

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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| DE | ET | OE | ES |
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Document Number:

400119584

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 ☒

Refilling ☒

Sidetrack ☐

3. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION

4. COGCC Operator Number: 10079

5. Address: 1625 17TH ST STE 300

City: DENVER State: CO Zip: 80202

6. Contact Name: Hannah Knopping Phone: (303)357-6412 Fax: (303)357-7315

Email: hknopping@anteroresources.com

7. Well Name: Dixon Federal Well Number: B4

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

9. Proposed Total Measured Depth: 7924

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 15 Twp: 6S Rng: 92W Meridian: 6

Latitude: 39.524162 Longitude: -107.659676

Footage at Surface: 1597 feet FNL/FSL FSL 787 feet FEL/FWL FWL

11. Field Name: Mamm Creek Field Number: 52500

12. Ground Elevation: 5513 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 09/28/2007 PDOP Reading: 1.4 Instrument Operator's Name: Scott E. Aibner

15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: FNL/FSL 2464 FSL 2073 FWL 2464 FSL 2073 FWL
Sec: 15 Twp: 6S Rng: 92W Sec: 15 Twp: 6S Rng: 92W

16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No

17. Distance to the nearest building, public road, above ground utility or railroad: 465 ft

18. Distance to nearest property line: 299 ft 19. Distance to nearest well permitted/completed in the same formation: 437 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 | 191-25 | 320 | S/2 |
| Williams Fork | WMFK | 191-24 | 320 | S/2 |

21. Mineral Ownership: ☐ Fee ☐ State ☒ Federal ☐ Indian Lease #: COC65762

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 Bond ☐ \$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 15-T6S-R92W: NE/4SW/4

25. Distance to Nearest Mineral Lease Line: 132 ft 26. Total Acres in Lease: 40

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 | Wt/Ft | Csg/Line Top | Setting Depth | Sacks Cmt | Cmt Btm | Cmt Top |
|-------------|--------------|----------------|--------|--------------|---------------|-----------|---------|---------|
| CONDUCTOR | 24 | 16 | 55# | 0 | 60 | 177 | 60 | 0 |
| SURF | 12+1/4 | 8+5/8 | 24/32# | 0 | 1,000 | 416 | 1,000 | 0 |
| 1ST | 7+7/8 | 4+1/2 | 11.6# | 0 | 7,924 | 356 | 7,924 | |

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

33. Comments I certify that conditions in the original permit are the same except SHL change, BHL change, new TD, new lease information and updated casing program. An updated plat and directional plan are attached. This Refile Form 2 does not require a Form 2A because the pad has been constructed, a closed loop system is being used so no pits need to be constructed, the refiled well will not require any expansion / additional surface disturbance of the pad. The location is not in a wildlife restricted surface occupancy area (RSO); consultation with CDOW is not required and the location does not require a variance from any of the rules listed in Rule 306.d.(1).(A).(ii).; consultation with CDPHE is not required. TOP OF CEMENT OF 1ST STRING/PRODUCTION CASING WILL BE >500 FEET ABOVE TOP OF GAS. PLEASE NOTE THAT THE SHL AND BHL OF ALL PERMITTED WELLS HAVE BEEN MODIFIED SO ANY APPARENT DUPLICATE SHL OR BHL'S WILL BE RECTIFIED ONCE EACH RE-FILED PERMIT IS APPROVED.

34. Location ID: 311696

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

05 045 14371 00

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 |
|-------------|------------------------|
| 400119585 | WELL LOCATION PLAT |
| 400120117 | 30 DAY NOTICE LETTER |
| 400120118 | DEVIATED DRILLING PLAN |

Total Attach: 3 Files

General Comments

| <u>User Group</u> | <u>Comment</u> | <u>Comment Date</u> |
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Total: 0 comment(s)

BMP

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