

V PA  
KCC  
mcy  
6/25/08

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
WELL PLUGGING APPLICATION  
Please TYPE Form and File ONE Copy

Form CP-1  
September 2003  
This Form must be Typed  
Form must be Signed  
All blanks must be Filled

API # 15 - 141-20388-0000 (Identifier Number of this well). This must be listed for wells drilled since 1967; If no API # was issued,

indicate original spud or completion date 5-22-08

Well Operator: Double Eagle Exploration, Inc. KCC License #: 6009  
(Owner / Company Name) (Operator's)

Address: 221 S. Broadway, #310 City: Wichita

State: Kansas Zip Code: 67202 Contact Phone: (316) 264 - 0422

Lease: Robbins Well #: 2 Sec. 31 Twp. 10 S. R. 14  East  West

NE SE SE Spot Location / QQQQ County: Osborne

990 Feet (in exact footage) From  North /  South (from nearest outside section corner) Line of Section (Not Lease Line)

330 Feet (in exact footage) From  East /  West (from nearest outside section corner) Line of Section (Not Lease Line)

Check One:  Oil Well  Gas Well  D&A  Cathodic  Water Supply Well  
 SWD Docket # \_\_\_\_\_  ENHR Docket # \_\_\_\_\_  Other: \_\_\_\_\_

Conductor Casing Size: \_\_\_\_\_ Set at: \_\_\_\_\_ Cemented with: \_\_\_\_\_ Sacks

Surface Casing Size: 8 5/8 OD Set at: 558.31 358 Cemented with: 225 Com 3% CC 2% gel Sacks

Production Casing Size: \_\_\_\_\_ Set at: \_\_\_\_\_ Cemented with: \_\_\_\_\_ Sacks

List (ALL) Perforations and Bridgeplug Sets: None

Elevation: 1727 ( G.L. /  K.B.) T.D.: 3220 PBTD: 3216 Anhydrite Depth: 867  
(Stone Corral Formation)

Condition of Well:  Good  Poor  Casing Leak  Junk in Hole

Proposed Method of Plugging (attach a separate page if additional space is needed): 25 sks @ 875', 40 sks @ 600', 80 sks @ 425', 10 sks @ 40', & 15 sks rat hole.

Is Well Log attached to this application as required?  Yes  No Is ACO-1 filed?  Yes  No

If not explain why? \_\_\_\_\_

Plugging of this Well will be done in accordance with K.S.A. 55-101 et. seq. and the Rules and Regulations of the State Corporation Commission.

List Name of Company Representative authorized to be in charge of plugging operations: \_\_\_\_\_

Jim Robinson MITCH REICHMEIER Phone: (316) 264 - 0422 (785) 567-7762

Address: 221 S. Broadway, #310 City / State: Wichita, Kansas

Plugging Contractor: American Eagle Drilling, LLC KCC License #: 33493  
(Company Name) (Contractor's)

Address: 700 S. Washington P.O. Box 66 Phone: (785) 434 - 2079

Proposed Date and Hour of Plugging (if known?): 5-22-08 12:15 P.M. RECEIVED KANSAS CORPORATION COMMISSION

Payment of the Plugging Fee (K.A.R. 82-3-118) will be guaranteed by Operator or Agent 5/22/08

Date: 6-02-08 Authorized Operator / Agent: Jim Robinson (Signature)

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

CONSERVATION DIVISION  
WICHITA, KS

\* Well Plugged - KCC - Mon

JUN 04 2008

PAGE 4

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 6009

Name: Double Eagle Exploration, Inc.

Address: 221 S. Broadway, #310

City/State/Zip: Wichita, Kansas 67202

Purchaser: \_\_\_\_\_

Operator Contact Person: Jim Robinson

Phone: (316) 264-0422

Contractor: Name: American Eagle Drilling, LLC

License: 33493

Wellsite Geologist: Mike Engelbrecht

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     SWD     SLOW     Temp. Abd.
- Gas     ENHR     SIGW
- Dry     Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

- Deepening     Re-perf.     Conv. to Enhr./SWD
- Plug Back     Plug Back Total Depth
- Commingled    Docket No. \_\_\_\_\_
- Dual Completion    Docket No. \_\_\_\_\_
- Other (SWD or Enhr.?)    Docket No. \_\_\_\_\_

<u>5-15-08</u>	<u>5-21-08</u>	
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 141-20388-0000

County: Osborne

NE-SE-SW Sec. 31 Twp. 10 S. R. 14  East  West

990 feet from S / N (circle one) Line of Section

330 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Robbins Well #: 2

Field Name: wildcat

Producing Formation: \_\_\_\_\_

Elevation: Ground: 1727 Kelly Bushing: 1734

Total Depth: 3216 Plug Back Total Depth: 3220

Amount of Surface Pipe Set and Cemented at 558 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from \_\_\_\_\_

feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

Dewatering method used \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West

County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Jim Robinson

Title: Representative Date: 6-03-08

Subscribed and sworn to before me this 3<sup>RD</sup> day of JUNE

19 2008

Notary Public: Glynn Bolte My Appl. Exp. 4-24-2011

Date Commission Expires: 4-24-2011

**KCC Office Use ONLY**

Letter of Confidentiality Attached **RECEIVED**  
KANSAS CORPORATION COMMISSION

If Denied, Yes  Date: \_\_\_\_\_

Wireline Log Received **JUN 04 2008**

Geologist Report Received

UIC Distribution CONSERVATION DIVISION  
WICHITA, KS

Operator Name: Double Eagle Exploration, Inc. Lease Name: Robbins Well #: 2  
 Sec. 31 Twp. 10 S. R. 14  East  West County: Osborne

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken  Yes  No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey  Yes  No

Cores Taken  Yes  No

Electric Log Run  Yes  No  
 (Submit Copy)

List All E. Logs Run:

Radiation Guard Log

Log Formation (Top), Depth and Datum  Sample

Name	Top	Datum
Anhydrite	866	+863
Topeka	2636	-902
Heebner	2885	-1157
Lansing	2937	-1203
BKC	3202	-1468
Logger TD	3216	
RTD	3220	

**CASING RECORD**  New  Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacs Used	Type and Percent Additives
Surface	12 1/4	8 5/8"	20#	558	Common	225	3%CC 2% gel

**ADDITIONAL CEMENTING / SQUEEZE RECORD**

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	3220	Common	170	60/40 POZ 4% gel & 1/4 lb. flow seal

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas  Vented  Sold  Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify)

Production Interval \_\_\_\_\_