

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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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: 10311 4. Contact Name: Brianne Visconti
2. Name of Operator: SYNERGY RESOURCES CORPORATION Phone: (970) 737-1073
3. Address: 20203 HIGHWAY 60 City: PLATTEVILLE State: CO Zip: 80651 Fax: (970) 737-1045

5. API Number 05-123-35485-00 6. County: WELD
7. Well Name: Coyle Well Number: 34C
8. Location: QtrQtr: NWNE Section: 34 Township: 4N Range: 68W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/23/2013 End Date: 10/23/2013 Date of First Production this formation: 11/01/2013
Perforations Top: 7435 Bottom: 7453 No. Holes: 72 Hole size: 0.42

Provide a brief summary of the formation treatment: Open Hole: []

Codell Slickwater Frac with a total of 210,043 Gal of water, 12,500 lbs of 40/70 white sand, and 163,600 lbs of 30/50 white sand

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 5001 Max pressure during treatment (psi): 5506
Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 2.00
Type of gas used in treatment: Min frac gradient (psi/ft): 0.81
Total acid used in treatment (bbl): 0 Number of staged intervals: 1
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 1667
Fresh water used in treatment (bbl): 5001 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 176100 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 11/01/2013 Hours: 24 Bbl oil: 58 Mcf Gas: 6 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 58 Mcf Gas: 6 Bbl H2O: 0 GOR: 103
Test Method: flowing Casing PSI: 1350 Tubing PSI: 1100 Choke Size:
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1269 API Gravity Oil: 47
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7420 Tbg setting date: 11/19/2013 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:

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: _____ Email: bvisconti@syrinfo.com
:

Attachment Check List

Att Doc Num	Name
400364103	WELLBORE DIAGRAM

Total Attach: 1 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)