

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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Document Number:

1828677

Plugging Bond Surety

20040071

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 ☒

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)357-7310 Fax: (303)357-7315

Email: _____

7. Well Name: RIVER RANCH Well Number: C9

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

9. Proposed Total Measured Depth: 13392

WELL LOCATION INFORMATION

10. QtrQtr: NESW Sec: 8 Twp: 6S Rng: 92W Meridian: 6

Latitude: 39.539887 Longitude: -107.692312

Footage at Surface: 2182 FNL/FSL FSL 2207 FEL/FWL FWL

11. Field Name: MAMM CREEK Field Number: 52500

12. Ground Elevation: 5384 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 06/11/2008 PDOP Reading: 1.3 Instrument Operator's Name: SAMUEL D PHELPS

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

Footage at Top of Prod Zone: FNL/FSL 2374 FNL 2065 FEL FEL Bottom Hole: FNL/FSL 2374 FNL 2065 FEL FEL
Sec: _____ Twp: _____ Rng: _____ Sec: 8 Twp: 6S Rng: 92W

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: 1920 ft

18. Distance to nearest property line: 695 ft 19. Distance to nearest well permitted/completed in the same formation: 930 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	191-52	195	E/2
MANCOS	MNCS	191-60		
NIOBRARA	NBRR	191-60		
WILLIAMS FORK	WMFK	191-52	195	E/2

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):
SEE ATTACHED PLAT #6 AND EXHIBIT A: SEC 8: LOT 8, LOT 9, NESE 7 S/2 SE

25. Distance to Nearest Mineral Lease Line: 273 ft 26. Total Acres in Lease: 195

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: _____

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	46	100	46	0
SURF	12+1/4	9+5/8	24	1,481	530	1,481	0
1ST	7+7/8	5+1/2	17	13,392	2,761	13,392	4,767

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

33. Comments WAIVER FOR 305-306 (SEE NEW LETTER ATTACHED). THIS WELL IS AN EXCEPTION LOCATION TO RULE 318A. A SIGNED WAIVER AND DIRECTOR LETTER ARE 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: Y Print Name: HANNAH KNOPPING

Title: PERMIT REP Date: 8/17/2009 Email: HKNOPPING@ANTERORESO

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: 11/12/2009

API NUMBER

05 045 16241 01

Permit Number: _____ Expiration Date: 11/11/2011

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.

Attachment Check List

Att Doc Num	Name	Doc Description
1828705	WELL LOCATION PLAT	
1828706	DEVIATED DRILLING PLAN	

Total Attach: 2 Files