

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

Refilling
Sidetrack

Document Number:
400019136
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: 14B-17-07-95

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

9. Proposed Total Measured Depth: 6573

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 17 Twp: 7S Rng: 95W Meridian: 6
Latitude: 39.432975 Longitude: -108.025280

Footage at Surface: 919 FNL/FSL FSL 1435 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 855 FSL 661 FWL 661 FEL/FWL 855 FSL 661 FWL 661
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: 675 ft

18. Distance to nearest property line: 274 ft 19. Distance to nearest well permitted/completed in the same formation: 292 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	SW/4 and W/2SE/4
Williams Fork	WMFK	440-58	240	SW/4 and W/2SE/4

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#: 20040072

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):
T7S-R95W-Section 17: W/2SW/4SW/4 and Section 18: SE/4SE/4

25. Distance to Nearest Mineral Lease Line: _____ 1 ft _____ 26. Total Acres in Lease: _____ 60 _____

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: Closed loop:GarCty 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	20	16	55#	60	100	60	0
SURF	12+1/4	8+5/8	32#	1,000	416	1,000	0
1ST	7+7/8	4+1/2	11.6#	6,573	750	6,573	

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

33. Comments 1st String/Production TOC=200' above Top of Gas.

34. Location ID: 413055

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 Representative Date: 12/1/2009 Email: hknopping@anteroresources.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: 2/3/2010

Permit Number: _____ Expiration Date: 2/2/2012

API NUMBER
05 045 19109 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.

1)24 HOUR SPUD NOTICE REQUIRED. E-MAIL: david.andrews@state.co.us 2)GARFIELD COUNTY RULISON FIELD NOTICE TO OPERATORS. NOTE: ALL NOTICES SHALL BE GIVEN VIA E-MAIL. SEE ATTACHED NOTICE 3)CEMENT TOP VERIFICATION BY CBL REQUIRED. 4)THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE 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
400019137	WELL LOCATION PLAT	LF@2197918 400019137
400019138	ACCESS ROAD MAP	LF@2197921 400019138
400019139	30 DAY NOTICE LETTER	LF@2197922 400019139
400019140	DEVIATED DRILLING PLAN	LF@2197925 400019140
400019395	FORM 2 SUBMITTED	LF@2197926 400019395

Total Attach: 5 Files