

1.) CORPORATION NAME:

Union Drilling, Inc.

DUE DATE: **10/31/2011**

SCC ID NO: **F1310871**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	75,000,000
PREFER	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4055 INTERNATIONAL PLAZA
STE 610

CITY/ST/ZIP: FORT WORTH, TX 76109-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: CHRIS STRONG
TITLE: CEO/PRES
ADDRESS: 4055 INTERNATIONAL PLAZA
STE 610
CITY/ST/ZIP/CO: FORT WORTH, TX 76109-

OFFICER

DIRECTOR

NAME: TINA L CASTILLO
TITLE: VP/CFO/T
ADDRESS: 4055 INTERNATIONAL PLAZA STE 610
CITY/ST/ZIP/CO: FORT WORTH, TX 76109-

OFFICER

DIRECTOR

NAME: DAVID GOLDBERG
TITLE: VP/GC/CORP SEC
ADDRESS: 4055 INTERNATIONAL PLAZA
STE 610
CITY/ST/ZIP/CO: FORT WORTH, TX 76109-

OFFICER

DIRECTOR

NAME: THOMAS H O'NEILL JR
TITLE: T/CHAIRMAN
ADDRESS: 50 FOUNTAIN PLAZA STE 1220
CITY/ST/ZIP/CO: BUFFALO, NY 14202-

OFFICER

DIRECTOR

NAME: M JOSEPH MCHUGH
TITLE: DIRECTOR
ADDRESS: 6334 GLENDORA AVE
CITY/ST/ZIP/CO: DALLAS, TX 75230-

OFFICER

DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HOWARD I HOFFEN DIRECTOR 4055 INTERNATIONAL PLAZA SUITE 610 FORT WORTH, TX 76109-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGORY D MYERS DIRECTOR 4055 INTERNATIONAL PLAZA SUITE 610 FORT WORTH, TX 76109-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	T.J. GLAUTHIER DIRECTOR 4055 INTERNATIONAL PLAZA SUITE 610 FORT WORTH, TX 76109-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RONALD HARRELL DIRECTOR 4055 INTERNATIONAL PLAZA SUITE 610 FORT WORTH, TX 76109-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROBERT WOHLEBER DIRECTOR 4055 INTERNATIONAL PLAZA SUITE 610 FORT WORTH, TX 76109-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ TINA L CASTILLO	TINA L CASTILLO, VP/CFO/T	9/20/2011
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.