

FORM 5A Rev 06/12

State of Colorado Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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, reoperation 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: Brianne Visconti
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 05-069-06441-00 6. County: LARIMER
7. Well Name: Avex Well Number: 35D
8. Location: QtrQtr: NWSE Section: 35 Township: 5N Range: 68W Meridian: 6
9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/21/2012 End Date: 12/21/2012 Date of First Production this formation: 02/01/2013
Perforations Top: 7138 Bottom: 7156 No. Holes: 72 Hole size: 4

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

Silverstim Frac on the Codell with a total of 113,513 gal of FR66 water, 175,120 lbs of 30/50 Ottawa sand, 2,102 gal of WG-18.

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

Total fluid used in treatment (bbl): 2703 Max pressure during treatment (psi): 3845
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): 0.77
Total acid used in treatment (bbl): 0 Number of staged intervals: 9
Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 901
Fresh water used in treatment (bbl): 2703 Disposition method for flowback: DISPOSAL
Total proppant used (lbs): 175120 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: 02/20/2013 Hours: 24 Bbl oil: 118 Mcf Gas: 161 Bbl H2O: 0
Calculated 24 hour rate: Bbl oil: 118 Mcf Gas: 161 Bbl H2O: 0 GOR: 1364
Test Method: flowing Casing PSI: 1000 Tubing PSI: 1200 Choke Size: 14/64
Gas Disposition: SOLD Gas Type: WET Btu Gas: 1322 API Gravity Oil: 47
Tubing Size: 2 + 3/8 Tubing Setting Depth: 7125 Tbg setting date: 01/11/2013 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: 4/18/2013 Email: bvisconti@syrinfo.com
:

Attachment Check List

Att Doc Num	Name
400405963	FORM 5A SUBMITTED
400405973	WELLBORE DIAGRAM

Total Attach: 2 Files

General Comments

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

Total: 0 comment(s)