

**FORM  
5**Rev  
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



DE ET OE ES

Document Number:

400354654

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 05-017-07718-00

6. County: CHEYENNE

7. Well Name: Maroon

Well Number: 24-20

8. Location: QtrQtr: 14 Section: 20 Township: 14s Range: 47w Meridian: 6

Footage at surface: Distance: 888 feet Direction: FSL Distance: 1499 feet Direction: FWL

As Drilled Latitude: 38.810930 As Drilled Longitude: -102.698210

## GPS Data:

Data of Measurement: 11/15/2012 PDOP Reading: 1.7 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) 11/09/2012 13. Date TD: 11/19/2012 14. Date Casing Set or D&amp;A: 11/20/2012

## 15. Well Classification:

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

16. Total Depth MD 5445 TVD\*\* 17 Plug Back Total Depth MD 0 TVD\*\*

18. Elevations GR 4242 KB 4253

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, BHC, Caliper, HiRes

## 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	265	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	
CARLILE	1,141		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	1,531		<input type="checkbox"/>	<input type="checkbox"/>	
CHEYENNE	1,850	2,145	<input type="checkbox"/>	<input type="checkbox"/>	
BLAINE	2,634		<input type="checkbox"/>	<input type="checkbox"/>	
STONE CORRAL	2,880	2,914	<input type="checkbox"/>	<input type="checkbox"/>	
HEEBNER	4,131		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING-KANSAS CITY	4,182	4,547	<input type="checkbox"/>	<input type="checkbox"/>	
MARMATON	4,547		<input type="checkbox"/>	<input type="checkbox"/>	
PAWNEE	4,609		<input checked="" type="checkbox"/>	<input type="checkbox"/>	DST #1, log 4603-4644. Times 15-30-60-90. 1st open 5.5". 2nd open BOB 55". Rec 80' SOGCMW, 120' SGCMW. SIP 1269-1256.
CHEROKEE	4,689		<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	4,917		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	5,046	5,270	<input type="checkbox"/>	<input type="checkbox"/>	
KEYES	5,270	5,313	<input type="checkbox"/>	<input type="checkbox"/>	
SPERGEN	5,313		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

1) No cores, one DST in the Pawnee Mbr of the Marmaton.

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>		
400354681	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"/>
400354679	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>		
400354667	LAS-COMBINATION OPEN HOLE	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400354670	PDF-SONIC	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400354671	PDF-CALIPER	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400354672	IND-DENS-NEU	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400354673	PDF-INDUCTION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400354674	PDF-MICROLOG	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400354675	PDF-DENSITY/NEUTRON	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400354677	PDF-TRIPLE COMBINATION	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400354678	PDF-COMPOSITE	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400354680	WELLBORE DIAGRAM	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)