

FORM  
5Rev  
02/08

## State of Colorado

## Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

400332544

Date Received:

## DRILLING COMPLETION REPORT

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: 10267

4. Contact Name: Mathew Goolsby

2. Name of Operator: VECTA OIL &amp; GAS LTD

Phone: (303) 618-7736

3. Address: 575 UNION BLVD #208

Fax: (303) 945-2869

City: LAKEWOOD State: CO Zip: 80228

5. API Number 05-017-07719-00

6. County: CHEYENNE

7. Well Name: Belford

Well Number: 24-17

8. Location: QtrQtr: SESW Section: 17 Township: 13s Range: 47w Meridian: 6

Footage at surface: Distance: 686 feet Direction: FSL Distance: 1605 feet Direction: FWL

As Drilled Latitude: 38.911950 As Drilled Longitude: -102.699020

## GPS Data:

Date of Measurement: 10/04/2012 PDOP Reading: 2.4 GPS Instrument Operator's Name: Sally Pettibone

\*\* If directional footage at Top of Prod. Zone Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

\*\* If directional footage at Bottom Hole Dist.: feet. Direction: Dist.: feet. Direction:

Sec: Twp: Rng:

9. Field Name: WILDCAT

10. Field Number: 99999

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 09/04/2012 13. Date TD: 09/23/2012 14. Date Casing Set or D&amp;A: 09/25/2012

## 15. Well Classification:

☒ Dry ☐ Oil ☐ Gas/Coalbed ☐ Disposal ☐ Stratigraphic ☐ Enhanced Recovery ☐ Storage ☐ Observation

16. Total Depth MD 5671 TVD\*\* 17 Plug Back Total Depth MD 0 TVD\*\*

18. Elevations GR 4393 KB 4404

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:

AIT, LDT-CNL, ML, Caliper, Sonic Scanner, FMI

## 20. Casing, Liner and Cement:

## CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24	0	434	250	0	434	VISU

## STAGE/TOP OUT/REMEDIAL CEMENT

Cement work date:

Method used	String	Cementing tool setting/perf depth	Cement volume	Cement top	Cement bottom

Details of work:

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES					
FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
NIOBRARA	744	1,470	<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	1,852		<input type="checkbox"/>	<input type="checkbox"/>	
CHEYENNE	2,204	2,503	<input type="checkbox"/>	<input type="checkbox"/>	
MORRISON	2,503		<input type="checkbox"/>	<input type="checkbox"/>	
STONE CORRAL	3,192	3,228	<input type="checkbox"/>	<input type="checkbox"/>	
SHAWNEE	4,186		<input type="checkbox"/>	<input type="checkbox"/>	
HEEBNER	4,406	4,416	<input type="checkbox"/>	<input type="checkbox"/>	
LANSING-KANSAS CITY	4,462		<input type="checkbox"/>	<input type="checkbox"/>	
MARMATON	4,836		<input checked="" type="checkbox"/>	<input type="checkbox"/>	DST 2, log 4842-4930, straddle. Strong blow, rec 2175 W, 32k ppm. SIP 1213-1238.
CHEROKEE	4,958		<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	5,172	5,301	<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	5,301	5,488	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Core #1, log depth 5366-5427, rec 61.9 ft. DST #1, log 5377-5427, weak blow, died. Rec 15 M. SIP 26-38.
MORROW-KEYES	5,488	5,530	<input type="checkbox"/>	<input type="checkbox"/>	
SPERGEN	5,530		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: \_\_\_\_\_

Print Name: Mathew Goolsby

Title: VP- Operations

Date: \_\_\_\_\_

Email: matgoolsby@vecta-denver.com

### Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
400332660	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	Directional Survey **	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400332661	DST Analysis	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Logs	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Other	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
<u>Other Attachments</u>		
400332652	LAS-COMBINATION OPEN HOLE	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400332653	PDS-CALIPER	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400332654	PDS-INDUCTION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400332655	PDS-MICROLOG	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400332656	PDS-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400332658	PDS-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400332659	PDF-COMPOSITE	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

### General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)