

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:
400071759
Plugging Bond Surety
20090043

3. Name of Operator: SYNERGY RESOURCES CORPORATION 4. COGCC Operator Number: 10311

5. Address: 20203 HIGHWAY 60
City: PLATTEVILLE State: CO Zip: 80651

6. Contact Name: Rhonda Sandquist Phone: (970)737-1073 Fax: (970)737-1045
Email: pm3rsandquist@aol.com

7. Well Name: RBF Well Number: 14-15D

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

9. Proposed Total Measured Depth: 7677

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 15 Twp: 6N Rng: 67W Meridian: 6
Latitude: 40.482679 Longitude: -104.884153

Footage at Surface: 1105 FNL/FSL FSL 1357 FEL/FWL FWL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 4781 13. County: WELD

14. GPS Data:

Date of Measurement: 04/16/2010 PDOP Reading: 1.5 Instrument Operator's Name: John C. Barickman

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 513 FSL 503 FWL 513 FSL 503 FWL
Sec: 15 Twp: 6N Rng: 67W Sec: 15 Twp: 6N Rng: 66W

16. Is location in a high density area? (Rule 603b)? Yes No

17. Distance to the nearest building, public road, above ground utility or railroad: 336 ft

18. Distance to nearest property line: 215 ft 19. Distance to nearest well permitted/completed in the same formation: 1025 ft

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.)
Niobrara/Codell	NB-CD	407-87	80	S/2SW/4

21. Mineral Ownership: Fee State Federal Indian Lease #: _____

22. Surface Ownership: Fee State Federal Indian

23. Is the Surface Owner also the Mineral Owner? Yes No Surface Surety ID#: _____

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):
 Township 6 North, Range 67 West, 6th PM, Section 15 - See Attached Leases ----- N/2SE/4 will be a Farmout Agreement from Noble Energy Inc.

25. Distance to Nearest Mineral Lease Line: 215 ft 26. Total Acres in Lease: 69

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	400	300	400	0
1ST	7+7/8	4+1/2	11.6	7,677	300	7,677	

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

33. Comments No Conductive Surface Casing Will Be Used

34. Location ID: _____

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: 7/28/2010 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: David S. Neslin Director of COGCC Date: 8/20/2010

API NUMBER 05 123 32061 00	Permit Number: _____	Expiration Date: <u>8/19/2012</u>
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.

- 1) Provide 24 hour notice of MIRU to Ed Binkley at 970-506-9834 or e-mail at ed.binkley@state.co.us
- 2) Comply with Rule 317.i and provide cement coverage from TD to a minimum of 200' above Niobrara. Verify coverage with cement bond log.
- 3) Run and submit Directional Survey from TD to base of surface casing. The operator shall comply with Rule 321, and it shall be the operator's responsibility to ensure that the wellbore complies with setback requirements in commission orders or rules prior to producing the well.

Attachment Check List

Att Doc Num	Name	Doc Description
400071759	FORM 2 SUBMITTED	LF@2515043 400071759
400080524	ACCESS ROAD MAP	LF@2515044 400080524
400080525	WELL LOCATION PLAT	LF@2515045 400080525
400080526	OIL & GAS LEASE	LF@2515046 400080526
400080528	OIL & GAS LEASE	LF@2515049 400080528
400080530	MULTI-WELL PLAN	LF@2515052 400080530
400080531	DEVIATED DRILLING PLAN	LF@2515079 400080531

Total Attach: 7 Files

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