

FORM
2

Rev
12/05

State of Colorado
Oil and Gas Conservation Commission

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



Document Number:

400272885

Date Received:

10/04/2012

PluggingBond SuretyID

20040071

APPLICATION FOR PERMIT TO:

1. Drill, Deepen, Re-enter, Recomplete and Operate

2. TYPE OF WELL

OIL GAS COALBED OTHER _____
SINGLE ZONE MULTIPLE COMMINGLE

Refiling

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: BAT Well Number: 14C-17-07-95

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

9. Proposed Total Measured Depth: 6558

WELL LOCATION INFORMATION

10. QtrQtr: SESW Sec: 17 Twp: 7S Rng: 95W Meridian: 6

Latitude: 39.432935 Longitude: -108.025296

Footage at Surface: 905 feet FSL 1430 feet FWL

11. Field Name: Parachute Field Number: 67350

12. Ground Elevation: 5563 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 06/19/2009 PDOP Reading: 1.8 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: 468 FSL 690 FWL Bottom Hole: 468 FSL 690 FWL
Sec: 17 Twp: 7S Rng: 95W Sec: 17 Twp: 7S Rng: 95W

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: 655 ft

18. Distance to nearest property line: 263 ft 19. Distance to nearest well permitted/completed in the same formation(BHL): 289 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	440-58	240	SW/4 and W/2SE/4
Williams Fork	WMFK	440-58	240	SW/4 and W/2SE/4

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):

T7S-R95W-Section 17: E/2SW/4SW/4, Portions of SW/4SE/4SW/4, N/2SE/4SW/4

25. Distance to Nearest Mineral Lease Line: 24 ft 26. Total Acres in Lease: 44

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 28 or 29 are yes, is this location in a sensitive area (Rule 901.e)? Yes No

31. Mud disposal: Offsite Onsite

If 28, 29, or 30 are "Yes" a pit permit may be required.

Method: Land Farming Land Spreading Disposal Facility Other: onsite if app, see comments

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	2,200	450	2,200	0
1ST	7+7/8	4+1/2	11.6#	0	6,558	700	6,558	

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

33. Comments I certify that all conditions in the original permit and approved sundry notice are the same except for #19 has been updated since nearest well has now been drilled and has an as-drilled BHL. There have been no other changes to land use, well construction or the lease. This well is on a built pad and is being filed under an approved/valid Form 2A (Document #400256441). #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. TOP OF CEMENT OF 1ST STRING/PRODUCTION CASING WILL BE >500 FEET ABOVE TOP OF GAS.

34. Location ID: 413055

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: 10/4/2012 Email: hknopping@anteroresources.

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 19106 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
400334466	30 DAY NOTICE LETTER

Total Attach: 1 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)