

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:

400097961

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: 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: 44B-18-07-95

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

9. Proposed Total Measured Depth: 6304

WELL LOCATION INFORMATION

10. QtrQtr: SESE Sec: 18 Twp: 7S Rng: 95W Meridian: 6Latitude: 39.431238 Longitude: -108.033169
 Footage at Surface: _____ FNL/FSL _____ FEL/FWL _____
296 FSL 802 FEL
11. Field Name: Parachute Field Number: 6735012. Ground Elevation: 5441 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/17/2010 PDOP Reading: 3.0 Instrument Operator's Name: Elwood Barry Giles15. 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 _____
765 FSL 653 FEL 765 FSL 653 FEL
 Sec: 18 Twp: 7S Rng: 95W Sec: 18 Twp: 7S Rng: 95W
16. Is location in a high density area? (Rule 603b)? Yes No17. Distance to the nearest building, public road, above ground utility or railroad: 367 ft18. Distance to nearest property line: 519 ft 19. Distance to nearest well permitted/completed in the same formation: 289 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	440-60	320	S/2
Williams Fork	WMFK	440-60	320	S/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#: _____

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 mineral lease map.

25. Distance to Nearest Mineral Lease Line: 554 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: Onsite if meet Tbl 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#	2,200	834	2,200	0
1ST	7+7/8	4+1/2	11.6#	6,304	635	6,304	

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

33. Comments First String/Production TOC will be >200 feet above Top of Gas. NOTE: Antero Resources (applicant) is the surface owner of the SESE of Section 18-T7S-R95W and a portion of the N2NENE of Section 19-T7S-R95W, where the subject well pad will be located and therefore no 30-Day Letter or SUA have been 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: _____ 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: _____

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
400097965	WELL LOCATION PLAT	BAT 44B-18-07-95 Plat.pdf
400097966	MINERAL LEASE MAP	Mineral Lease Map - Antero-Exxon-US AgBank HBP (60 acres).pdf
400102071	DEVIATED DRILLING PLAN	Antero BAT 44B-18-07-95 P01.pdf
400104696	TOPO MAP	Monument Ridge_Access Road Map.pdf

Total Attach: 4 Files