

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:

400076778

Plugging Bond Surety

20040071

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: McLin Well Number: A15

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

9. Proposed Total Measured Depth: 7064

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 12 Twp: 6S Rng: 92W Meridian: 6

Latitude: 39.536952 Longitude: -107.617186

Footage at Surface: 933 feet FNL/FSL FSL 2255 feet FEL/FWL FWL

11. Field Name: Kokopelli Field Number: 47525

12. Ground Elevation: 5608 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 01/19/2010 PDOP Reading: 2.4 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 941 FSL 1772 FEL FEL Bottom Hole: FNL/FSL 941 FSL 1772 FEL FEL
Sec: 12 Twp: 6S Rng: 92W Sec: 12 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: 418 ft

18. Distance to nearest property line: 418 ft 19. Distance to nearest well permitted/completed in the same formation: 331 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 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):
See attached lease map

25. Distance to Nearest Mineral Lease Line: 65 ft 26. Total Acres in Lease: 39

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 910-1

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/Liner Top	Setting Depth	Sacks Cmt	Cmt Btm	Cmt 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#		7,064	660	7,064	

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.

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: 8/25/2010 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: David S. Neslin Director of COGCC Date: 1/21/2011

API NUMBER

05 045 20336 00

Permit Number: _____ Expiration Date: 1/20/2013

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.

1.PRODUCTION CASING CEMENT TOP VERIFICATION BY CBL REQUIRED.

2.THE PROPOSED SURFACE CASING IS MORE THAN 50' BELOW THE DEPTH OF THE DEEPEST WATER WELL WITHIN 1MILE OF THE SURFACE LOCATION WHEN CORRECTED FOR ELEVATION DIFFERENCES. THE DEEPEST WATER WELL WITHIN 1 MILE IS 256 FEET DEEP.

Attachment Check List

Att Doc Num	Name
400076778	FORM 2 SUBMITTED
400085389	30 DAY NOTICE LETTER
400085390	SURFACE AGRMT/SURETY
400085391	LEASE MAP
400085392	WELL LOCATION PLAT
400087596	TOPO MAP
400087599	DEVIATED DRILLING PLAN

Total Attach: 7 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)

BMP

<u>Type</u>	<u>Comment</u>

Total: 0 comment(s)