

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:

400075519

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: Frei Well Number: A18

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

9. Proposed Total Measured Depth: 7426

WELL LOCATION INFORMATION

10. QtrQtr: SWSW Sec: 7 Twp: 6S Rng: 91W Meridian: 6Latitude: 39.535989 Longitude: -107.603319Footage at Surface: 545 FNL/FSL FSL 903 FEL/FWL FWL11. Field Name: Kokopelli Field Number: 4752512. Ground Elevation: 5590 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 05/10/2010 PDOP Reading: 2.4 Instrument Operator's Name: Scott Aibner15. If well is Directional Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL _____ FEL/FWL _____ Bottom Hole: FNL/FSL _____ FEL/FWL _____

2364 FSL 604 FEL 2364 FSL 604 FELSec: 12 Twp: 6S Rng: 92W Sec: 12 Twp: 6S Rng: 92W16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 529 ft18. Distance to nearest property line: 335 ft 19. Distance to nearest well permitted/completed in the same formation: 341 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	513, 523-6	320	E2
Williams Fork	WMFK	513, 523-6	320	E2

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):
See attached lease map.

25. Distance to Nearest Mineral Lease Line: 225 ft 26. Total Acres in Lease: 34

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: Onsite if meet table 910

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	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	11.6#	7,426	730	7,426	

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

33. Comments First String/Production TOC will be >500 feet above Top of Gas.
#24-The well distance given is to a lease line within the drilling and spacing unit. BHL complies with spacing order with respect to distance to unit boundary. The Unit Configuration consists of Section 12-T6S-R92W: E/2 (~320-acre unit).

34. Location ID: 417777

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@anteoresources.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: _____
Permit Number: _____ Expiration Date: _____

API NUMBER

05

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
400075640	WELL LOCATION PLAT	Frei A18 Surface Location Plat.pdf
400075642	LEASE MAP	Frei A Pad_Lease Map (Montover-34.15acres).pdf
400075643	30 DAY NOTICE LETTER	Frei A Pad_Signed 30-Day Letter.pdf
400075644	TOPO MAP	Frei A Pad_Topo Map.pdf
400075645	SURFACE AGRMT/SURETY	Frei SUA - Signed and Redacted for Permitting.pdf
400076201	DEVIATED DRILLING PLAN	Frei A18 P01.pdf

Total Attach: 6 Files