

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

5. API Number 05-123-35920-00
6. County: WELD
7. Well Name: Olson
Well Number: 3CD
8. Location: QtrQtr: NENE Section: 3 Township: 3N Range: 68W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 11/06/2012 End Date: 11/06/2012 Date of First Production this formation: 11/23/2012

Perforations Top: 7415 Bottom: 7431 No. Holes: 56 Hole size: 0.42

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

Codell Silverstim Frac with a total of 103,236 gal of fresh water, 175,900 lbs of 30/50 Ottawa sand, and 2,418 lbs of WG-18

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

Total fluid used in treatment (bbl): 2458 Max pressure during treatment (psi): 3432

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 1.00

Type of gas used in treatment: Min frac gradient (psi/ft): 0.80

Total acid used in treatment (bbl): Number of staged intervals: 1

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 819

Fresh water used in treatment (bbl): 2458 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 175900 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: 11/23/2012 Hours: 24 Bbl oil: 75 Mcf Gas: 18 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 75 Mcf Gas: 18 Bbl H2O: 0 GOR: 240

Test Method: flowing Casing PSI: 1200 Tubing PSI: 1000 Choke Size: 12/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1283 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7400 Tbg setting date: 12/27/2012 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:

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: 1/10/2013 Email: bvisconti@syrinfo.com  
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**Attachment Check List**

Att Doc Num	Name
400368232	FORM 5A SUBMITTED
400368241	WELLBORE DIAGRAM

Total Attach: 2 Files

**General Comments**

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

Total: 0 comment(s)