



Form 3A - Financial Assurance

Summary Information Overview

Form Name:	Form 3A - Financial Assurance
Document Number:	403855943
Date Submitted:	10/15/2024
Date Approved:	11/11/2024

Operator Information

Operator Number: **10797**
Operator Name: **DESERT EAGLE OPERATING LLC**
Operator Address: **17101 PRESTON RD SUITE 105 ATTN: WESLEY MARSHALL**
Operator City: **DALLAS**
Operator State: **TX**
Operator Zip: **75248**
First Name: **Wesley**
Last Name: **Marshall**
Contact Phone: **(214) 886-5098**
Contact Email: **wmarshall@prohelium.com**
Subsidiary Operators: **None**

Summary

Financial Assurance Option: **1**
Financial Assurance Plan Amount \$: **\$77,000.00**
Form 3A - Balance \$: **\$0.00**

Rule 702 - Plugging, Abandonment, and Reclamation

Total Financial Assurance Required: **\$72,000.00**
Form 3A - Rule 702 Balance \$: **\$0.00**

Rule 703 - Other Oil and Gas Facilities & Operations

Total Financial Assurance Required: **\$5,000.00**
Form 3A - Rule 703 Balance \$: **\$0.00**

703 (E&P Waste Facilities) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Waste Facilities Balance \$: **\$0.00**

703 (Remediation Projects) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Remediation Projects Balance \$: **\$0.00**

703 (Seismic Operations) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Seismic Operations Balance \$: **\$0.00**

703 (Gas Facilities) - Financial Assurance Selection: **Individual**

703 (Gas Facilities) - Total Financial Assurance Required: **\$5,000.00**

Form 3A - Rule 703 Gas Facilities Balance \$: **\$0.00**

703 (Produced Water Transfer Systems) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Produced Water Transfer Systems Balance \$: **\$0.00**

703 (Commercial Disposal Facilities) - Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 703 Gas Facilities Balance \$: **\$0.00**

Rule 704 - Surface Owner Protection Bonds

Financial Assurance Selection: **Blanket**

Total Financial Assurance Required: **\$0.00**

Form 3A - Rule 704 Balance \$: **\$0.00**

Exempt from Rule 704: ☐

Instrument Allocation Summary

Instrument Summary:

Operator to mail the following instruments to ECMC office:

Instrument	Type	Operator	Provider	Amount
384569	CASH	10797 - DESERT EAGLE OPERATING LLC	DESERT EAGLE OPERATING LLC	\$5,000.00

Signature and Certification

I hereby certify all statements made on this form are, to the best of my knowledge at the time of submittal, true, correct, and complete.

Operator Comments:

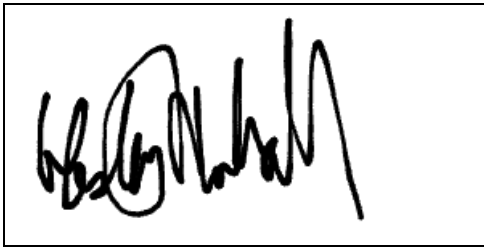
Name: **Wesley Marshall**

Title: **Principal**

Email: **wmarshall@prohelium.com**

Phone: **(214) 886-5098**

Signature:



Associated Documents

403957689 - FORM 3A SUBMITTED

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Jared S. Polis, Governor | Julie Murphy, Director | Scott Cuthbertson, Deputy Director Operations

