

FORM
5Rev
12/20

State of Colorado

Oil and Gas Conservation Commission

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



Document Number:

402827245

Date Received:

DRILLING COMPLETION REPORT

Per Rule 308A, this form and all required attachments shall be submitted after completing the drilling operations to drill, sidetrack, or deepen a wellbore and after changing the casing and/or cement configuration of a wellbore. If any attempt has been made to test, complete, or produce the well, the operator shall also submit a Form 5A (Completed Interval Report) per Rule 308B. If the well has been plugged, the operator shall also submit a Form 6 (Well Abandonment Report) per Rule 311.

Completion Type ☒ Final completion ☐ Preliminary completion

OGCC Operator Number: 10651

Contact Name: Heather Mitchell

Name of Operator: VERDAD RESOURCES LLC

Phone: (720) 845-6917

Address: 1125 17TH STREET SUITE 550

Fax:

City: DENVER

State: CO

Zip: 80202

Email: regulatory@verdadresources.com

API Number 05-123-50882-00

County: WELD

Well Name: KBL

Well Number: 1930-09H

Location: QtrQtr: NWSE Section: 19 Township: 2N Range: 63W Meridian: 6
FNL/FSL FEL/FWL

Footage at surface: Distance: 1806 feet Direction: FSL Distance: 2051 feet Direction: FEL

As Drilled Latitude: 40.121606 As Drilled Longitude: -104.478179

GPS Data: GPS Quality Value: 1.5 Type of GPS Quality Value: PDOP Date of Measurement: 03/25/2021

** If directional footage at Top of Prod. Zone Dist: 2180 feet Direction: FSL Dist: 1315 feet Direction: FWL
Sec: 19 Twp: 2N Rng: 63W
FNL/FSL FEL/FWL

** If directional footage at Bottom Hole Dist: 359 feet Direction: FSL Dist: 1323 feet Direction: FWL
Sec: 30 Twp: 2N Rng: 63W
FNL/FSL FEL/FWL

Field Name: WATTENBERG

Field Number: 90750

Federal, Indian or State Lease Number:

Spud Date: (when the 1st bit hit the dirt) 01/26/2021 Date TD: 08/03/2021 Date Casing Set or D&A: 08/04/2021

Rig Release Date: 08/14/2021 Per Rule 308A.b.

Well Classification:

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

Total Depth MD 14638 TVD** 6723 Plug Back Total Depth MD 14552 TVD** 6723

Elevations GR 4863 KB 4884

Digital Copies of ALL Logs must be Attached



List All Logs Run:

MWD/LWD (LAS & PDF), CBL (PDF), Resistivity run on KBL 1930-08H (API 05-123-50889-00).

FLUID VOLUMES USED IN DRILLING OPERATIONS

(Enter "0" if a type of a fluid was not used. Do not leave blank.)

Total Fluids (bbls): 3006

Fresh Water (bbls): 2616

Recycled or Reused Fluids That Offset the Use of Fresh Water (bbls): 0

CASING, LINER AND CEMENT

Casing Type	Size of Hole	Size of Casing	Grade	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top	Status
CONDUCTOR	24	16	ASTM53	65	0	80	70	80	0	VISU
SURF	13+1/2	9+5/8	J55	36	0	1818	780	1818	0	VISU
1ST	8+1/2	5+1/2	P110	17	1824	14638	2046	14638	1824	CBL

Bradenhead Pressure Action Threshold 545 psig

This threshold is calculated per Rule 308A.b.(2)G. If this well is located in a bradenhead test area (see Rule 207.b) per an Order of the Commission, it may be subject to a different threshold.

Does the casing centralization comply with Rule 317.g? Yes

If "NO", provide details below.

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	240				
PARKMAN	4,034				
SUSSEX	4,332				
SHANNON	4,635				
SHARON SPRINGS	7,120				
NIOBRARA	7,133				

Operator Comments:

Surface casing information was submitted with the preliminary Form 5 Document #402631732
 Top of producing zone footage calls are estimated based on being within the hardline, and into our target production interval. When the well is completed the form 5A will detail actual footage calls from the top of production zone.
 BHL footage calls are past the setback, this well will not be completed past the setback.
 No open hole resistivity log was run on this well. The resistivity log was run on the KBL 1930-08H (API 05-123-50889-00). Approved APD and BMP requiring one well on a pad to be logged with open hole resistivity log and gamma ray.

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

Signed: _____ Print Name: Miracle Pfister

Title: Sr. Regulatory Contractor Date: _____ Email: mpfister@miracleenergyconsulting.com

Attachment Check List

Att Doc Num	Document Name	attached ?
<u>Attachment Checklist</u>		
402836413	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
402835380	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>		
402835379	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402835674	PDF-CBL 1ST RUN	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402835927	PDF-MWD/LWD	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
402835928	LAS-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)