

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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## 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 ☐

Document Number:

400010659

Plugging Bond Surety

20040071

3. Name of Operator: ANTERO RESOURCES PICEANCE CORPORATION4. COGCC Operator Number: 100795. Address: 1625 17TH ST STE 300City: DENVER State: CO Zip: 802026. Contact Name: Hannah Knopping Phone: (303)357-6412 Fax: (303)357-7315Email: hknopping@anteroresources.com7. Well Name: McPherson Well Number: A6

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

9. Proposed Total Measured Depth: 8546

## WELL LOCATION INFORMATION

10. QtrQtr: NENW Sec: 16 Twp: 6S Rng: 92W Meridian: 6Latitude: 39.531111 Longitude: -107.675791
 Footage at Surface: 1044 FNL/FSL FNL 1537 FEL/FWL FWL
11. Field Name: Mamm Creek Field Number: 5250012. Ground Elevation: 5449 13. County: GARFIELD

## 14. GPS Data:

Date of Measurement: 01/29/2007 PDOP Reading: 1.1 Instrument Operator's Name: Scott E. Aibner15. If well is ☒ Directional ☐ Horizontal (highly deviated) **submit deviated drilling plan.**
 Footage at Top of Prod Zone: FNL/FSL 1472 FNL 1871 FWL 1472 FNL 1871 FWL  
 Bottom Hole: FNL/FSL 1472 FNL 1871 FWL  
 Sec: 16 Twp: 6S Rng: 92W Sec: 16 Twp: 6S Rng: 92W
16. Is location in a high density area? (Rule 603b)? ☐ Yes ☒ No17. Distance to the nearest building, public road, above ground utility or railroad: 65518. Distance to nearest property line: 215 19. Distance to nearest well permitted/completed in the same formation: 337

## 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	191-34	160	NW/4
Williams Fork	WMFK	191-34	160	NW/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 Plat #4 and Exhibit A "Lease Map": SE/4NW/4 of Section 16-T6S-R92W

25. Distance to Nearest Mineral Lease Line: \_\_\_\_\_ 172 \_\_\_\_\_ 26. Total Acres in Lease: \_\_\_\_\_ 40 \_\_\_\_\_

### 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#	900	381	900	0
2ND	7+7/8	5+1/2	17#	8,546	798	8,546	4,071

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 There have been 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: \_\_\_\_\_ 335539 \_\_\_\_\_

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: \_\_\_\_\_

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

**API NUMBER**

05 045 17067 00

**CONDITIONS OF APPROVAL, IF ANY:****Attachment Check List**

Att Doc Num	Name	Doc Description
400012715	30 DAY NOTICE LETTER	McPherson A 305-306 30-Day Letter sent 7-6-09.pdf
400012716	WAIVERS	McPherson A 305-306 Signed Waiver (9-5-09)pdf.pdf

Total Attach: 2 Files