

FORM
5Rev
02/08**State of Colorado**
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



DE ET OE ES

Document Number:

400138144

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

1. OGCC Operator Number: 10311

2. Name of Operator: SYNERGY RESOURCES CORPORATION

3. Address: 20203 HIGHWAY 60

City: PLATTEVILLE State: CO Zip: 80651

4. Contact Name: Kori Thoren

Phone: (970) 737-1073

Fax: (970) 737-1045

5. API Number 05-123-31724-00

6. County: WELD

7. Well Name: SRC M&T Farms

Well Number: 10DD

8. Location: QtrQtr: SWSE Section: 10 Township: 6N Range: 65W Meridian: 6

Footage at surface: Distance: 657 feet Direction: FSL Distance: 2003 feet Direction: FEL

As Drilled Latitude: 40.495386 As Drilled Longitude: -104.647248

GPS Data:

Data of Measurement: 03/14/2011 PDOP Reading: 1.5 GPS Instrument Operator's Name: A. Demo

** If directional footage

at Top of Prod. Zone Distance: 1298 feet Direction: FSL Distance: 1282 feet Direction: FEL

Sec: 10 Twp: 6N Rng: 65W

at Bottom Hole Distance: 1298 feet Direction: FSL Distance: 1282 feet Direction: FEL

Sec: 10 Twp: 6N Rng: 65W

9. Field Name: WATTENBERG

10. Field Number: 90750

11. Federal, Indian or State Lease Number:

12. Spud Date: (when the 1st bit hit the dirt) 07/19/2010 13. Date TD: 07/24/2010 14. Date Casing Set or D&A: 07/24/2010

15. Well Classification:

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

16. Total Depth MD 7450 TVD 7321 17 Plug Back Total Depth MD 7304 TVD 7175

18. Elevations GR 4746 KB 4758

One paper copy of all electric and mud logs must be submitted, along with one digital LAS copy as available.

19. List Electric Logs Run:

Cement Bond Log
Compensated Density Compensated Neutron Dual Induction

20. Casing, Liner and Cement:

CASING

Casing Type	Size of Hole	Size of Casing	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Top	Cmt Bot	Status
SURF	12+1/4	8+5/8	24	0	565	400	0	565	CBL
1ST	7+7/8	4+1/2	11.6	0	7,418	640	2,530	7,418	CBL

ADDITIONAL CEMENT

Cement work date: _____

Details of work:

Method used	String	Cementing tool setting/pref depth	Cement volume	Cement top	Cement bottom

21. Formation log intervals and test zones:

FORMATION LOG INTERVALS AND TEST ZONES

FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
PARKMAN	3,822		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,557		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,012		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,256		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,279		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

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

Signed: _____

Print Name: Kori Thoren

Title: Land Assistant

Date: _____

Email: kthoren@syrinfo.com

Based on the information provided herein, this Drilling Completion Report (Form 5) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name
400192799	LAS-
400192800	LAS-
400192801	LAS-
400193173	DIRECTIONAL SURVEY
400193175	OTHER
400193898	CEMENT JOB SUMMARY

Total Attach: 6 Files

General Comments

User Group	Comment	Comment Date

Total: 0 comment(s)