

FORM

2

Rev
12/05

State of Colorado

Oil and Gas Conservation Commission

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



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APPLICATION FOR PERMIT TO:

1. ☒ Drill, ☐ Deepen, ☐ Re-enter, ☐ Recomplete and Operate

2. TYPE OF WELL

 OIL ☐ GAS ☒ COALBED ☐ OTHER _____
 SINGLE ZONE ☐ MULTIPLE ZONE ☐ COMMINGLE ZONE ☐
Refiling ☒Sidetrack ☐

Document Number:

400021538

Plugging Bond Surety

20090043

3. Name of Operator: SYNERGY RESOURCES CORPORATION4. COGCC Operator Number: 103115. Address: 20203 HIGHWAY 60City: PLATTEVILLE State: CO Zip: 806516. Contact Name: Ed Holloway Phone: (970)737-1073 Fax: (970)737-1045Email: pm3rsandquist@aol.com7. Well Name: SRC State Well Number: 16P

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 7800

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 16 Twp: 4N Rng: 67W Meridian: 6Latitude: 40.309250 Longitude: -104.896660
 Footage at Surface: 1360 FNL/FSL 2532 FEL/FWL FWL
11. Field Name: Wattenberg Field Number: 9075012. Ground Elevation: 4911 13. County: WELD

14. GPS Data:

Date of Measurement: 05/18/2009 PDOP Reading: 1.3 Instrument Operator's Name: Dallas Nielson15. If well is ☐ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL _____ FEL/FWL _____ Bottom Hole: FNL/FSL _____ FEL/FWL _____

Sec: _____ Twp: _____ Rng: _____ Sec: _____ Twp: _____ Rng: _____

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 1225 ft

18. Distance to nearest property line: _____ 19. Distance to nearest well permitted/completed in the same formation: _____

20. LEASE, SPACING AND POOLING INFORMATION

Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)
J Sand	JSND	232-23	160	E/2,SW/4,W/2,SE/4
Niobrara/Codell	NB-CD	407-87	160	E/2,SW/4,W/2,SE/4

21. Mineral Ownership: ☐ Fee ☒ State ☐ Federal ☐ Indian Lease #: OG88/5056S

22. Surface Ownership: ☒ Fee ☐ State ☐ Federal ☐ Indian

23. Is the Surface Owner also the Mineral Owner? ☐ Yes ☒ No Surface Surety ID#: 20090044

23a. If 23 is Yes: Is the Surface Owner(s) signature on the lease? ☐ Yes ☐ No

23b. If 23 is No ☒ Surface Owners Agreement Attached or ☐ \$25,000 Blanket Surface Bon ☐ \$2,000 Surface Bond ☐ \$5,000 Surface Bond

24. Using standard QtrQtr, Sec, Twp, Rng format enter entire mineral lease description upon which this proposed wellsite is located (attach separate sheet/map if you prefer):
S/2 Sec. 16, T4N, R67W

25. Distance to Nearest Mineral Lease Line: 1300 ft 26. Total Acres in Lease: 320

DRILLING PLANS AND PROCEDURES

27. Is H2S anticipated? ☐ Yes ☒ No If Yes, attach contingency plan.

28. Will salt sections be encountered during drilling? ☐ Yes ☒ No

29. Will salt (>15,000 ppm TDS CL) or oil based muds be used during drilling? ☐ Yes ☒ No

30. If questions 27 or 28 are yes, is this location in a sensitive area (Rule 903)? ☐ Yes ☐ No If 28, 29, or 30 are "Yes" a pit permit may be required.

31. Mud disposal: ☒ Offsite ☐ Onsite

Method: ☐ Land Farming ☐ Land Spreading ☒ Disposal Facility Other: _____

Note: The use of an earthen pit for Recompletion fluids requires a pit permit (Rule 905b). If air/gas drilling, notify local fire officials.

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
SURF	12+1/4	8+5/8	24	590	300	590	
1ST	7+7/8	4+1/2	11.6	7,800	490	7,800	200

32. BOP Equipment Type: ☒ Annular Preventer ☐ Double Ram ☐ Rotating Head ☐ None

33. Comments No Conductive Casing Will Be Used

34. Location ID: 302650

35. Is this application in a Comprehensive Drilling Plan ? ☐ Yes ☒ No

36. Is this application part of submitted Oil and Gas Location Assessment ? ☒ Yes ☐ No

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

Signed: _____ Print Name: Craig Rasmuson

Title: Mgr of Land & Field Ops Date: 12/23/2009 Email: craigrasmuson@comcast.net

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

API NUMBER

05 123 29542 00

Permit Number: _____ Expiration Date: _____

CONDITIONS OF APPROVAL, IF ANY: _____

All representations, stipulations and conditions of approval stated in the Form 2A for this location shall constitute representations, stipulations and conditions of approval for this Form 2 Permit-to-Drill and are enforceable to the same extent as all other representations, stipulations and conditions of approval stated in this Permit-to-Drill.

Attachment Check List

Att Doc Num	Name	Doc Description
400024242		Access Road Map SRC 16P.pdf
400024243		Consultation Rule 306 SRC 16P.pdf
400024246		Multiple Well Plan SRC 16P.pdf
400024257		Survey SRC 16P.pdf
400024259		Visible Improvements SRC 16P.pdf
400024260		Well Head Photo Exhibit SRC 16P.pdf
400024292		20 Day Certification Letter SRC State 16P.pdf
400024294		Request for Exception to Rule 318A(a) SRC State 16P.pdf
400024593		Survey SRC 16P.pdf
400024594		Vicinity Map SRC 16P.pdf
400024595		Improvements SRC 16P.pdf
400024596		Hydrology Map SRC 16P.pdf
400024597		Photographs SRC 16P.pdf

Total Attach: 13 Files