

FORM 5A

Rev 06/12

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 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, reoperation 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.

1. OGCC Operator Number: 10079 4. Contact Name: Shauna Redican
 2. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION Phone: (303) 357-6820
 3. Address: 1625 17TH ST STE 300 Fax: (303) 357-7315
 City: DENVER State: CO Zip: 80202

5. API Number 05-045-19924-00 6. County: GARFIELD
 7. Well Name: Diemoz Well Number: A3
 8. Location: QtrQtr: NWSW Section: 36 Township: 5S Range: 92W Meridian: 6
 9. Field Name: MAMM CREEK Field Code: 52500

Completed Interval

FORMATION: CAMEO Status: TEMPORARILY ABANDONED Treatment Type: FRACTURE STIMULATION

Treatment Date: 12/20/2010 End Date: 02/03/2011 Date of First Production this formation: 12/20/2010

Perforations Top: 6977 Bottom: 7682 No. Holes: 154 Hole size: 0.42

Provide a brief summary of the formation treatment: Open Hole:

(Original Frac): Frac'd with 37,626 bbls of 2% KCL slickwater and 712,203 lbs of 20/40 and 30/50 sand.

This formation is commingled with another formation: Yes No

Total fluid used in treatment (bbl): 37626 Max pressure during treatment (psi): _____

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): _____

Type of gas used in treatment: _____ Min frac gradient (psi/ft): _____

Total acid used in treatment (bbl): _____ Number of staged intervals: _____

Recycled water used in treatment (bbl): _____ Flowback volume recovered (bbl): _____

Fresh water used in treatment (bbl): _____ Disposition method for flowback: _____

Total proppant used (lbs): 712203 Rule 805 green completion techniques were utilized:

Reason why green completion not utilized: _____

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 01/10/2011 Hours: 24 Bbl oil: 0 Mcf Gas: 421 Bbl H2O: 62

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 421 Bbl H2O: 62 GOR: 0

Test Method: Flowing Casing PSI: 140 Tubing PSI: _____ Choke Size: 32/64

Gas Disposition: FLARED Gas Type: WET Btu Gas: 0 API Gravity Oil: 0

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

Reason for Non-Production: Temporarily Abandoned due to no production equipment installed

Date formation Abandoned: 02/04/2011 Squeeze: Yes No If yes, number of sacks cmt _____

** Bridge Plug Depth: _____ ** Sacks cement on top: _____ ** Wireline and Cement Job Summary must be attached.

Comment:

This well flared gas from 12/20/2010 to 2/3/2011. There were no gas sales for this well. There is no wellbore diagram available. This 5A is being submitted to show the CMEO formation as TA'd due to no production equipment installed. No wellbore diagram is available.

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

Signed: _____ Print Name: Shauna Redican

Title: Permit Representative Date: 8/22/2012 Email sredican@anteroresources.com

Attachment Check List

Att Doc Num	Name
400318862	FORM 5A SUBMITTED

Total Attach: 1 Files

General Comments

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

Total: 0 comment(s)