

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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Document Number:

400009307

Plugging Bond Surety

20040071

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

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: Ashlie Mihalcin Phone: (303)357-7323 Fax: (303)357-7315  
Email: amihalcin@anteroresources.com

7. Well Name: Valley Farms Well Number: F22

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

9. Proposed Total Measured Depth: 8771

WELL LOCATION INFORMATION

10. QtrQtr: NWSW Sec: 14 Twp: 6S Rng: 92W Meridian: 6

Latitude: 39.525632 Longitude: -107.642514

Footage at Surface: 2105 <sup>FNL/FSL</sup> FSL 352 <sup>FEL/FWL</sup> FWL

11. Field Name: Mamm Creek Field Number: 52500

12. Ground Elevation: 5614 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 04/20/2006 PDOP Reading: 1.0 Instrument Operator's Name: Joe Alles

15. If well is  Directional  Horizontal (highly deviated) **submit deviated drilling plan.**

Footage at Top of Prod Zone: <sup>FNL/FSL</sup> 236 FSL 1212 <sup>FEL/FWL</sup> FWL Bottom Hole: <sup>FNL/FSL</sup> 236 FSL 1212 <sup>FEL/FWL</sup> FWL  
Sec: 14 Twp: 6S Rng: 92W Sec: 14 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: 392

18. Distance to nearest property line: 202 19. Distance to nearest well permitted/completed in the same formation: 322

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	160	SW/4
Williams Fork	WMFK	191-24	160	SW/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 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):  
See "Exhibit A" - Lease map portions of the SW/4 and portions of the W/2SE/4 of Section 14, T6S, R92W

25. Distance to Nearest Mineral Lease Line: 236 26. Total Acres in Lease: 132

### 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: Closed Loop/Grfld Cty Lndfl

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	Weight Per Foot	Setting Depth	Sacks Cement	Cement Bottom	Cement Top
CONDUCTOR	24	16	55#	50	148	50	0
SURF	12+1/4	8+5/8	24#	900	381	900	0
3RD	7+7/8	5+1/2	17#	8,771	801	8,771	4,276

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

33. Comments I certify that all conditions in the original permit are the same except updated #19 distance. There have been no changes to land use, well construction or the lease. This pad is built. No expansion or additional disturbance will occur. Closed loop system will be used.

34. Location ID: \_\_\_\_\_

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: Ashlie Mihalcin

Title: Permit Representative Date: \_\_\_\_\_ Email: amihalcin@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: \_\_\_\_\_

Permit Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

**API NUMBER**

05 045 16368 00

**CONDITIONS OF APPROVAL, IF ANY:**

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**Attachment Check List**

Att Doc Num	Name	Doc Description
400009308	30 DAY NOTICE LETTER	Valley Farms F Pad 305-306 Waiver letter sent 6-24-09 (COGCC Copy).pdf
400009309	WAIVERS	Valley Farms F Pad 305-306 Waiver letter signed 7-6-09.pdf

Total Attach: 2 Files