

Notice: Fill out COMPLETELY and return to Conservation Division at the address below within 60 days from plugging date.

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION WELL PLUGGING RECORD K.A.R. 82-3-117

Form CP-4 December 2003 Type or Print on this Form Form must be Signed All blanks must be Filled

Lease Operator: Double Eagle Exploration, Inc. Address: 221 S. Broadway, #310 Wichita, KS. 67202 Phone: (316) 264-0422 Operator License #: 6009 Type of Well: Oil DH KCCPKT Per CP2/3 Docket #: The plugging proposal was approved on: 5-22-08 by: Is ACO-1 filed? [X] Yes [] No If not, is well log attached? [X] Yes [] No Producing Formation(s): List All (if needed attach another sheet)

API Number: 15-141-20388-0000 Lease Name: Robbins Well Number: #2 Spot Location (QQQQ): - NE - SE - SE 990 Feet from [] North / [X] South Section Line 330 Feet from [X] East / [] West Section Line Sec. 31 Twp. 10 S. R. 14 [] East [X] West County: Osborne Date Well Completed: 5-22-08 Plugging Commenced: 5-22-08 Plugging Completed: 5-22-08

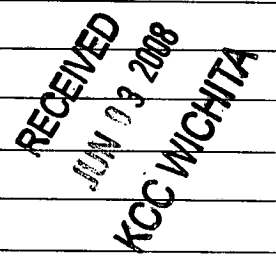
Show depth and thickness of all water, oil and gas formations.

Table with columns: Oil, Gas or Water Records (Formation, Content) and Casing Record (Surface Conductor & Production) (From, To, Size, Put In, Pulled Out). Row 1: Surface, GL, 558', 8 5/8, 558', None.

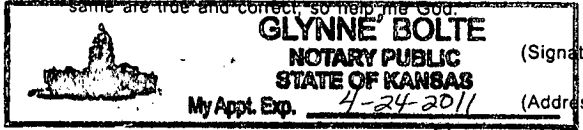
Describe in detail the manner in which the well is plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plugs were used, state the character of same depth placed from (bottom), to (top) for each plug set.

Plugged With 170 sks of Common Cement - 60/40 POZ 4% gel & 1/4 lb. floe seal 25 sks @ 875', 40 sks @ 600', 80 sks @ 425', & 15 sks rat hole

Name of Plugging Contractor: American Eagle Drilling, LLC License #: 33493 Address: 700 S. Washington, P.O. Box 66 Plainville, KS. 67663 Name of Party Responsible for Plugging Fees: Double Eagle Exploration, Inc. State of Kansas County, Sedgwick, ss.



Jim Robinson (Employee of Operator) or (Operator) on above-described well, being first duly sworn on oath, says: That I have knowledge of the facts statements, and matters herein contained, and the log of the above-described well is as filed, and the



(Signature) Jim Robinson (Address) 221 S. Broadway, #310 Wichita, KS. 67202

SUBSCRIBED and SWORN TO before me this 3rd day of JUNE, 2008 My Commission Expires: 4-24-2011

Handwritten initials/signature