

FORM
42

Rev
03/12

State of Colorado
Oil and Gas Conservation Commission

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



OGCC RECEPTION

Receive Date:

09/23/2014

Document Number:

400694137

NOTICE OF NOTIFICATION

Entity Information

OGCC Operator Number: 10311 Contact Person: Brianne Visconti
Company Name: SYNERGY RESOURCES CORPORATION Phone: (970) 737-1073
Address: 20203 HIGHWAY 60 Fax: (970) 737-1045
City: PLATTEVILLE State: CO Zip: 80651 Email: bvisconti@syrinfo.com
API #: 05 - 123 - 13785 - 00 Facility ID: _____ Location ID: _____
Facility Name: SHABLE 1-7 ☐ Submit By Other Operator
Sec: 7 Twp: 4N Range: 66W QtrQtr: NENE Lat: 40.332590 Long: -104.814144

OFFSET MITIGATION COMPLETED

This well was mitigated per the Offset Horizontal Policy. Permitted horizontal well requiring mitigation - API # 123-39558

Appropriate documentation for mitigation has been/will be submitted.

This form must be signed by an authorized agent of the entity making assertion.

I certify under penalty of perjury that this report has been examined by me and to the best of my knowledge is true, correct and complete.

Print Name: Brianne Visconti Email: bvisconti@syrinfo.com
Signature: Brianne Visconti Title: Operations Administrator Date: 09/23/2014