

FORM  
5Rev  
02/08

## State of Colorado

## Oil and Gas Conservation Commission

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



DE ET OE ES

Document Number:

400319850

Date Received:

08/24/2012

## 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: 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 05-123-34539-00

6. County: WELD

7. Well Name: SRC GCC

Well Number: 11-11D

8. Location: QtrQtr: NESE Section: 10 Township: 5N Range: 66W Meridian: 6

Footage at surface: Distance: 2423 feet Direction: FSL Distance: 743 feet Direction: FEL

As Drilled Latitude: 40.413536 As Drilled Longitude: -104.758962

## GPS Data:

Data of Measurement: 07/10/2012 PDOP Reading: 1.5 GPS Instrument Operator's Name: M. Wallace

\*\* If directional footage at Top of Prod. Zone Dist.: 677 feet. Direction: FNL Dist.: 662 feet. Direction: FWL

Sec: 11 Twp: 5N Rng: 66W

\*\* If directional footage at Bottom Hole Dist.: 650 feet. Direction: FNL Dist.: 684 feet. Direction: FWL

Sec: 11 Twp: 5N Rng: 66W

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) 04/20/2012 13. Date TD: 04/25/2012 14. Date Casing Set or D&amp;A: 04/26/2012

## 15. Well Classification:

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

16. Total Depth MD 8156 TVD\*\* 7654 17 Plug Back Total Depth MD 8108 TVD\*\* 7606

18. Elevations GR 4858 KB 4870

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

## 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	701	318	0	701	CALC
1ST	7+7/8	4+1/2	11.6	0	8,156	1,045	1,050	8,156	CBL

## 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:					

21. Formation log intervals and test zones:

<b>FORMATION LOG INTERVALS AND TEST ZONES</b>					
FORMATION NAME	Measured Depth		Check if applies		COMMENTS (All DST and Core Analyses must be submitted to COGCC)
	Top	Bottom	DST	Cored	
GREELEY SAND	2,850		<input type="checkbox"/>	<input type="checkbox"/>	
PARKMAN	3,990		<input type="checkbox"/>	<input type="checkbox"/>	
SUSSEX	4,500		<input type="checkbox"/>	<input type="checkbox"/>	
SHANNON	5,280		<input type="checkbox"/>	<input type="checkbox"/>	
NIOBRARA	7,510		<input type="checkbox"/>	<input type="checkbox"/>	
FORT HAYS	7,796		<input type="checkbox"/>	<input type="checkbox"/>	
CODELL	7,814		<input type="checkbox"/>	<input type="checkbox"/>	
GREENHORN	7,858		<input type="checkbox"/>	<input type="checkbox"/>	

Comment:

Logs were bridged out and abandoned.

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: 8/24/2012 Email: bvisconti@syrinfo.com

### **Attachment Check List**

Att Doc Num	Document Name	attached ?
<b><u>Attachment Checklist</u></b>		
400319863	CMT Summary *	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
	Core Analysis	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
400319865	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"/>
<b><u>Other Attachments</u></b>		
400319850	FORM 5 SUBMITTED	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400319859	LAS-CBL 1ST RUN	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
400319862	DIRECTIONAL DATA	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

### **General Comments**

<b><u>User Group</u></b>	<b><u>Comment</u></b>	<b><u>Comment Date</u></b>
Permit	Corrected formation tops per operator (tops were originally input as TVD, not MD)	11/1/2012 3:13:09 PM

Total: 1 comment(s)