

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:

401694371

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: Danny Showers

Name of Operator: VERDAD RESOURCES LLC

Phone: (303) 8771890

Address: 5950 CEDAR SPRINGS ROAD

Fax:

City: DALLAS State: TX Zip: 75235

API Number 05-123-46830-00

County: WELD

Well Name: HELEN

Well Number: 24-4H

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

Footage at surface: Distance: 1243 feet Direction: FSL Distance: 2072 feet Direction: FWL

As Drilled Latitude: 40.120045 As Drilled Longitude: -104.501722

GPS Data:

Date of Measurement: 06/29/2018 PDOP Reading: 1.5 GPS Instrument Operator's Name: AUSTIN WEILAND

** If directional footage at Top of Prod. Zone Dist.: 490 feet. Direction: FNL Dist.: 870 feet. Direction: FWL

Sec: 25 Twp: 2N Rng: 64W

** If directional footage at Bottom Hole Dist.: 850 feet. Direction: FSL Dist.: 828 feet. Direction: FWL

Sec: 36 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) 05/17/2018 Date TD: 05/28/2018 Date Casing Set or D&A: 05/29/2018

Rig Release Date: 05/30/2018 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 16721 TVD** 6788 Plug Back Total Depth MD 16574 TVD** 6788

Elevations GR 4926 KB 17

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

List Electric Logs Run:

MWD/LWD, CBL, Resistivity in the Helen 24-3H. API # 05-123-46822

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	1,757	730	0	1,757	VISU
1ST	8+1/2	5+1/2	20	0	16,683	2,240	102	16,683	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		700			
PARKMAN	4,146				
SUSSEX	4,467				
SHANNON	4,679				
SHARON SPRINGS	7,066				
NIOBRARA	7,099				

Comment:

Resistivity in the Helen 24-3H. API # 05-123-46822

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

Signed: _____

Print Name: Danny Showers

Title: Drilling Manager

Date: _____

Email: Dshowers@verdadoil.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
401694687	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
401694690	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>		
401694679	LAS-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401694680	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401694682	PDF-CEMENT BOND	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401698760	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
401698762	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)