

KANSAS CORPORATION COMMISSION

ORIGINAL

Form ACO-1

ORIGINAL

Operator: License # 33515
 Name: Double Eagle Resources, LLC
 Address: 507 S 14th St
 City/State/Zip: Fort Smith, AR 72901
 Purchaser: Guardian Energy Consultants
 Operator Contact Person: Jeff Hudson
 Phone: (320) 779-1679
 Contractor: Name: _____
 License: _____
 Wellsite Geologist: _____

Designate Type of Completion:

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

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

Operator: Paul A Lamb and Allen Bayless
 Well Name: Ellis #1

Original Comp. Date: NA 6/21/82 Original Total Depth: NA 750

____ Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
☒ Plug Back 710 Plug Back Total Depth
 ____ Commingled Docket No. _____
 ____ Dual Completion Docket No. _____
 ____ Other (SWD or Enhr.?) Docket No. _____

6-1-06 6/1/06
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 099-21676 - DD - 01
 County: Labette
N2 SE SW Sec. 22 Twp. 32 S. R. 18 ☒ East ☐ West
990 feet from S N (circle one) Line of Section
3330 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: AL Merrick Well #: Ellis 1Field Name: Cherokee Basin CoalProducing Formation: Cherokee CoalElevation: Ground: 912 Kelly Bushing: _____Total Depth: 768.4 Plug Back Total Depth: 770 767.4

Amount of Surface Pipe Set and Cemented at _____ Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☐ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 710feet depth to 2 w/ 150 cu. cmt.WDO - Dig - 12/5/08

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: Jeff HudsonTitle: Chief Op. Off. Date: 6/13/06Subscribed and sworn to before me this 13 day of June20 06Notary Public: Eric A. BrownDate Commission Expires: 6/13/2008

KCC Office Use ONLY

N Letter of Confidentiality Received
 If Denied, Yes ☐ Date: _____

____ Wireline Log Received

____ Geologist Report Received

____ UIC Distribution

RECEIVED

JUN 16 2006

KCC WICHITA

Operator Name: **Double Eagle Resources, LLC** Lease Name: **AL Merrick** Well #: **Ellis 1**
 Sec. **22** Twp. **32** S. R. **18** ☒ East ☐ West County: **Labette**

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:

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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	# Sacks Used	Type and Percent Additives
Surface	NA	7"		NA	NA	NA	
Production	NA	4 1/2		TD	NA	NA	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

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
3	449-457; 470.5-476.5; 557-561;	250 gal HCL; 12,000# Sand 400 BBL Water	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2"	625		<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
			<input type="checkbox"/> Flowing <input checked="" 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
		1	10		

Disposition of Gas		METHOD OF COMPLETION		Production Interval	
<input type="checkbox"/> Vented	<input checked="" type="checkbox"/> Sold	<input type="checkbox"/> Used on Lease	<input type="checkbox"/> Open Hole	<input checked="" type="checkbox"/> Perf.	<input type="checkbox"/> Dually Comp.
(If vented, Submit ACO-18.)			<input type="checkbox"/> Other (Specify)		

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