

State of Colorado Oil and Gas Conservation Commission

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



OGCC RECEPTION

Receive Date: 03/10/2014

Document Number: 400569080

CERTIFICATION OF CLEARANCE AND/OR CHANGE OF OPERATOR

This form is to be used for Certification of Clearance to transport product off lease. A Form 10 shall be filed for a well within 30 days of first production or a change of transporter/gatherer. A Form 10 shall be filed within 15 days of a change or transfer of ownership of a well, location, pit or facility. Documentation for ratification of sale or transfer of ownership must be attached for Change of Operator. It is the Operator's responsibility to mail approved copies to the Transporter and/or Gatherer for each well listed. This form is not used for well name or well status changes. For more information, visit www.http://ogcc.state.co.us

OGCC Operator Number: 10311 Contact Person: Rhonda Sandquist
Company Name: SYNERGY RESOURCES CORPORATION Phone: (970) 737-1073
Address: 20203 HIGHWAY 60 Fax: (970) 737-1045
City: PLATTEVILLE State: CO Zip: 80651 Email: rsandquist@syrginfo.com

Operator Bond Status: [X] Blanket Surety ID: 2009-0055 Individual Surety ID: see listing by individual well

[] New Well Cert of Clearance [X] Change of Operator [] Add/Change Transporter or Gatherer

Effective Date of Change Below 03/01/2014 Form is being submitted by: Seller

Non-Submitting Operator Information:

OGCC Number of NON-Submitting 68710 Name of NON-Submitting PETERSON ENERGY OPERATING INC
NON-submitting Operator is Buyer Contact Name Sarah Newton Title: Permit Tech
NON-submitting Operator Contact Email: sarah@petersonenergyoperating.com

Add/Change Transporter or Gatherer

[X] Add [] Delete Product: [X] Oil [] Gas

OGCC Transporter No: 83720 Suffix:
Trans./Gatherer Name: SUNCOR ENERGY (USA) INC
Address: 103 FOULK RD STE 202 City: WILMINGTON State: DE Zip: 19803
Phone: (403) 205-6898 Email Contact: mkorenblat@suncor.com

[X] Add [] Delete Product: [] Oil [X] Gas

OGCC Transporter No: 4680 Suffix:
Trans./Gatherer Name: DCP MIDSTREAM LP
Address: 370 17TH STREET - SUITE 2500 City: DENVER State: CO Zip: 80202
Phone: (303) 595-3331 Email Contact: blbackes@dcpmidstream.com

Remark:

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct and complete. The transporter(s)/gatherer(s) is (are) authorized to transport the oil and/or gas produced from the listed well(s) and that this authorization will be valid until further notice to the transporter named herein or until cancelled by the Colorado Oil and Gas Conservation Commission.

SUBMITTED BY:

Signed: Title: Office Manager Print Name: Sandquist,Rhonda Email: rsandquist@syrginfo.com Date: 03/10/2014

CHANGE OF OPERATOR:

Name of Buying Operator:

Name of Selling Operator:

PETERSON ENERGY OPERATING INC

SYNERGY RESOURCES CORPORATION

Signature: _____ Date: 03/01/2014

Signature: _____ Date: 03/01/2014

Print Name: Sarah Newton Title: Permit Tech

Print Name: Sandquist, Rhonda Title: Office Manager

COGCC Approved: _____

Title: _____

Date: _____

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CHANGE OF TRANSPORTER/GATHERER and/or CHANGE OF OPERATOR

OGCC Operator Number: 10311
Name of Operator: SYNERGY RESOURCES CORPORATION

FOR OGCC USE ONLY

CENTRALIZED EP WASTE MGMT FAC: 0	GAS STORAGE FACILITY: 0	SERVICE SITE: 0	UIC SIMULTANEOUS DISPOSAL: 0
GAS COMPRESSOR: 0	LOCATION: 0	TANK BATTERY: 0	UIC WATER TRANSFER STATION: 0
GAS GATHERING SYSTEM: 0	PIPELINE: 0	UIC DISPOSAL: 0	WATER GATHERING SYSTEM LINE: 0
GAS PROCESSING PLANT: 0	PIT: 0	UIC ENHANCED RECOVERY: 0	WELL: 2

Total Approved: 0 Total out of Total Total Submitted: 2 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			

Total Deleted: 0 Total out of Total Total Submitted: 2 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			

Total Pending: 2 Total out of Total Total Submitted: 2 are listed below:

#	TYPE	API	FAC ID	Loc#	Facility		Location (QQ/S/T/R)	Surety ID	Transporter / Gatherer
					Name	Number			
1	WELL	123-26634	293838	332762	NLB	2-1-12	NENW/12/4N/68W		4680
	WELL		293838	332762					83720
2	WELL	123-26635	293839	332762	NLB	1-3-12	NENW/12/4N/68W		4680
	WELL		293839	332762					83720