

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Document Number:
400290476

Date Received:
05/30/2012

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: 10311 4. Contact Name: Brianne Visconti
 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 05-123-13807-00 6. County: WELD
 7. Well Name: LOEFFLER - UP Well Number: 3-11
 8. Location: QtrQtr: NENW Section: 11 Township: 4N Range: 66W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: NIOBRARA-CODELL Status: COMMINGLED Treatment Type: _____
 Treatment Date: 12/19/2011 End Date: _____ Date of First Production this formation: 12/28/2011
 Perforations Top: 7220 Bottom: 7235 No. Holes: 60 Hole size: 0.38

Provide a brief summary of the formation treatment:

Open Hole:

PERFS 6953 - 7027 HOLES 74 SIZE .38 and 7220 - 7235 HOLES 60 SIZE .38 FRAC THE CODELL WITH 126,292 GAL OF FRESH WATER AND 135,580 LBS OF 20/40 WHITE SAND

This formation is commingled with another formation: Yes No

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

Total gas used in treatment (mcf): _____ Fluid density at initial fracture (lbs/gal): _____

Type of gas used in treatment: _____ Max frac gradient (psi/ft): _____

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

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): _____

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

Total proppant used (lbs): _____ Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 12/28/2011 Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: 2 Mcf Gas: 66 Bbl H2O: 0 GOR: 33000

Test Method: FLOWING Casing PSI: 1309 Tubing PSI: 838 Choke Size: 25/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1225 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7205 Tbg setting date: 12/22/2011 Packer Depth: _____

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:

please include kbrewer@syrinfo.com and crasmuson@syrinfo.com on all emails

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

Signed: _____ Print Name: Brianne Visconti

Title: Administrator Date: 5/30/2012 Email: bvisconti@syrinfo.com
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Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Operator supplied perms for the Niobrara. Form was previously filled in incorrectly. Form 5 docnum 137280 from 1988	8/27/2012 1:51:46 PM
Permit	Operator submitted copy of form 5 from 1988, but Niobrara is above the perms and formation is listed as Niobrara-Codell. On hold for explanation.	8/27/2012 8:13:32 AM
Permit	On hold until operator submits form 5.	8/24/2012 2:54:35 PM

Total: 3 comment(s)