

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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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: Craig Rasmuson
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 05-123-34267-00 6. County: WELD
7. Well Name: SRC Leffler Well Number: 14-26D
8. Location: QtrQtr: NWSW Section: 26 Township: 7N Range: 66W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type:
Treatment Date: 01/17/2012 End Date: Date of First Production this formation: 01/20/2012
Perforations Top: 7430 Bottom: 7444 No. Holes: 56 Hole size: 0.42

Provide a brief summary of the formation treatment: Open Hole:
PERFS 7430 - 7444 HOLES 56 SIZE .42 FRAC CODELL WITH 2224,220 GALLONS OF TOTAL FRAC FLUID AND 126,440 LBS 30/50 WHITE SAND

This formation is commingled with another formation: Yes No
Total fluid used in treatment (bbl): Max pressure during treatment (psi):
Total gas used in treatment (mcf): Fluid density at initial fracture (lbs/gal):
Type of gas used in treatment: Max frac gradient (psi/ft):
Total acid used in treatment (bbl): Number of staged intervals:
Recycled water used in treatment (bbl): Flowback volume recovered (bbl):
Fresh water used in treatment (bbl): Disposition method for flowback:
Total proppant used (lbs): Rule 805 green completion techniques were utilized:
Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 01/14/2012 Hours: 24 Bbl oil: 17 Mcf Gas: 40 Bbl H2O: 2
Calculated 24 hour rate: Bbl oil: 17 Mcf Gas: 40 Bbl H2O: 2 GOR: 2353
Test Method: Flowing Casing PSI: 900 Tubing PSI: Choke Size: 12/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1287 API Gravity Oil: 46
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7418 Tbg setting date: 04/05/2012 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:

Please be advised the attached cement summar is mislabeled. It is in fact the Leffler 14-26D not the 26B

Please Cc: crasmuson@syrinfo.com with any future correspondence on this form

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

Signed: _____ Print Name: Kori Thoren

Title: Land Assistant Date: 4/30/2012 Email kthoren@syrinfo.com
:

Attachment Check List

Att Doc Num	Name
400278497	FORM 5A SUBMITTED
400278527	CEMENT JOB SUMMARY
400278530	CEMENT JOB SUMMARY
400278531	WELLBORE DIAGRAM

Total Attach: 4 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>
Permit	Off Hold. Input test information per operator.	3/2/2012 6:54:13 AM
Permit	On hold. Requested test information.	3/1/2012 7:27:11 AM

Total: 2 comment(s)