

Application for Permit to Modify (APM)
 Form MMS-124 - Electronic Version

| | | | | | | |
|---|----------------|---|------------------------|--|--------------|-------------------------|
| Lease G22939 | Area GC | Block 300 | Well Name SS004 | ST 05 | BP 00 | Type Development |
| Application Status Approved | | Operator 01819 ATP Oil & Gas Corporation | | | | |
| Pay.gov Amount: \$116.00 | | Agency Tracking ID: EWL-APM-137896 | | Pay.gov Tracking ID: 254S2TN9 | | |
| General Information | | | | | | |
| API 608114045007 | | Approval Dt 03-NOV-2011 | | Approved By Bryan Domangu | | |
| Submitted Dt 03-NOV-2011 | | Well Status Approved St/Bp | | Water Depth 3452 | | |
| Surface Lease G15571 | | Area GC | | Block 299 | | |
| Approval Comments | | | | | | |
| All comments stated apply unless a waiver is approved and documented. Any verbal approval given should be documented in the rig's daily report and WAR. | | | | | | |
| All operations must be conducted in accordance with the OCS Lands Act (OCSLA), lease terms and stipulations, 30 CFR Part 250, NTLs, approved APM, and any orders of the District Manager. This Permit is subject to any applicable conditions stated in the previous approval(s) for this well as well as recognizes those applicable attachments accepted in previous approval(s). | | | | | | |
| Submit (on a weekly basis) an activity report to the appropriate BOEMRE GOMR District Office in the timeframe specified in NTL No. 2009-G20. Use Form MMS-133, Well Activity Report (WAR), to make this progress report. On the final Well Activity Report, indicate the status of the well and the date you finished such operations. | | | | | | |
| Submit the following to the appropriate BOEMRE GOMR District Office no later than 30 days after you finish the work: | | | | | | |
| a. Form MMS-125, End of Operations Report (EOR), whenever you workover, complete, recomplete, temporary abandon, and/or permanent plug the well. | | | | | | |
| b. A current downhole wellbore schematic showing the status and condition of the well at the time you finished operations, including the location of all casings, cemented intervals (including top of cement), perforated zones, completion equipment, isolation packers, alternate completions, tubing, landing nipples, and subsurface safety devices. | | | | | | |
| Correction Narrative | | | | | | |
| Permit Primary Type Completion | | | | | | |
| Permit Subtype(s) Initial Completion | | | | | | |
| Operation Description Initial Completion of the C. Mac Oil Sand | | | | | | |
| Procedural Narrative Please see attached Proposed Completion Procedure. | | | | | | |
| Subsurface Safety Valve Type Installed SCSSV Feet below Mudline 5520 | | | | | | |
| Shut-In Tubing Pressure (psi) 6045 | | | | | | |
| Rig Information | | | | | | |
| Name | Id | Type | ABS Date | Coast Guard Date | | |
| DIAMOND OCEAN VICTORY | 28524 | SEMISUBMERSIBLE | 30-NOV-2012 | 26-FEB-2012 | | |

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Blowout Preventers

| Preventer | Size | Working Pressure | --- Test Pressure --- | |
|-------------|-------|------------------|-----------------------|------|
| | | | Low | High |
| Rams | 18.75 | 15000 | 250 | 6600 |
| Annular | | 10000 | 250 | 3500 |
| Coil Tubing | | 10000 | 250 | 7000 |

Date Commencing Work (mm/dd/yyyy) 04-NOV-2011

Estimated duration of the operation (days) 35

Verbal Approval Information

| | |
|-----------------|--------------------------|
| Official | Date (mm/dd/yyyy) |
|-----------------|--------------------------|

Questions

| Number | Question | Response | Response Text |
|--------|--|----------|---------------|
| 1 | Is H2S present in the well? If yes, then comment on the inclusion of a Contingency Plan for this operation. | NO | |
| 2 | Is this proposed operation the only lease holding activity for the subject lease? If yes, then comment. | NO | |
| 3 | Will all wells in the well bay and related production equipment be shut-in when moving on to or off of an offshore platform, or from well to well on the platform? If not, please explain. | N/A | |
| 4 | Are you downhole commingling two or more reservoirs? | NO | |
| 5 | Will the completed interval be within 500 feet of a lease or unit boundary line? If yes, then comment. | N/A | |
| 6 | For permanent abandonment, will casings be cut 15 feet below the mudline? If no, then comment. | N/A | |

ATTACHMENTS

| File Type | File Description |
|-----------|-----------------------------------|
| pdf | Casing Test Pressure Calculations |
| pdf | Log |
| pdf | Displacement Procedure |
| pdf | Coil Tubing BOP Schematic |
| pdf | Proposed Wellbore Schematic |
| pdf | Current Wellbore Schematic |
| pdf | Completion Procedure |
| pdf | BOP Test Pressure Calculations |
| pdf | BOP Schematic |

CONTACTS

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| CONTACTS | |
|----------------------------|--|
| Name | |
| Company | Jennifer Johnson |
| Phone Number | ATP Oil & Gas Corporation |
| E-mail Address | 713-403-5511 |
| Contact Description | jljohnson@atpog.com Regulatory Technician |

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 operation. 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 this form is estimated to average 11/4 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, N.W., Washington, DC 20240.