

FORM
5Rev
09/14

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:

401979328

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

OGCC Operator Number: 10651

Contact Name: Heather Mitchell

Name of Operator: VERDAD RESOURCES LLC

Phone: (720) 845-6917

Address: 5950 CEDAR SPRINGS ROAD

Fax:

City: DALLAS State: TX Zip: 75235

API Number 05-123-46594-00

County: WELD

Well Name: BOYD

Well Number: 24-1H

Location: QtrQtr: NESW Section: 24 Township: 2N Range: 64W Meridian: 6

Footage at surface: Distance: 1445 feet Direction: FSL Distance: 2255 feet Direction: FWL

As Drilled Latitude: 40.120602 As Drilled Longitude: -104.501071

GPS Data:

Date of Measurement: 03/20/2019 PDOP Reading: 1.7 GPS Instrument Operator's Name: Brian Ketcher

** If directional footage at Top of Prod. Zone Dist.: 460 feet. Direction: FSL Dist.: 662 feet. Direction: FWL

Sec: 24 Twp: 2N Rng: 64W

** If directional footage at Bottom Hole Dist.: 431 feet. Direction: FNL Dist.: 522 feet. Direction: FWL

Sec: 13 Twp: 2N Rng: 64W

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 01/09/2019 Date TD: 02/27/2019 Date Casing Set or D&A: 03/01/2019

Rig Release Date: 03/08/2019 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 17361 TVD** 6778 Plug Back Total Depth MD 17226 TVD** 6778

Elevations GR 4942 KB 4966

Digital Copies of ALL Logs must be Attached per Rule 308A ☐

List Electric Logs Run:

MWD/LWD, CBL (RES on the 123-46822)

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
CONDUCTOR	24	16	65	0	80	70	0	80	VISU
SURF	13+1/2	9+5/8	36	0	1,734	790	0	1,734	VISU
1ST	8+1/2	5+1/2	20	0	17,356	2,214	17	17,356	CBL

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:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analysis must be submitted to COGCC)
	Top	Bottom	DST	Cored	
FOX HILLS BASE		1,000	NO	NO	
PARKMAN	4,324		NO	NO	
SUSSEX	4,675		NO	NO	
SHANNON	4,993		NO	NO	
SHARON SPRINGS	7,378		NO	NO	
NIOBRARA	7,455		NO	NO	

Comment:

No open hole resistivity log run on this well. The resistivity log was run on the Helen 24 -3H (123-46822). Approved APD and BMP requiring one well on a pad to be logged with open hole resistivity log with gamma ray.

Top of production zone footage calls are estimated and are based on being within the hardline and into our target production interval. When the well is completed, the form 5A will detail the actual footage calls at the top of the production zone.

Verdad runs a wet shoe sub which results in a wet shoe this allows us to pump down our first bridge plug with our first stage of guns. We do not stimulate through our shoe track. The bridge plug isolates everything downhole of the plug and the initial stage and first take point is up hole of our bridge plug and wet shoe sub and shoe track.

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

Signed: _____

Print Name: Heather Mitchell

Title: Regulatory Manager Date: _____ Email: regulatory@verdadoil.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
402032082	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
402033539	Directional Survey **	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	DST Analysis	Yes <input type="checkbox"/> No <input checked="" 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>		
402032066	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402032070	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402032072	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402033540	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
		Stamp Upon Approval

Total: 0 comment(s)

