

**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:

400273936

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) 945-2860

City: LAKEWOOD State: CO Zip: 80228

5. API Number 05-017-07711-00

6. County: CHEYENNE

7. Well Name: Quandary

Well Number: 23-26

8. Location: QtrQtr: Lot 11 Section: 26 Township: 12s Range: 46w Meridian: 6

Footage at surface: Distance: 2014 feet Direction: FSL Distance: 2490 feet Direction: FWL

As Drilled Latitude: 38.975160 As Drilled Longitude: -102.529240

## GPS Data:

Date of Measurement: 05/02/2012 PDOP Reading: 2.2 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) 02/25/2012 13. Date TD: 03/19/2012 14. Date Casing Set or D&amp;A: 03/21/2012

## 15. Well Classification:

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

16. Total Depth MD 5910 TVD\*\* 17 Plug Back Total Depth MD 5910 TVD\*\*

18. Elevations GR 4562 KB 4573

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, 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	438	300	0	438	VISU

**STAGE/TOP OUT/REMEDIAL CEMENT**

Cement work date:

Method used	String	Cementing tool setting/pref 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	1,164		<input type="checkbox"/>	<input type="checkbox"/>	
DAKOTA	2,222		<input type="checkbox"/>	<input type="checkbox"/>	
CHEYENNE	2,544	2,870	<input type="checkbox"/>	<input type="checkbox"/>	
STONE CORRAL	3,528	3,564	<input type="checkbox"/>	<input type="checkbox"/>	
SHAWNEE	4,534		<input type="checkbox"/>	<input type="checkbox"/>	
LANSING-KANSAS CITY	4,790		<input type="checkbox"/>	<input type="checkbox"/>	
MARMATON	5,111		<input type="checkbox"/>	<input type="checkbox"/>	
PAWNEE	5,170		<input type="checkbox"/>	<input type="checkbox"/>	
FORT SCOTT	5,205		<input type="checkbox"/>	<input type="checkbox"/>	
CHEROKEE	5,258		<input type="checkbox"/>	<input type="checkbox"/>	
ATOKA	5,416		<input type="checkbox"/>	<input type="checkbox"/>	
MORROW	5,572	5,712	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	DST #1, 5578-5586, rec 5 ft mud, no shows. Core #1, 5601-5661, full recovery.
MORROW-KEYES	5,712		<input type="checkbox"/>	<input type="checkbox"/>	
ST LOUIS	5,720		<input type="checkbox"/>	<input type="checkbox"/>	
SPERGEN	5,758		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

1) A 60 ft core was taken in the Morrow. It was all shale, silt, and limestone. No analysis or core report.

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>					
400283142	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"/>
400283140	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>					
400283125	LAS-COMBINATION OPEN HOLE	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400283130	PDF-COMPOSITE	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400283131	PDF-INDUCTION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400283134	PDF-CALIPER	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400283135	PDF-DENSITY/NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400283136	PDF-MICROLOG	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400283138	PDF-TRIPLE COMBINATION	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400283144	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)