



FORM
4
Rev 12/05

Page 1

State of Colorado
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109



SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)

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JUN 03 2011

OGCC/Rifle Office

Complete the Attachment
Checklist

OP OGCC

1. OGCC Operator Number: 10079	4. Contact Name Hannah Knopping
2. Name of Operator: Antero Resources Piceance Corporation	Phone: (303) 357-6412
3. Address: 1625 17th Street, Suite 300	Fax: (303) 357-7315
City: Denver State: CO Zip: 80202	
5. API Number 05- 045-20491-00	OGCC Facility ID Number
6. Well/Facility Name: Burckle Federal	7. Well/Facility Number A13
8. Location (QtrQtr, Sec, Twp, Rng, Meridian): NWSE, Section 16, T6S, R92W, 6th P.M.	
9. County: Garfield	10. Field Name: Mamm Creek
11. Federal, Indian or State Lease Number: COC-56027	

Survey Plat	
Directional Survey	
Surface Eqmpt Diagram	
Technical Info Page	✓
Other	✓

General Notice

<input type="checkbox"/> CHANGE OF LOCATION: Attach New Survey Plat (a change of surface qtr/qtr is substantive and requires a new permit)					
Change of Surface Footage from Exterior Section Lines:	<table><tr><td>FNL/FSL</td><td>FEL/FWL</td></tr><tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	FNL/FSL	FEL/FWL	<input type="checkbox"/>	<input type="checkbox"/>
FNL/FSL	FEL/FWL				
<input type="checkbox"/>	<input type="checkbox"/>				
Change of Surface Footage to Exterior Section Lines:	<table><tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>				
Change of Bottomhole Footage from Exterior Section Lines:	<table><tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr></table>	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>				
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<input type="checkbox"/>	<input type="checkbox"/>				
Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer					
Latitude	Distance to nearest property line				
Longitude	Distance to nearest bldg, public rd, utility or RR				
Ground Elevation	Distance to nearest lease line				
	Is location in a High Density Area (rule 603b)? Yes/No				
	Distance to nearest well same formation				
	Surface owner consultation date:				

GPS DATA:	
Date of Measurement	PDOP Reading
	Instrument Operator's Name

<input type="checkbox"/> CHANGE SPACING UNIT	<input type="checkbox"/> Remove from surface bond
Formation	Signed surface use agreement attached
Formation Code	
Spacing order number	
Unit Acreage	
Unit configuration	

<input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling):	<input type="checkbox"/> CHANGE WELL NAME
Effective Date:	From:
Plugging Bond: <input type="checkbox"/> Blanket <input type="checkbox"/> Individual	To:
	Effective Date:

<input type="checkbox"/> ABANDONED LOCATION:	<input type="checkbox"/> NOTICE OF CONTINUED SHUT IN STATUS
Was location ever built? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date well shut in or temporarily abandoned:
Is site ready for inspection? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has Production Equipment been removed from site? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date Ready for Inspection:	MIT required if shut in longer than two years. Date of last MIT

<input type="checkbox"/> SPUD DATE:	<input type="checkbox"/> REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set)
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<input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK	*submit cbl and cement job summaries
Method used	Cementing tool setting/perf depth
Cement volume	Cement top
Cement bottom	Date

<input type="checkbox"/> RECLAMATION: Attach technical page describing final reclamation procedures per Rule 1004.	
Final reclamation will commence on approximately	<input type="checkbox"/> Final reclamation is completed and site is ready for inspection.

Technical Engineering/Environmental Notice

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Report of Work Done
Approximate Start Date:	Date Work Completed:

Details of work must be described in full on Technical Information Page (Page 2 must be submitted.)

<input type="checkbox"/> Intent to Recomplete (submit form 2)	<input type="checkbox"/> Request to Vent or Flare	<input type="checkbox"/> E&P Waste Disposal
<input type="checkbox"/> Change Drilling Plans	<input type="checkbox"/> Repair Well	<input type="checkbox"/> Beneficial Reuse of E&P Waste
<input type="checkbox"/> Gross Interval Changed?	<input type="checkbox"/> Rule 502 variance requested	<input type="checkbox"/> Status Update/Change of Remediation Plans
<input type="checkbox"/> Casing/Cementing Program Change	<input checked="" type="checkbox"/> Other: Request to Complete	for Spills and Releases

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

Signed: Hannah Knopping Date: 6/2/2011 Email: hknopping@anteroresources.com

Print Name: Hannah Knopping Title: Permit Representative

COGCC Approved:

Title EIT 3

Date: 6/03/2011

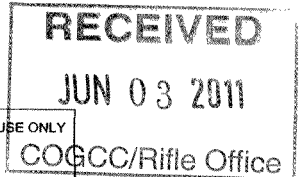
CONDITIONS OF APPROVAL, IF ANY:



TECHNICAL INFORMATION PAGE



FOR OGCC USE ONLY



- OGCC Operator Number: 10079 API Number: 05-045-20491-00
- Name of Operator: Antero Resources Piceance Corp. OGCC Facility ID #
- Well/Facility Name: Burckle Federal Well/Facility Number: A13
- Location (QtrQtr, Sec, Twp, Rng, Meridian): NWSE, Section 16, T6S, R92W, 6th P.M.

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. **DESCRIBE PROPOSED OR COMPLETED OPERATIONS**

The Burckle Federal A13 has been successfully cemented according to the approved plan and a summary of the braden head monitoring is listed below. One thousand one hundred twenty-six (1126) sacks of cement were used to cover the Top of Gas as per Colorado Oil and Gas Conservation Commission rules. Appropriate industry practices and procedures were utilized on the Burckle Federal A13 cementing program. The temperature log indicates good zonal isolation and coverage from TD to 1,290'. I, Jonathon Black, certify that all the information contained within this Sundry is true and correct.

Date Cemented: 5/20/2011
Plug Bumped: 5/20/2011

WOC Time: 6 hrs
Temp Log Run: Yes 5/20/2011 10:00 AM

Mandrel set @ 5/20/2011 04:00hrs

Braden Head Pressures:

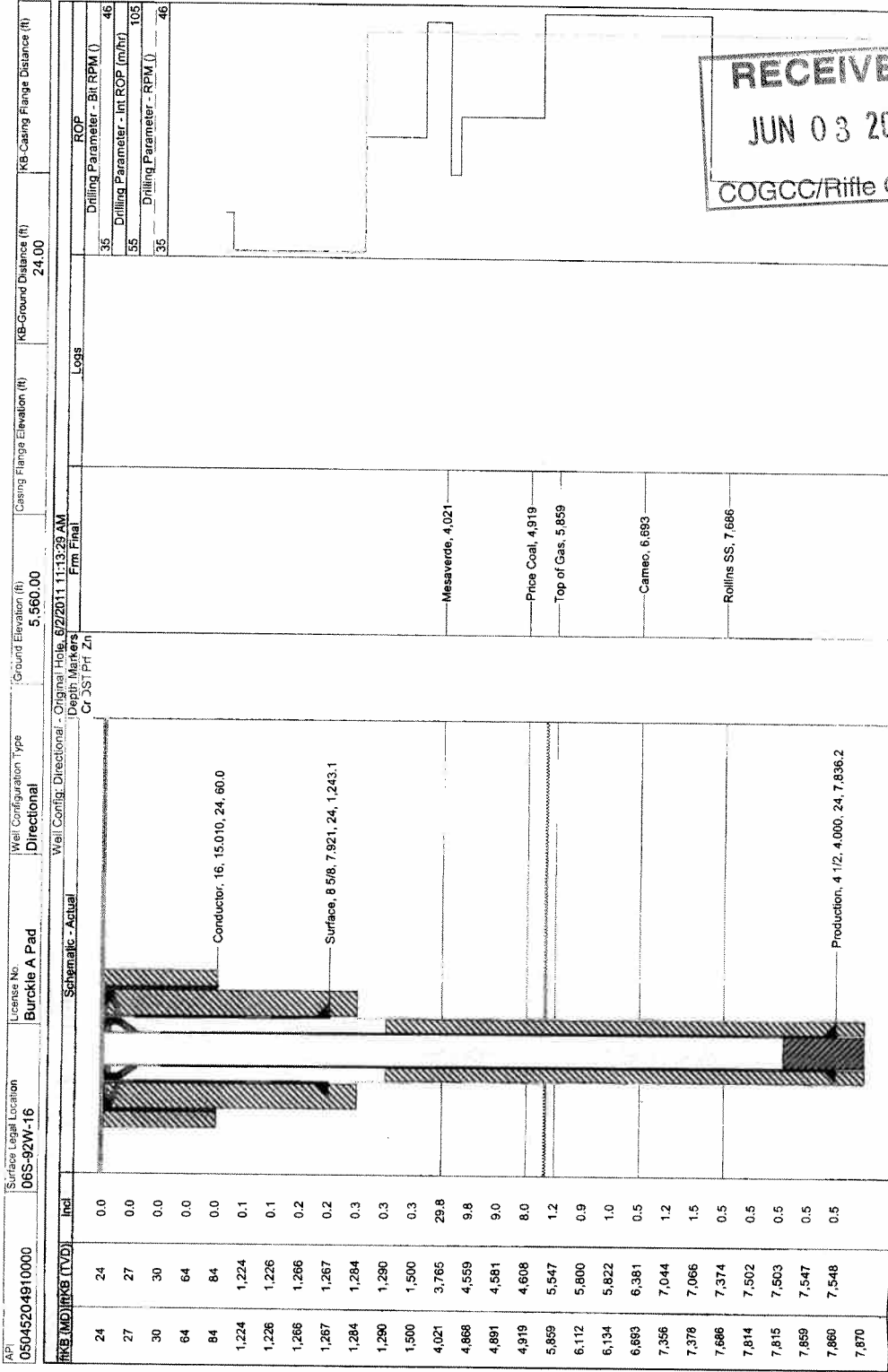
6 hours:	0 psig	10:00 AM 5/20/2011
12 hours	0 psig	16:00 PM 5/20/2011
24 hours	0 psig	04:00 AM 5/21/2011
48 hours	0 psig	04:00 AM 5/22/2011
72 hours	0 psig	04:00 AM 5/23/2011
96 hours	0 psig	04:00 AM 5/24/2011
120 hours	0 psig	04:00 AM 5/25/2011
144 hours	0 psig	04:00 AM 5/26/2011
168 hours	0 psig	04:00 AM 5/27/2011

NOTE: Antero received approval from COGCC Engineer, Kevin King, on 5/25/2011, to defer running the CBL on the subject well, per Mamm Creek Notice to Operators policy.

ATTACHMENTS:
1) Cement Bond Log
2) 1-Page Temperature Survey
3) Wellbore Schematic

Geological Schematic

Well Name: Burckle Federal A13



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JUN 03 2011

COGCC/Rifle Office



Company

ANTERO RESOURCES

Well

BURKLE A-13

Legal Desc.

S: TWP:

RNG:

Date

County

GARFIELD

State CO

API#

