

**APPLICATION FOR PERMIT TO:**

1.  **Drill,**  Deepen,  Re-enter,  Recomplete and Operate

2. TYPE OF WELL

OIL  GAS  COALBED  OTHER \_\_\_\_\_

SINGLE ZONE  MULTIPLE  COMMINGLE

Refiling   
 Sidetrack

Document Number:  
 400220956  
 PluggingBond SuretyID  
 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: Kori Thoren Phone: (970)737-1073 Fax: (970)737-1045  
 Email: kthoren@syrginfo.com

7. Well Name: AVEX Well Number: 10C

8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 8100

**WELL LOCATION INFORMATION**

10. QtrQtr: SWNE Sec: 10 Twp: 4N Rng: 68W Meridian: 6  
 Latitude: 40.331343 Longitude: -104.984967

Footage at Surface: 1500 feet FNL 1447 feet FEL

11. Field Name: Wattenberg Field Number: 90750

12. Ground Elevation: 5038 13. County: WELD

14. GPS Data:  
 Date of Measurement: 10/07/2011 PDOP Reading: 2.0 Instrument Operator's Name: Steven A. Lund

15. 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  No

17. Distance to the nearest building, public road, above ground utility or railroad: 1215 ft

18. Distance to nearest property line: 1137 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 1000 ft

**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	320	E/2
Niobrara/Codell	NB/CD	407-87	80	S/2 NE/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 Bond  \$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):  
 SWNE Sec. 10, T4N - R68W

25. Distance to Nearest Mineral Lease Line: 1137 ft                      26. Total Acres in Lease: 144

### 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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)?     Yes                       No

31. Mud disposal:     Offsite     Onsite                      **If 28, 29, or 30 are "Yes" a pit permit may be required.**

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	Wt/Ft	Csg/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt Top
SURF	12+1/4	8+5/8	24	0	550	350	550	0
1ST	7+7/8	4+1/2	11.6	0	8,100	4,100	8,100	200

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: Head of Operations                      Date: 11/4/2011                      Email: crasmuson@syrginfo.com

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: \_\_\_\_\_

<b>API NUMBER</b>	Permit Number: _____	Expiration Date: _____
05	<b>CONDITIONS OF APPROVAL, IF ANY:</b>	

**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
400220956	FORM 2 SUBMITTED
400221090	MULTI-WELL PLAN
400221091	WELL LOCATION PLAT
400221092	OIL & GAS LEASE

Total Attach: 4 Files

### General Comments

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

Total: 0 comment(s)

### BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)