

State of Colorado
Oil and Gas Conservation Commission

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



02607138



SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

RECEIVED

JUN 07 2010

COGCC

Complete the Attachment
Checklist

OP OGCC

1. OGCC Operator Number: 10079 4. Contact Name
2. Name of Operator: Antero Resources Piceance Corporation Hannah Knopping
3. Address: 1625 17th Street, Suite 300 Phone: (303) 357-6412
City: Denver State: CO Zip: 80202 Fax: (303) 357-7315

5. API Number 05-045-10910 OGCC Facility ID Number 336016
6. Well/Facility Name: North Bank 7. Well/Facility Number A Pad
8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): SENW, Section 12, T6S, R93W, 6th P.M.
9. County: Garfield 10. Field Name: Mamm Creek
11. Federal, Indian or State Lease Number: _____

Survey Plat	
Directional Survey	
Surface Eqpm Diagram	
Technical Info Page	✓
Other	

General Notice

☐ CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)

Change of Surface Footage from Exterior Section Lines:

	FNL/FSL	FEL/FWL
Change of Surface Footage from Exterior Section Lines:		
Change of Surface Footage to Exterior Section Lines:		
Change of Bottomhole Footage from Exterior Section Lines:		
Change of Bottomhole Footage to Exterior Section Lines:		

attach directional survey

Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer

Latitude _____ Distance to nearest property line _____ Distance to nearest bldg, public rd, utility or RR _____
Longitude _____ Distance to nearest lease line _____ Is location in a High Density Area (rule 603b)? Yes/No ☐
Ground Elevation _____ Distance to nearest well same formation _____ Surface owner consultation date: _____

GPS DATA:

Date of Measurement _____ PDOP Reading _____ Instrument Operator's Name _____

☐ CHANGE SPACING UNIT

Formation _____ Formation Code _____ Spacing order number _____ Unit Acreage _____ Unit configuration _____

☐ Remove from surface bond

Signed surface use agreement attached

☐ CHANGE OF OPERATOR (prior to drilling):

Effective Date: _____
Plugging Bond: ☐ Blanket ☐ Individual

☐ CHANGE WELL NAME

NUMBER

From: _____
To: _____
Effective Date: _____

☐ ABANDONED LOCATION:

Was location ever built? ☐ Yes ☐ No
Is site ready for inspection? ☐ Yes ☐ No
Date Ready for inspection: _____

☐ NOTICE OF CONTINUED SHUT IN STATUS

Date well shut in or temporarily abandoned: _____
Has Production Equipment been removed from site? ☐ Yes ☐ No
MIT required if shut in longer than two years. Date of last MIT _____

☐ SPUD DATE: _____☐ REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)☐ SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK

*submit cbl and cement job summaries

Method used _____ Cementing tool setting/perf depth _____ Cement volume _____ Cement top _____ Cement bottom _____ Date _____

☐ RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.

Final reclamation will commence on approximately _____ ☐ Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

☐ Notice of Intent

Approximate Start Date: _____

☐ Report of Work Done

Date Work Completed: _____

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: <u>Containment COA</u>	for Spills and Releases

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

Signed: Hannah KnoppingDate: 6/3/10 Email: hknopping@anteroresources.comPrint Name: Hannah KnoppingTitle: Permit RepresentativeCOGCC Approved: Linda SmythTitle: EP&NW RegionDate: 6/10/2010

CONDITIONS OF APPROVAL, IF ANY:

TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY

RECEIVED
JUN 07 2010
COGCC

1. OGCC Operator Number: 10079 API Number: _____
2. Name of Operator: Antero Resources Piceance Corp. OGCC Facility ID # 336016
3. Well/Facility Name: North Bank Well/Facility Number: A Pad
4. Location (QtrQtr, Sec, Twp, Rng, Meridian): SENW, Section 12, T6S, R93W, 6th P.M.

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

Antero Resources Piceance Corporation requests that the COA that was issued for this pad location requiring a Secondary and Tertiary Containment Plan for our frac/flowback tanks be removed for the following reason:

The well pad is approximately 820 feet from the Colorado River to the south and within the outer 317B buffer area (500'-2640').

WELL NAME	API#
NORTHBANK A1	05-045-10910
NORTHBANK A2	05-045-12393
NORTHBANK A3	05-045-12392
NORTHBANK A5	05-045-10903
NORTHBANK A6	05-045-12391
NORTHBANK A7	05-045-12390