

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:

400100727

Plugging Bond Surety

20040071

3. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION4. 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: 43A-24-07-96

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

9. Proposed Total Measured Depth: 5950

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 24 Twp: 7S Rng: 96W Meridian: 6Latitude: 39.420406 Longitude: -108.052829

FNL/FSL

FEL/FWL

Footage at Surface: 1689 FSL 1164 FEL11. Field Name: Wildcat Field Number: 9999912. Ground Elevation: 5254 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 08/05/2010 PDOP Reading: 2.4 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 2406 FSL 670 FEL 670 FEL 670 Bottom Hole: FNL/FSL 2406 FSL 670 FEL 670
Sec: 24 Twp: 7S Rng: 96W Sec: 24 Twp: 7S Rng: 96W16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 300 ft18. Distance to nearest property line: 300 ft 19. Distance to nearest well permitted/completed in the same formation: 903 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.)
Williams Fork	WMFK	139-31	640	ALL

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: 670 ft 26. Total Acres in Lease: 378

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#	5,950	546	5,950	

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. #24-BHL complies with spacing order with respect to distance to unit boundary. Distance to unit boundary=670 feet.

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: _____

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
400106342	DEVIATED DRILLING PLAN	Antero BAT 43A-24-07-96 P01.pdf
400106348	WELL LOCATION PLAT	BAT 43A-24-07-96 Surface Location Plats.pdf
400106349	TOPO MAP	Speakman B Pad Access Road Map.pdf
400106350	LEASE MAP	Speakman B Pad Mineral Lease Map - Antero_Exxon (378 acres).pdf
400106351	SURFACE AGRMT/SURETY	Speakman B Pad Signed Speakman SUA Redacted.pdf
400107205	30 DAY NOTICE LETTER	Speakman A&B_30 Day Letter (sent 10-21-10).pdf

Total Attach: 6 Files