

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



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DRILLING COMPLETION REPORT

Document Number:

400081980

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 05-009-06669-00 6. County: BACA
7. Well Name: VEDA TAYLOR Well Number: 1
8. Location: QtrQtr: SWNW Section: 10 Township: 35S Range: 43W Meridian: 6
Footage at surface: Direction: FNL Distance: 2400 Direction: FWL Distance: 660
As Drilled Latitude: 37.011660 As Drilled Longitude: -102.269160

GPS Data:

Data of Measurement: 07/22/2010 PDOP Reading: 2.0 GPS Instrument Operator's Name: Keith Westfall/High Prai

** 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: FEE

12. Spud Date: (when the 1st bit hit the dirt) 06/24/2010 13. Date TD: 07/03/2010 14. Date Casing Set or D&A: 07/05/2010

15. Well Classification:

Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 4810 TVD _____ 17 Plug Back Total Depth MD _____ TVD _____

18. Elevations GR 3712 KB 3723

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:

CMT HOLE VOL, AI-GR-SP, SONIC POROSITY, CNLD, MUD

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	36	20	94	76	175	76	0
SURF	12+1/4	8+5/8	24	1,522	555	1,522	0

ADDITIONAL CEMENT

Cement work date: _____

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	
MARMATON	3,674		<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	3,798		<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	4,008		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	4,390		<input type="checkbox"/>	<input type="checkbox"/>	
KEYES	4,672		<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: Terry L. Hoffman

Title: Permit Agent

Date: 8/4/2010

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: David S. Neslin Director of COGCC Date: 10/29/2010

Attachment Check List

Att Doc Num	Name	Doc Description
400081980	FORM 5 SUBMITTED	LF@2517247 400081980
400082069	CMT SUMMARY	LF@2517248 400082069
400082071	LAS-FORMATION MICRO SCAN	LF@2543257 400082071
400082072	LAS-PLATFORM EXPRESS	LF@2543258 400082072
400082078	LAS-PLATFORM EXPRESS	LF@2543259 400082078

Total Attach: 5 Files

General Comments

User Group	Comment	Comment Date
Engineer	Form 6 in beta test	10/28/2010 6:12:59 PM

Total: 1 comment(s)