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Rev 12/05

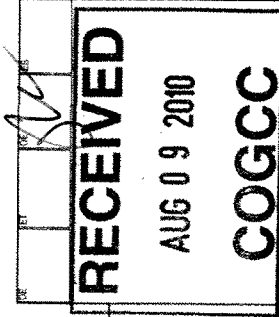
State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303)894-2100 Fax: (303)894-2109

SUNDRY NOTICE

Submit original plus one copy. This form is to be used for general, technical and environmental sundry information. For proposed or completed operations, describe in full on Technical Information Page (Page 2 of this form.) Identify well or other facility by API Number or by OGCC Facility ID. Operator shall send an informational copy of all sundry notices for wells located in High Density Areas to the Local Government Designee (Rule 603b.)



| | | | |
|---|--|-------------------------|----------------|
| 1. OGCC Operator Number: | 10079 | 4. Contact Name | |
| 2. Name of Operator: | Antero Resources Piceance Corporation | Hannah Knopping | |
| 3. Address: | 1625 17th Street | Phone: | (303) 357-6412 |
| City: | Denver | Fax: | (303) 357-7315 |
| State: | CO | Zip: | 80202 |
| 5. API Number | 05-045-19728-00 | OGCC Facility ID Number | |
| 6. Well/Facility Name: | Fenno Ranch | Well/Facility Number | A1 |
| 8. Location (Qtr/Qtr, Sec, Twp, Rng, Meridian): | NE1/4, Section 31, T5S, R01W, 6th P.M. | | |
| 9. County: | Garfield | 10. Field Name: | Wildcat |
| 11. Federal, Indian or State Lease Number: | | | |

Complete the Attachment Checklist

OP OGCC

| | |
|----------------------|-------------------------------------|
| Survey Plat | <input checked="" type="checkbox"/> |
| Directional Survey | <input checked="" type="checkbox"/> |
| Surface Eqpm Diagram | <input checked="" type="checkbox"/> |
| Technical Info Page | <input checked="" type="checkbox"/> |
| Other | <input type="checkbox"/> |

General Notice

| | | | | | |
|---|------------------------|--|------|--|--|
| <input checked="" type="checkbox"/> CHANGE OF LOCATION: | Attach New Survey Plat | (a change of surface qtr/qtr is substantive and requires a new permit) | | | |
| Change of Surface Footage from Exterior Section Lines: | | FNL/FSL | | | |
| Change of Surface Footage to Exterior Section Lines: | | | | | |
| Change of Bottomhole Footage from Exterior Section Lines: | | | | | |
| Change of Bottomhole Footage to Exterior Section Lines: | | | | | |
| Bottomhole location Qtr/Qtr, Sec, Twp, Rng, Mer | | | | | |
| Latitude | 39.570634 | Distance to nearest property line | 360' | Distance to nearest bldg, public rd, utility or RR | 350' |
| Longitude | 107.648531 | Distance to nearest lease line | | is location in a High Density Area (rule 603b)? | Yes/No <input checked="" type="checkbox"/> |
| Ground Elevation | 5790' | Distance to nearest well same formation | | Surface owner consultation date: | 4/27/2010 |

GPS DATA:

| | | | | | |
|----------------------|-----------|--------------|-----|----------------------------|-----------------|
| Date of Measurement: | 6/22/2010 | PDOP Reading | 2.4 | Instrument Operator's Name | Scott E. Aibner |
|----------------------|-----------|--------------|-----|----------------------------|-----------------|

| | | | | | | |
|--|-----------|----------------|----------------------|--------------|--------------------|---|
| <input type="checkbox"/> CHANGE SPACING UNIT | Formation | Formation Code | Spacing order number | Unit acreage | Unit configuration | <input type="checkbox"/> Remove from surface bond |
| | | | | | | Signed surface use agreement attached |

| | | | | |
|--|--|-----------------|------------------|--------|
| <input type="checkbox"/> CHANGE OF OPERATOR (prior to drilling): | Effective Date: | From: | CHANGE WELL NAME | NUMBER |
| Plugging Bond: | <input type="checkbox"/> Blanket <input type="checkbox"/> Individual | To: | | |
| | | Effective Date: | | |

| | | |
|--|---|--|
| <input type="checkbox"/> ABANDONED LOCATION: | Was location ever built? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Is site ready for inspection? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Date Ready for inspection: | |
| | Has Production Equipment been removed from site? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | MIT required if shut in longer than two years. Date of last MIT | |

| | |
|-------------------------------------|--|
| <input type="checkbox"/> SPUD DATE: | REQUEST FOR CONFIDENTIAL STATUS (6 mos from date casing set) |
|-------------------------------------|--|

| | | | | | | |
|--|-------------|-----------------------------------|---------------|------------|---------------|------|
| <input type="checkbox"/> SUBSEQUENT REPORT OF STAGE, SQUEEZE OR REMEDIAL CEMENT WORK | Method used | Cementing tool setting/perf depth | Cement volume | Cement top | Cement bottom | Date |
| | | | | | | |

| | |
|---------------------------------------|---|
| <input type="checkbox"/> RECLAMATION: | Attach technical page describing final reclamation procedures per Rule 1004. |
| | Final reclamation will commence on approximately |
| | <input type="checkbox"/> Final reclamation is completed and site is ready for inspection. |

Technical Engineering/Environmental Notice

| | | | |
|--|---------------------|----------------------|--|
| <input checked="" type="checkbox"/> Notice of Intent | Report of Work Done | | |
| Approximate Start Date: | 8/16/2010 | Date Work Completed: | |

| | | |
|---|--|--|
| Details of work must be described in full on Technical Information Page (Page 2 must be submitted.) | | |
| <input type="checkbox"/> Intent to Recomplete (submit form 2) | <input type="checkbox"/> Request to Vent or Flare | <input type="checkbox"/> E&P Waste Disposal |
| <input checked="" type="checkbox"/> Change Drilling Plans | <input type="checkbox"/> Repair Well | <input type="checkbox"/> Beneficial Reuse of E&P Waste |
| <input type="checkbox"/> Gross Interval Changed? | <input type="checkbox"/> Rule 502 variance requested | <input type="checkbox"/> Status Update/Change of Remediation Plans |
| <input checked="" type="checkbox"/> Casing/Cementing Program Change | <input type="checkbox"/> Other: | for Spills and Releases |

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

Signed: Hannah Knopping Date: 8/9/2010 Email: hknopping@anteroresources.com

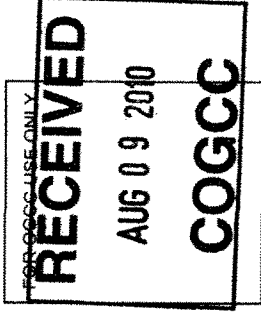
Print Name: Hannah Knopping Title: Permit Representative

COGCC Approved:

CONDITIONS OF APPROVAL IF ANY:

Title: EIT II Date: 8/17/2010

TECHNICAL INFORMATION PAGE



| | | | |
|--|---|-----------------------|-----------------|
| 1. OGCC Operator Number: | 10079 | API Number: | 05-045-19728-00 |
| 2. Name of Operator: | Antero Resources Piceance Corp OGCC Facility ID # | | |
| 3. Well/Facility Name: | Fenno Ranch | Well/Facility Number: | A1 |
| 4. Location (QtrQtr, Sec, Twp, Rng, Meridian): | NESW, Sec 31, T5S, R91W, 6th P.M. | | |

This form is to be completed whenever a Sundry Notice is submitted requiring detailed report of work to be performed or completed. This form shall be transmitted within 30 days of work completed as a "subsequent" report and must accompany Form 4, page 1.

5. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

To correspond with Antero's new total depth of 6775' (MD) and 6512' (TVD), we would like to make the following revisions to our casing/cementing program for the Fenno Ranch A1:

Production: In a 7-7/8" hole, set 4-1/2" production casing at 6775' and cement from TD to >200' above Top of Gas using 605 sacks of cement.

Please note that the BHL has not changed, however since the surface location moved our total depth changed since there is a slightly longer reach.