

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:

400067859

Plugging Bond Surety

20040071

3. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION 4. COGCC Operator Number: 100795. Address: 1625 17TH ST STE 300City: DENVER State: CO Zip: 802026. Contact Name: Hannah Knopping Phone: (303)357-6412 Fax: (303)357-7315Email: hknopping@anteroresources.com7. Well Name: BAT Well Number: 24C-17-07-95

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

9. Proposed Total Measured Depth: 6637

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 17 Twp: 7S Rng: 95W Meridian: 6Latitude: 39.433225 Longitude: -108.025102Footage at Surface: 1010 FNL/FSL FSL 1486 FEL/FWL FWL11. Field Name: Parachute Field Number: 6735012. 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. Aibner15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**Footage at Top of Prod Zone: FNL/FSL 456 FSL 1978 FWL FWL Bottom Hole: FNL/FSL 456 FSL 1978 FEL/FWL FWLSec: 17 Twp: 7S Rng: 95W Sec: 17 Twp: 7S Rng: 95W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 725 ft18. Distance to nearest property line: 312 ft 19. Distance to nearest well permitted/completed in the same formation: 285 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, W/2SE/4
Williams Fork	WMFK	440-58	240	SW/4, 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):
Section 17-T7S-R95W: Portions of NW/4SW/4SE/4, Portions of SW/4SE/4SW/4 (force pooled lease-See Order 440-57)

25. Distance to Nearest Mineral Lease Line: 25 ft 26. Total Acres in Lease: 16

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: Bury onsite if meet Table 91

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	177	60	0
SURF	12+1/4	8+5/8	24/32#	1,000	416	1,000	0
1ST	7+7/8	4+1/2	11.7#	6,637	756	6,637	

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

33. Comments 1st String/Production TOC=>200' above Top of Gas. #24: The well location complies with state setbacks. Distance given is to nearest lease line within the drilling and spacing unit. The distance to the unit boundary is 456'.

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: _____ 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: _____ Director of COGCC Date: _____

API NUMBER: 05 Permit Number: _____ Expiration Date: _____

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
400067894	WELL LOCATION PLAT	BAT 24C-17-07-95 Surface Location Plat.pdf
400067896	DEVIATED DRILLING PLAN	BAT 24C-17-07-95_Directional Plan.pdf
400067897	30 DAY NOTICE LETTER	Watson Ranch Pad_30 Day Letter.pdf
400067898	TOPO MAP	Watson Ranch Pad_Topo.pdf

Total Attach: 4 Files