

FORM
5

Rev
02/08

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

DRILLING COMPLETION REPORT

Document Number:

400098917

This form is to be submitted within 30 days of the setting of production casing, the plugging of a dry hole, the deepening or sidetracking of a well, or any time the wellbore configuration is changed. If the well is deepened or sidetracked a new Form 5 is required. If an attempt has been made to complete/produce a well, then the operator shall submit Form 5A (Completed Interval Report.) If the well has been plugged, a form 6 (Well Abandonment Report) is required.

Completion Type Final completion Preliminary completion

1. OGCC Operator Number: 44645 4. Contact Name: Terry L. Hoffman
2. Name of Operator: JETTA OPERATING COMPANY INC Phone: (303) 250-0619
3. Address: 777 TAYLOR ST STE PI-D Fax: (303) 412-8212
City: FT WORTH State: TX Zip: 76102

5. API Number 05-061-06844-00 6. County: KIOWA
7. Well Name: GOLDMAN MELCHER FED Well Number: 1
8. Location: QtrQtr: SWNW Section: 6 Township: 18S Range: 52W Meridian: 6
Footage at surface: Direction: FNL Distance: 1607 Direction: FWL Distance: 745
As Drilled Latitude: 38.519044 As Drilled Longitude: 103.280459

GPS Data:

Data of Measurement: 12/21/2009 PDOP Reading: 2.2 GPS Instrument Operator's Name: Keith Westfall

** If directional footage

at Top of Prod. Zone Distance: _____ Direction: _____ Distance: _____ Direction: _____
Sec: _____ Twp: _____ Rng: _____
at Bottom Hole Distance: _____ Direction: _____ Distance: _____ Direction: _____
Sec: _____ Twp: _____ Rng: _____

9. Field Name: WILDCAT 10. Field Number: 99999

11. Federal, Indian or State Lease Number: COC73655

12. Spud Date: (when the 1st bit hit the dirt) 09/22/2010 13. Date TD: 09/29/2010 14. Date Casing Set or D&A: 09/29/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 3200 TVD _____ 17 Plug Back Total Depth MD _____ TVD _____

18. Elevations GR 4599 KB 4619

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

Logs will be submitted with Final Form 5

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	20	16	65	60	20	60	0
SURF	12+1/4	8+5/8	24	394	330	394	0

ADDITIONAL CEMENT

Cement work date: _____

Details of work: _____

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

Comment:

Prem. Form 5 due to sidetrack. Form 2 and form 4 submitted with sidetrack details. Upon reaching the permitted TD, a final form 5 will follow with final location plat and logs.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Terry L. Hoffman

Title: Permit Agent

Date: _____

Email: tlhoffman@q.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____

Director of COGCC

Date: _____