

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

Document Number:
400194043

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
2. Name of Operator: VECTA OIL & GAS LTD
3. Address: 575 UNION BLVD #208
City: LAKEWOOD State: CO Zip: 80228
4. Contact Name: Mathew Goolsby
Phone: (303) 618-7736
Fax: (303) 945-2869

5. API Number 05-017-07705-00
6. County: CHEYENNE
7. Well Name: Torreys Well Number: 31-4
8. Location: QtrQtr: NW NE Section: 4 Township: 14s Range: 47w Meridian: 6
Footage at surface: Distance: 354 feet Direction: FNL Distance: 1623 feet Direction: FEL
As Drilled Latitude: 38.865750 As Drilled Longitude: -102.672720

GPS Data:
Data of Measurement: 08/12/2011 PDOP Reading: 2.3 GPS Instrument Operator's Name: Sally Pettibone

** If directional footage
at Top of Prod. Zone Distance: feet Direction: Distance: feet Direction:
Sec: Twp: Rng:
at Bottom Hole Distance: feet Direction: Distance: 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) 07/21/2011 13. Date TD: 08/02/2011 14. Date Casing Set or D&A: 08/03/2011

15. Well Classification:
 Dry Oil Gas/Coalbed Disposal Stratigraphic Enhanced Recovery Storage Observation

16. Total Depth MD 5530 TVD 17 Plug Back Total Depth MD 0 TVD

18. Elevations GR 4297 KB 4308
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 w/ ML, LDT/CNL, CVL (Schlumberger, Ft Morgan, CO)

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	437	250	0	437	VISU

ADDITIONAL CEMENT

Cement work date:
Details of work:

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

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	556		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	1,706		<input type="checkbox"/>	<input type="checkbox"/>	
CHEYENNE	2,034	2,322	<input type="checkbox"/>	<input type="checkbox"/>	
CEDAR HILLS	2,880	2,932	<input type="checkbox"/>	<input type="checkbox"/>	
STONE CORRAL	3,032	3,066	<input type="checkbox"/>	<input type="checkbox"/>	
SHAWNEE	4,080		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING-KANSAS CITY	4,314		<input type="checkbox"/>	<input type="checkbox"/>	
MARMATON	4,662		<input type="checkbox"/>	<input type="checkbox"/>	
PAWNEE	4,732		<input checked="" type="checkbox"/>	<input type="checkbox"/>	DST #1, 4752-75, rec 1394' MCW, SIP 1274-1267
FORT SCOTT	4,760		<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	4,810		<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	5,004		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	5,142	5,334	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Core #1, 5206-5255, recovered 46' shale and siltstone
KEYES	5,334		<input type="checkbox"/>	<input type="checkbox"/>	
ST LOUIS	5,348	5,372	<input type="checkbox"/>	<input type="checkbox"/>	
SPERGEN	5,372		<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

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: _____

Attachment Check List

Att Doc Num	Name
400196527	LAS-COMBINATION OPEN HOLE
400196529	PDF-COMPOSITE
400196530	PDF-CALIPER
400196531	PDF-MICROLOG
400196532	PDF-DENSITY/NEUTRON
400196533	PDF-INDUCTION
400196535	PDF-TRIPLE COMBINATION
400196536	CORE ANALYSIS
400196537	DST ANALYSIS
400196538	CEMENT JOB SUMMARY

Total Attach: 10 Files

General Comments

User Group

Comment

Comment Date

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

Total: 0 comment(s)