

FORM 5A

Rev 06/12

State of Colorado

Oil and Gas Conservation Commission

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Document Number: 400418356

Date Received: 05/15/2013

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 Fax: (970) 737-1045
 City: PLATTEVILLE State: CO Zip: 80651

5. API Number 05-123-34088-00 6. County: WELD
 7. Well Name: Swift Well Number: 24-65
 8. Location: QtrQtr: NWNE Section: 24 Township: 6N Range: 66W Meridian: 6
 9. Field Name: WATTENBERG Field Code: 90750

Completed Interval

FORMATION: CODELL Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/24/2012 End Date: 05/24/2012 Date of First Production this formation: 06/19/2012

Perforations Top: 7117 Bottom: 7136 No. Holes: 76 Hole size: 0.38

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

Slickwater Frac on the Codell with a total of 207,130 gal of FR-Water, 90,140 lbs of 30/50 White Sand, and 1000% gal of 15% HCL.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 5231 Max pressure during treatment (psi): 5335

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.77

Total acid used in treatment (bbl): 24 Number of staged intervals: 8

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 1744

Fresh water used in treatment (bbl): 4931 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 90140 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ 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.

FORMATION: J SAND Status: TEMPORARILY ABANDONED Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/24/2012 End Date: 05/24/2012 Date of First Production this formation: 06/09/2012

Perforations Top: 7576 Bottom: 7610 No. Holes: 136 Hole size: 0.38

Provide a brief summary of the formation treatment: _____ Open Hole:

Slickwater frac on the J-Sand with a total of 207,130 gal of FR-Water, 90,420 lbs of 30/50 White Sand, 1000 gal of 15% HCL acid.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 5255 Max pressure during treatment (psi): 5941

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.61

Total acid used in treatment (bbl): 24 Number of staged intervals: 8

Recycled water used in treatment (bbl): 0 Flowback volume recovered (bbl): 1751

Fresh water used in treatment (bbl): 4931 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 90420 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production: Because of economic and production reasons, the J-Sand has been TA.

Date formation Abandoned: 03/15/2013 Squeeze: Yes No If yes, number of sacks cmt _____

** Bridge Plug Depth: 7175 ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.

FORMATION: NIOBRARA-CODELL Status: PRODUCING Treatment Type: _____

Treatment Date: _____ End Date: _____ Date of First Production this formation: 03/19/2013

Perforations Top: 6926 Bottom: 7136 No. Holes: 204 Hole size: 0.38

Provide a brief summary of the formation treatment: _____ Open Hole:

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: _____ Min 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: 06/19/2012 Hours: 24 Bbl oil: 20 Mcf Gas: 16 Bbl H2O: 0

Calculated 24 hour rate: Bbl oil: 20 Mcf Gas: 16 Bbl H2O: 0 GOR: 800

Test Method: flowing Casing PSI: 1200 Tubing PSI: 1000 Choke Size: 16/64

Gas Disposition: SOLD Gas Type: WET Btu Gas: 1251 API Gravity Oil: 48

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7104 Tbg setting date: 03/15/2013 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.

FORMATION: NIORARA Status: COMMINGLED Treatment Type: FRACTURE STIMULATION

Treatment Date: 05/24/2012 End Date: 05/24/2012 Date of First Production this formation: 06/19/2012
Perforations Top: 6926 Bottom: 6952 No. Holes: 128 Hole size: 0.38

Provide a brief summary of the formation treatment: _____ Open Hole:

Slickwater Frac on the Niobrara with a total of 183,624 gal of FR-Water, and 90,100 lbs of 30/50 White Sand.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 5486 Max pressure during treatment (psi): 6446

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.33

Type of gas used in treatment: _____ Min frac gradient (psi/ft): 0.94

Total acid used in treatment (bbl): 0 Number of staged intervals: 6

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): 1829

Fresh water used in treatment (bbl): 4372 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 90100 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: _____ Hours: _____ Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____

Calculated 24 hour rate: Bbl oil: _____ Mcf Gas: _____ Bbl H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ Btu Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ 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:

Synergy Resources acquired this well from Orr Energy, effective October 2012. The fracture treatments reported in this 5A were conducted by Orr Energy, previous 5As for these treatments were on Hold and finally withdrawn and that is why I am reporting them now. Synergy Resources set the Bridge Plug over the J-Sand, which is also reported in this 5A. Please let me know if there is any other information imperative for the form's approval.

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: 5/15/2013 Email bvisconti@syrginfo.com

Attachment Check List

Att Doc Num	Name
400418356	FORM 5A SUBMITTED
400418677	WIRELINE JOB SUMMARY
400418679	WELLBORE DIAGRAM

Total Attach: 3 Files

General Comments

User Group

Comment

Comment Date

User Group	Comment	Comment Date

Total: 0 comment(s)