

FORM
2
Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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APPLICATION FOR PERMIT TO:

1. Drill, Deepen, Re-enter, Recomplete and Operate

2. TYPE OF WELL

OIL GAS COALBED OTHER _____
SINGLE ZONE MULTIPLE ZONE COMMINGLE ZONE

Refiling
Sidetrack

Document Number:
1711505
Plugging Bond Surety
20040071

3. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION 4. COGCC Operator Number: 10079

5. Address: 1625 17TH ST STE 300
City: DENVER State: CO Zip: 80202

6. Contact Name: HANNAH KNOPPING Phone: (303)357-6412 Fax: (303)357-7315
Email: HKNOPPING@ANTERORESOURCES.COM

7. Well Name: BAT Well Number: 24B-17-07-95

8. Unit Name (if appl): _____ Unit Number: _____

9. Proposed Total Measured Depth: 6613

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 17 Twp: 7S Rng: 95W Meridian: 6
Latitude: 39.432958 Longitude: -108.025213

Footage at Surface: 913 FNL/FSL FSL 1454 FEL/FWL FWL

11. Field Name: PARACHUTE Field Number: 67350

12. Ground Elevation: 5563 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 06/19/2009 PDOP Reading: 1.8 Instrument Operator's Name: SCOTT E. AIBNER

15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 723 FSL 1982 FWL FWL Bottom Hole: FNL/FSL 723 FSL 1982 FEL/FWL FWL
Sec: 17 Twp: 7S Rng: 95W Sec: 17 Twp: 7S Rng: 95W

16. Is location in a high density area? (Rule 603b)? Yes No

17. Distance to the nearest building, public road, above ground utility or railroad: 661 ft

18. Distance to nearest property line: 263 ft 19. Distance to nearest well permitted/completed in the same formation: 610 ft

20. LEASE, SPACING AND POOLING INFORMATION

Objective Formation(s)	Formation Code	Spacing Order Number(s)	Unit Acreage Assigned to Well	Unit Configuration (N/2, SE/4, etc.)
ILES	ILES	440-58	240	SW4 W2SE4
WILLIAMS FORK-CAMEO	WFCM	440-58	240	NW4W2NE4

21. Mineral Ownership: Fee State Federal Indian Lease #: _____

22. Surface Ownership: Fee State Federal Indian

23. Is the Surface Owner also the Mineral Owner? Yes No Surface Surety ID#: _____

23a. If 23 is Yes: Is the Surface Owner(s) signature on the lease? Yes No

23b. If 23 is No Surface Owners Agreement Attached or \$25,000 Blanket Surface Bon \$2,000 Surface Bond \$5,000 Surface Bond

24. Using standard QtrQtr, Sec, Twp, Rng format enter entire mineral lease description upon which this proposed wellsite is located (attach separate sheet/map if you prefer):
 SEC 17-T7S-R95W-E/2SW/4SW/4, PORTIONS OF SW/4SE/4SW/4, N/2SE/4SW/4

25. Distance to Nearest Mineral Lease Line: 65 ft 26. Total Acres in Lease: 44

DRILLING PLANS AND PROCEDURES

27. Is H2S anticipated? Yes No If Yes, attach contingency plan.

28. Will salt sections be encountered during drilling? Yes No

29. Will salt (>15,000 ppm TDS CL) or oil based muds be used during drilling? Yes No

30. If questions 27 or 28 are yes, is this location in a sensitive area (Rule 903)? Yes No **If 28, 29, or 30 are "Yes" a pit permit may be required.**

31. Mud disposal: Offsite Onsite

Method: Land Farming Land Spreading Disposal Facility Other: GARFIELD CITY LANDFILL

Note: The use of an earthen pit for Recompletion fluids requires a pit permit (Rule 905b). If air/gas drilling, notify local fire officials.

Casing Type	Size of Hole	Size of Casing	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	24	16	55	60	125	60	0
SURF	12+1/4	8+5/8	32	1,000	500	1,000	0
1ST	7+7/8	4+1/2	11.7	6,613	600	6,613	3,363

32. BOP Equipment Type: Annular Preventer Double Ram Rotating Head None

33. Comments 305/306 LETTER DATED 06/12/09 SIGNED BY SURFACE OWNER WAIVING CONSULTATION MEETING. #20: WE HAVE A SPACING APPLICATION PENDING FOR 10 ACRE DENSITY. THE COGCC HEARING IS AUGUST 18, 2009 (SEE ATTACHED).

34. Location ID: _____

35. Is this application in a Comprehensive Drilling Plan ? Yes No

36. Is this application part of submitted Oil and Gas Location Assessment ? Yes No

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: HANNAH KNOPPING

Title: PERMIT REP Date: 7/16/2009 Email: hknopping@antreoresources.co

Based on the information provided herein, this Application for Permit-to-Drill complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: David S. Neslin Director of COGCC Date: 8/28/2009

Permit Number: _____ Expiration Date: 8/27/2010

API NUMBER
 05 045 18715 00

CONDITIONS OF APPROVAL, IF ANY:

All representations, stipulations and conditions of approval stated in the Form 2A for this location shall constitute representations, stipulations and conditions of approval for this Form 2 Permit-to-Drill and are enforceable to the same extent as all other representations, stipulations and conditions of approval stated in this Permit-to-Drill.

approve w/COA's: 1, 2, 19, *280 24 HOUR SPUD NOTICE REQUIRED. E-MAIL: david.andrews@state.co.us
GARFIELD COUNTY RULISON FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE CEMENT TOP VERIFICATION BY CBL REQUIRED. THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1-MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1-MILE IS 280 FEET DEEP.

Attachment Check List

Att Doc Num	Name	Doc Description
1711505	APD ORIG & 1 COPY	LF@2100432 1711505
1711506	WELL LOCATION PLAT	LF@2100433 1711506
1711507	ACCESS ROAD MAP	LF@2100463 1711507
1711508	MINERAL LEASE MAP	LF@2100467 1711508
1711509	30 DAY NOTICE LETTER	LF@2100434 1711509
1711510	DEVIATED DRILLING PLAN	LF@2100435 1711510
1712449	CORRESPONDENCE	LF@2128994 1712449
1814076	MINERAL LEASE MAP	LF@2100465 1814076

Total Attach: 8 Files