

**DRILLING COMPLETION REPORT**

Document Number:  
401449252

Date Received:

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: Kenny Trueax  
 Name of Operator: VERDAD RESOURCES LLC Phone: (720) 6518409  
 Address: 5950 CEDAR SPRINGS ROAD Fax: \_\_\_\_\_  
 City: DALLAS State: TX Zip: 75235

API Number 05-123-45000-00 County: WELD  
 Well Name: BRNAK Well Number: 01-64-10-1H  
 Location: QtrQtr: NWNW Section: 10 Township: 1N Range: 64W Meridian: 6  
 Footage at surface: Distance: 245 feet Direction: FNL Distance: 1259 feet Direction: FWL  
 As Drilled Latitude: 40.072546 As Drilled Longitude: -104.541868

GPS Data:  
 Date of Measurement: 10/03/2017 PDOP Reading: 1.3 GPS Instrument Operator's Name: Ryan Desmond

\*\* If directional footage at Top of Prod. Zone Dist.: 460 feet. Direction: FNL Dist.: 508 feet. Direction: FWL  
 Sec: 10 Twp: 1N Rng: 64W  
 \*\* If directional footage at Bottom Hole Dist.: 463 feet. Direction: FSL Dist.: 521 feet. Direction: FWL  
 Sec: 15 Twp: 1N Rng: 64W

Field Name: WATTENBERG Field Number: 90750  
 Federal, Indian or State Lease Number: \_\_\_\_\_

Spud Date: (when the 1st bit hit the dirt) 08/14/2017 Date TD: 08/20/2017 Date Casing Set or D&A: 11/22/2017  
 Rig Release Date: 09/04/2017 Per Rule 308A.b.

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

Total Depth MD 17283 TVD\*\* 7119 Plug Back Total Depth MD 17176 TVD\*\* 7119

Elevations GR 5104 KB 5120 **Digital Copies of ALL Logs must be Attached per Rule 308A**

List Electric Logs Run:  
MWD/LWD, CBL, CDL/CNL in API 123-44997

**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	1,760	689	0	1,760	VISU
1ST	8+1/2	5+1/2	20	0	17,256	2,305	0	17,256	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			
PARKMAN	4,200				
SUSSEX	4,500				
SHANNON	6,500				
SHARON SPRINGS	6,950				
NIOBRARA	6,980				

Comment:

Open Hole Logging Exception. No Resistivity Log Run. CDL/CNL in API 123-44997, Brnak 1-64-10-3H. DIL in API 123-23292, Brnak #21-10.

Top of producing 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 from the top of production zone.

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

Signed: \_\_\_\_\_

Print Name: Robert Beecherl

Title: Operations Engineer

Date: \_\_\_\_\_

Email: bbeecherl@verdadoil.com

### Attachment Check List

Att Doc Num	Document Name	attached ?	
<b>Attachment Checklist</b>			
401449440	CMT Summary *	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
401466407	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"/>
<b>Other Attachments</b>			
401449432	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401449434	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401449457	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401449920	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
401466404	PDF-MWD/LWD	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)