

FORM  
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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:  
400012756

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: Island Park Well Number: B1

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

9. Proposed Total Measured Depth: 8900

WELL LOCATION INFORMATION

10. QtrQtr: NESE Sec: 7 Twp: 6S Rng: 92W Meridian: 6

Latitude: 39.540941 Longitude: -107.700946

Footage at Surface: 2592 FNL/FSL FSL 225 FEL/FWL FEL

11. Field Name: Mamm Creek Field Number: 52500

12. Ground Elevation: 5376.5 13. County: GARFIELD

14. GPS Data:

Date of Measurement: 10/21/2006 PDOP Reading: 1.2 Instrument Operator's Name: Samuel D. Phelps

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

Footage at Top of Prod Zone: FNL/FSL 2229 FNL 606 FEL 606 FEL 606 FEL  
 Bottom Hole: FNL/FSL 2229 FNL 606 FEL 606 FEL  
 Sec: 7 Twp: 6S Rng: 92W Sec: 7 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: 3075

18. Distance to nearest property line: 225 19. Distance to nearest well permitted/completed in the same formation: 329

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		
Williams Fork	WMFK	510-16		

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):  
 Sec 7 T6S R92W - See Lease Map

25. Distance to Nearest Mineral Lease Line: \_\_\_\_\_ 606 \_\_\_\_\_ 26. Total Acres in Lease: \_\_\_\_\_ 195 \_\_\_\_\_

### 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	14+3/4	13+3/8	54.50#	200	71	200	0
SURF	12+1/4	8+5/8	24#	900	381	900	0
3RD	7+7/8	5+1/2	17#	8,900	745	8,900	4,700

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 the lease. This pad is built. No expansion/additional disturbance will occur. Closed Loop system will be used.

34. Location ID: 336025

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 13582 00

**CONDITIONS OF APPROVAL, IF ANY:**

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**Attachment Check List**

Att Doc Num	Name	Doc Description
400013761	WAIVERS	Island Park B-305-306 Waiver signed 6-25-09.pdf
400013762	30 DAY NOTICE LETTER	Island Park B 305-306 Waiver sent 6-19-09.pdf

Total Attach: 2 Files