

**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:  
400009895  
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: Hannah Knopping Phone: (303)357-6412 Fax: (303)357-7315  
Email: hknopping@anteroresources.com

7. Well Name: Robinson Well Number: C6

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

9. Proposed Total Measured Depth: 9222

**WELL LOCATION INFORMATION**

10. QtrQtr: SENE Sec: 17 Twp: 6S Rng: 92W Meridian: 6  
Latitude: 39.527247 Longitude: -107.681994

Footage at Surface: \_\_\_\_\_ FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
2445 FNL 217 FEL

11. Field Name: Mamm Creek Field Number: 52500

12. Ground Elevation: 5645 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 01/19/2007 PDOP Reading: 1.2 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: FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_ Bottom Hole: FNL/FSL \_\_\_\_\_ FEL/FWL \_\_\_\_\_  
461 FNL 781 FEL 461 FNL 781 FEL  
Sec: 17 Twp: 6S Rng: 92W Sec: 17 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: 675

18. Distance to nearest property line: 216 19. Distance to nearest well permitted/completed in the same formation: 328

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	320	N/2
Williams Fork	WMFK	191-24	320	N/2

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 Plat #4 -Sec 17 -NWNE, NENE, Sec 16- N/2NWNW (previously submitted)

25. Distance to Nearest Mineral Lease Line: 461 26. Total Acres in Lease: 103

### 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
1ST	12+1/4	8+5/8	24#	1,200	485	1,200	0
2ND	7+7/8	5+1/2	17#	9,222	754	9,222	5,022

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. No changes to land use, well construction, or lease. Pad is built. No expansion or additional disturbance will occur. Closed Loop system will be used.

34. Location ID: 311707

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: \_\_\_\_\_ Email: hknopping@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: \_\_\_\_\_

<b>API NUMBER</b> 05 045 17106 00	Permit Number: _____ Expiration Date: _____
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**CONDITIONS OF APPROVAL, IF ANY:** \_\_\_\_\_

### **Attachment Check List**

Att Doc Num	Name	Doc Description
400010643	30 DAY NOTICE LETTER	Robinson C pad 305-306 waiver sent to SO 8-12-09.pdf
400010644	WAIVERS	Robinson C pad 305-306 Signed waiver (8-14-09).pdf

Total Attach: 2 Files