

FORM
5A

Rev
02/08

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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COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

Document Number:

400174587

1. OGCC Operator Number: 10079
2. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION
3. Address: 1625 17TH ST STE 300
City: DENVER State: CO Zip: 80202
4. Contact Name: Hannah Knopping
Phone: (303) 357-6412
Fax: (303) 357-7315

5. API Number 05-045-12390-00
6. County: GARFIELD
7. Well Name: NORTH BANK
Well Number: A7
8. Location: QtrQtr: SENW Section: 12 Township: 6S Range: 93W Meridian: 6
9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: COZZETTEStatus: PRODUCINGTreatment Date: 04/01/2010Date of First Production this formation: 09/28/2006Perforations Top: 8602 Bottom: 8734 No. Holes: 208 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐A portion of the Cozzette was T&A'd from 8680-'8734'.This formation is commingled with another formation: ☒ Yes ☐ No**Test Information:**Date: 05/03/2011 Hours: 24 Bbls oil: 0 Mcf Gas: 119 Bbls H2O: 5Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 119 Bbls H2O: 5 GOR: 0Test Method: Flowing Casing PSI: 724 Tubing PSI: 580 Choke Size: 30/64Gas Disposition: SOLD Gas Type: WET BTU Gas: 1008 API Gravity Oil: 0Tubing Size: 2 + 3/8 Tubing Setting Depth: 7119 Tbg setting date: 03/31/2010 Packer Depth: _____

Reason for Non-Production:

The upper portion of the Cozzette is still producing.Date formation Abandoned: 04/01/2010 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt _____Bridge Plug Depth: 8680 Sacks cement on top: 2FORMATION: CORCORANStatus: TEMPORARILY ABANDONEDTreatment Date: 04/01/2010Date of First Production this formation: 09/28/2006Perforations Top: 8934 Bottom: 8960 No. Holes: 60 Hole size: 0.42

Provide a brief summary of the formation treatment:

Open Hole: ☐This formation is commingled with another formation: ☐ Yes ☒ No**Test Information:**

Date: _____ Hours: _____ Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____

Calculated 24 hour rate: Bbls oil: _____ Mcf Gas: _____ Bbls H2O: _____ GOR: _____

Test Method: _____ Casing PSI: _____ Tubing PSI: _____ Choke Size: _____

Gas Disposition: _____ Gas Type: _____ BTU Gas: _____ API Gravity Oil: _____

Tubing Size: _____ Tubing Setting Depth: _____ Tbg setting date: _____ Packer Depth: _____

Reason for Non-Production:

The Corcoran is T&A'd with a CIBPDate formation Abandoned: 04/01/2010 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt _____Bridge Plug Depth: 8680 Sacks cement on top: 2

Comment:

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____

Print Name: Hannah KnoppingTitle: Permit Representative Date: _____ Email: hknopping@anteroresources.com

Based on the information provided herein, this Completed Interval Report (Form 5A) complies with COGCC Rules and applicable orders and is hereby approved.

COGCC Approved: _____ Director of COGCC Date: _____

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

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

Total: 0 comment(s)