

FORM
5A
Rev
09/20

State of Colorado
Oil and Gas Conservation Commission
1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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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
2. Name of Operator: VERDAD RESOURCES LLC
3. Address: 1125 17TH STREET SUITE 550
City: DENVER State: CO Zip: 80202
4. Contact Name: Allison Schieber
Phone: (720) 845-6909
Fax: _____
Email: regulatory@verdadresources.com

5. API Number 05-123-51206-00
6. County: WELD
7. Well Name: Timbro Fed 1931
Well Number: 08H
8. Location: QtrQtr: SESW Section: 19 Township: 9N Range: 58W Meridian: 6
9. Field Name: WILDCAT Field Code: 99999

Completed Interval

FORMATION: NIOBRARA Status: PRODUCING Treatment Type: HYDRAULIC FRACTURING

Treatment Date: 08/31/2022 End Date: 09/13/2022 Date this Formation was Completed: 10/20/2022

Perforations Top: 6808 Bottom: 16769 No. Holes: 1739 Hole size: 36/100 Open Hole:

Describe the Formation Treatment, including the following: type of fluid used (gel, slickwater, etc.), type and concentration of acid used (HCl, HF, etc.), types and amounts of proppant(s) used, depth details of multiple zones, and method used to determine flowback volume.

FR Water 422,117 bbl, Treated Water 10757 bbl, Fresh Water 1305 bbl, (18,235,518 gals), 28% HCL 408bbl.
Proppant: 100 Mesh 14,850,660 lbs, 40/70 white sand: 14,867,610 lbs
Flowback is measured by strapping a flowback tank every hour during initial flowback and from tank gauges during permanent facility flowback.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 434587 Max pressure during treatment (psi): 10022

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): 0.78

Total acid used in treatment (bbl): 408 Number of staged intervals: 47

Recycled or Reused Fluids used in treatment (bbl): _____ Flowback volume recovered (bbl): 4997

Fresh water used in treatment (bbl): 434179 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 29718270

Fracture stimulations must be reported on FracFocus.org

Test Information:

10/27/2022 Hours: 24 Bbl oil: 15 Mcf Gas: 1 Bbl H2O: 576
Date Calculated 24 hour rate: Bbl oil: 15 Mcf Gas: 1 Bbl H2O: 576 GOR: 31
Test Method: Flowing Casing PSI: 509 Tubing PSI: 601 Choke Size: 14/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1526 API Gravity Oil: 39
Tubing Size: 2 + 3/8 Tubing Setting Depth: 6287 Tbg setting date: 10/19/2022 Packer Depth: 6268

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:

Footages at Top of Prod. Zone 6808'MD (Perforation 1739) 330' FNL 323' FEL Sec 30 T9N R58W
Footages at Bot of Prod. Zone 16769' MD(Perforation 1) 353' FSL 331' FEL Sec 31 T9N R58W

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

Signed: _____ Print Name: Allison Schieber

Title: Sr. Regulatory Analyst Date: _____ Email: regulatory@verdadresources.com

Attachment List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

User Group

Comment

Comment Date

		Stamp Upon Approval
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Total: 0 comment(s)