

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 - 073-23520 - 00-01 (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 _____.

Well Operator: CROSS BAR ENERGY, LLC KCC License #: 33245
(Owner / Company Name) (Operator's)

Address: 100 SOUTH MAIN, SUITE 400 City: WICHITA

State: KANSAS Zip Code: 67202-3737 Contact Phone: (316) 239 - 6151

Lease: SEELEY-EDWARDS (NORTHEAST-EDWARDS) Well #: W2 Sec. 07 Twp. 23 S. R. 11 East West

- SW - NE - NE Spot Location / QQQQ County: GREENWOOD

4290 Feet (in exact footage) From North / South (from nearest outside section corner) Line of Section (Not Lease Line)

872 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 # E-24768 Other: _____

Conductor Casing Size: _____ Set at: _____ Cemented with: _____ Sacks

Surface Casing Size: 8 5/8" Set at: 109' Cemented with: 50 Sacks

Production Casing Size: 4 1/2" Set at: 2128' Cemented with: 75 Sacks

List (ALL) Perforations and Bridgeplug Sets: 2014' - 2030' (One shot each foot)

Elevation: 1224 (G.L. / K.B.) T.D.: 2158 PBTD: 2109 Anhydrite Depth: _____
(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): Spot plugs down 2 3/8" TBG AS FOLLOWS:

15 sxs @ 1550'; 15 sxs @ 900'; 62 sxs @ 150' to surface

RECEIVED
KANSAS CORPORATION COMMISSION

DEC 04 2008

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

If not explain why? _____ CONSERVATION DIVISION
WICHITA, KS

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: _____

STUART WOODIE Phone: (620) 960 - 1218

Address: 1410 300TH STREET City / State: HAMILTON, KS 66853

Plugging Contractor: HURRICANE SERVICES, INC. KCC License #: 34059
(Company Name) (Contractor's)

Address: PO BOX 782228, WICHITA, KS 67278-2228 Phone: (316) 685 - 5908

Proposed Date and Hour of Plugging (if known?): 11-12-2008 8:00 AM

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

Date: 11-17-2008 Authorized Operator / Agent: _____
(Signature)

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

Dest 3
PKT

A well plugged - KCC - PKT