

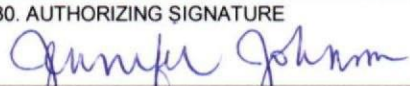
Aug 03 2010

**U.S. Department of the Interior**  
Bureau of Safety and Environmental  
Enforcement (BSEE)

Submit original plus two copies,  
with one copy marked "Public Information."

OMB Control Number 1014-0019  
OMB Approval Expires 01/31/19

## WELL POTENTIAL TEST REPORT (WPT)

1. <input checked="" type="checkbox"/> ORIGINAL <input type="checkbox"/> CORRECTION		4. LEASE NO. OCS-G 14342	3. WELL NO. A006 ST03BP01	2. API NO. (with Completion Code) 17-702-41108-04-S02		11. OPERATOR NAME and ADDRESS (Submitting Office) Arena Offshore, LP 4200 Research Forest Drive, Suite 230 The Woodlands, Texas 77381	
8. FIELD NAME WC543		5. AREA NAME WC	6. BLOCK NO. 544	50. RESERVOIR NAME 4600 Sand			
88. TYPE OF REQUEST <input checked="" type="checkbox"/> INITIAL <input 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. LA1B	10. BSEE OPERATOR NO. 02628	43. DATE OF FIRST PRODUCTION 20180618	
				9. UNIT NO. NA	90. RESERVOIR CLASSIFICATION <input type="checkbox"/> SENSITIVE <input checked="" type="checkbox"/> NONSENSITIVE		
<b>WELL TEST</b>							
92. DATE of TEST 20180725	93. PRODUCTION METHOD FL	94. TYPE OF WELL <input type="checkbox"/> OIL <input checked="" type="checkbox"/> GAS		95. HOURS TESTED 10	96. CHOKE SIZE (Test) 18.5	97. PRETEST TIME 10	
98. CHOKE SIZE (Pretest) 18.5	99. SHUT-IN WELLHEAD PRESSURE (Gas wells only) 935		100. FLOWING TUBING PRESSURE 360		101. STATIC BHP (Omit on Public Info. Copy)		
102. LINE PRESSURE (Gas wells only) 836		103. TOP PERFORATED INTERVAL (md) 5062'		104. BOTTOM PERFORATED INTERVAL (md) 4056'      5194			
<b>TEST PRODUCTION - 24 HOUR RATES</b>							
105. OIL (BOPD) 140	106. GAS (MCFPD) 593	107. WATER (BWPD) 0	108. API @ 14.73 PSI & 60°F 49.1		109. SP GR GAS @ 14.73 PSI & 60°F 0.6449		
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. NONE				5.			
2.				6.			
3.				7.			
4.				8.			
91. REQUESTED MAXIMUM PRODUCTION RATE (MPR) (Required only for Pacific and Alaska OCS Regions.)							
26. CONTACT NAME Jennifer Johnson				27. CONTACT TELEPHONE NO. 281-210-3174	32. CONTACT E-MAIL ADDRESS jennifer@arenaoffshore.com		
28. AUTHORIZING OFFICIAL (Type or print name) Jennifer Johnson				29. TITLE Regulatory Specialist			
30. AUTHORIZING SIGNATURE 				31. DATE 20180731			
<b>THIS SPACE FOR BSEE USE ONLY</b> REQUESTED MPR <input type="checkbox"/> ACCEPTED <input type="checkbox"/> REJECTED (Pacific and Alaska OCS Regions)							
BSEE AUTHORIZING OFFICIAL					EFFECTIVE DATE		

Public Copy

NOTED-SCHAEFER

**WELL POTENTIAL TEST REPORT (WPT)**

116. REMARKS

Gulf of Mexico OCS Region  
03 2018  
Resource Conservation Section

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: *Jennifer Johnson* Regulatory Specialist Date: 20180731

**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.