

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

4. Contact Name: Kori Thoren

2. Name of Operator: SYNERGY RESOURCES CORPORATION

Phone: (970) 737-1073

3. Address: 20203 HIGHWAY 60

Fax: (970) 737-1045

City: PLATTEVILLE State: CO Zip: 80651

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: 658 feet Direction: FSL Distance: 2004 feet Direction: FEL

As Drilled Latitude: 40.495386 As Drilled Longitude: -104.647248

GPS Data:

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

** If directional footage at Top of Prod. Zone Dist.: 1298 feet. Direction: FSL Dist.: 1282 feet. Direction: FEL

Sec: 10 Twp: 6N Rng: 65W

** If directional footage at Bottom Hole Dist.: 1298 feet. Direction: FSL Dist.: 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 4747 KB 4759

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	VISU
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:

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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: 8/9/2011 Email: kthoren@syrinfo.com

Attachment Check List

Att Doc Num	Document Name	attached ?			
<u>Attachment Checklist</u>					
400193175	CMT Summary *	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	Core Analysis	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
400193173	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>					
400138144	FORM 5 SUBMITTED	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400192799	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400192800	LAS-CEMENT BOND	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
400192801	LAS-DENSITY/NEUTRON	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>

General Comments

User Group	Comment	Comment Date
Permit	REC LOGS DOC# 1669899-900	8/15/2011 2:57:59 PM
Permit	waiting on logs	8/10/2011 12:19:24 PM

Total: 2 comment(s)