WELL NAME	API WELL NO.	LEASE NO.	WELL NAME	API WELL NO.	
1. G01241	ST 52 CA004	17-715-40044-00-S02	5.			
2. G01241	ST52 003	17-715-20140-03-S01	6.			
3.			7.			
4.			8.			
91. REQUESTED MAXIMUM PRODUCTION RATE (MPR) (Required only for Pacific and Alaska OCS Regions.)						
26. CONTACT NAME Kathi Gamiotea			27. CONTACT TELEPHONE NO. 281-210-0540	32. CONTACT E-MAIL ADDRESS kgamiotea@arenaoffshore.com		
28. AUTHORIZING OFFICIAL (Type or print name) Kathi Gamiotea			29. TITLE Regulatory Specialist			
30. AUTHORIZING SIGNATURE <i>Kathi Gamiotea</i>			31. DATE 20210817			
THIS SPACE FOR BSEE USE ONLY REQUESTED MPR <input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED (Pacific and Alaska OCS Regions)						
BSEE AUTHORIZING OFFICIAL				EFFECTIVE DATE		

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116. REMARKS

CERTIFICATION: I certify that the information submitted is complete and accurate to the best of my knowledge. I understand that making a false statement may subject me to the criminal penalties of 18 U.S.C. 1001.

Name and Title: Kathi Gamiotea/ Regulatory Specialist Date: 20210817

PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*) requires us to inform you that this information is collected to implement the various environmental provisions of the OCS Lands Act. We use the information to determine well, lease, and field producing capability and serves as the basis for approving maximum production rates for certain oil and gas completions. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.197. 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 of this form is estimated to average 3 hours per response, including the time the geologists need to prepare the map, 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 the this form to the Information Collection Clearance Officer, Bureau of Safety and Environmental Enforcement, 381 Elden Street, Herndon, VA 20170.