

FORM 5A

Rev 06/12

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Date Received:

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 10651 4. Contact Name: Robert Beecherl  
 2. Name of Operator: VERDAD RESOURCES LLC Phone: (214) 2826419  
 3. Address: 5950 CEDAR SPRINGS ROAD Fax: \_\_\_\_\_  
 City: DALLAS State: TX Zip: 75235 Email: bbeecherl@verdadoil.com

5. API Number 05-123-46494-00 6. County: WELD  
 7. Well Name: Jackson Well Number: 33-6H  
 8. Location: QtrQtr: NWNW Section: 33 Township: 2N Range: 64W Meridian: 6  
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 04/30/2018 End Date: 05/09/2018 Date of First Production this formation: 08/06/2018  
 Perforations Top: 7430 Bottom: 12483 No. Holes: 836 Hole size: 36/100

Provide a brief summary of the formation treatment: Open Hole:

40,500 gallons of 7.5% HCl, 297,075 bbls of FR water, 198 bbls of FDP water, 3,798 bbls of treated water, 2,523,210 lbs of 100 mesh, 7,272,020 lbs of white 40/70,

This formation is commingled with another formation:  Yes  No

Total fluid used in treatment (bbl): 302053 Max pressure during treatment (psi): 11297  
 Total gas used in treatment (mcf): \_\_\_\_\_ Fluid density at initial fracture (lbs/gal): 8.34  
 Type of gas used in treatment: \_\_\_\_\_ Min frac gradient (psi/ft): 0.89  
 Total acid used in treatment (bbl): 964 Number of staged intervals: 35  
 Recycled water used in treatment (bbl): \_\_\_\_\_ Flowback volume recovered (bbl): 16975  
 Fresh water used in treatment (bbl): 301089 Disposition method for flowback: DISPOSAL  
 Total proppant used (lbs): 9790704 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: \_\_\_\_\_

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 05/21/2018 Hours: 24 Bbl oil: 691 Mcf Gas: 518 Bbl H2O: 2074  
 Calculated 24 hour rate: Bbl oil: \_\_\_\_\_ Mcf Gas: \_\_\_\_\_ Bbl H2O: \_\_\_\_\_ GOR: 750  
 Test Method: Flowback Casing PSI: 1150 Tubing PSI: \_\_\_\_\_ Choke Size: 24/64  
 Gas Disposition: SOLD Gas Type: WET Btu Gas: 1171 API Gravity Oil: 42  
 Tubing Size: 2 + 3/8 Tubing Setting Depth: 7143 Tbg setting date: 05/23/2018 Packer Depth: 7143

Reason for Non-Production: \_\_\_\_\_

Date formation Abandoned: \_\_\_\_\_ Squeeze:  Yes  No If yes, number of sacks cmt \_\_\_\_\_

\*\* Bridge Plug Depth: \_\_\_\_\_ \*\* Sacks cement on top: \_\_\_\_\_ \*\* Wireline and Cement Job Summary must be attached.

Comment:

Footage at Top of Prod. Zone (Perforation 836) 30 FNL 1934 FWL 2N-64W-33 TVD 7064' MD 7430'  
Footage at Bottom Hole (Perforation 1) 228 FSL 1915 FWL 2N-64W-33 TVD 7069' MD 12483'

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

Signed: \_\_\_\_\_ Print Name: Bobby Beecherl

Title: Operations Engineer Date: \_\_\_\_\_ Email bbeecherl@verdadoil.com

### Attachment Check List

**Att Doc Num**      **Name**

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Total Attach: 0 Files

### General Comments

**User Group**      **Comment**      **Comment Date**

		Stamp Upon Approval
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Total: 0 comment(s)