

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:  
400127562  
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: Dixon Federal Well Number: B13

8. Unit Name (if appl): \_\_\_\_\_ Unit Number: \_\_\_\_\_

9. Proposed Total Measured Depth: 7575

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 15 Twp: 6S Rng: 92W Meridian: 6  
Latitude: 39.524110 Longitude: -107.659729

Footage at Surface: 1578 feet FNL/FSL FSL 772 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: 01/04/2011 PDOP Reading: 2.5 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 1815 FSL 597 FWL \_\_\_\_\_ Bottom Hole: FNL/FSL 1815 FSL 597 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: 403 ft

18. Distance to nearest property line: 279 ft 19. Distance to nearest well permitted/completed in the same formation: 332 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 #: \_\_\_\_\_

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):  
 Section 15-T6S-R92W: NW/4SW/4, except for small portion that is west of County Road 331. (See attached lease map)

25. Distance to Nearest Mineral Lease Line: 473 ft 26. Total Acres in Lease: 33

### 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 app.(See comment

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#	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	7,575	356	7,575	

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

33. Comments TOP OF CEMENT OF 1ST STRING/PRODUCTION CASING WILL BE >500 FEET ABOVE TOP OF GAS. #31 Mud Disposal: Antero will bury onsite if disposal meets Table 910 and if there is a provision in SUA which allows for such operation.

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: \_\_\_\_\_

<b>API NUMBER</b>  05	Permit Number: _____ Expiration Date: _____
<b>CONDITIONS OF APPROVAL, IF ANY:</b> _____	

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.

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**Attachment Check List**

Att Doc Num	Name
400127923	WELL LOCATION PLAT
400127929	DEVIATED DRILLING PLAN
400127933	30 DAY NOTICE LETTER
400127935	TOPO MAP
400127962	LEASE MAP

Total Attach: 5 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)