



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

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

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

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: _____

feet depth to: _____ w/ _____ sx cmt.

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 #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1059841

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

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 complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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

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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Pioneer Natural Resources USA, Inc.
Well Name	THUROW-HILL B ATU 1
Doc ID	1059841

Tops

Name	Top	Datum
Glorietta	1228	KB
Wellington	2144	KB
Hollenberg	2467	KB
Herington	2492	KB
Krider	2517	KB
Towanda	2623	KB
Ft. Riley	2677	KB
A1 Lime	2806	KB
B1 Lime	2861	KB
B2 Lime	2878	KB

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Perforations

Shots Per Foot	Perforation Record	Material Record	Depth
3	Chase	Shot & Fractured	2606 - 2638
3	Chase	Shot & Fractured	2657 - 2694
3	Council Grove	Shot & Fractured	2743 - 2748
3	Council Grove	Shot & Fractured	2754-2768
3	Council Grove	Shot & Fractured	2798 - 2802
3	Council Grove	Shot & Fractured	2841-2855
3	Council Grove	Shot & Fractured	2864 - 2876

CEMENTING TREATMENT REPORT



TREATMENT NUMBER	SO2011004	DATE	4/18/2011
STAGE	1	JOB TYPE	Surface

WELL NAME AND NO.	Thurrow-Hill B ATU	LOCATION (LEGAL)	Sec. 32 T30S R36W	RIG NAME:	Pioneer Natural Resources Rig # 3	CEMENT PUMPER:	2305
FIELD	Hugoton	FORMATION	Chase/Council Grove	WELL DATA	BOTTOM	FT	TOP
COUNTY	Grant	STATE	Kansas	AFE	20195		
RIG FOREMAN	Phillip Gibson			BIT SIZE	12 1/4	CSG/Liner Size	8 5/8
CEMENT SUPERVISOR	Stan Owens			TOTAL DEPTH	597	WEIGHT	24
CEMENT EMPLOYEES	John Vail, Bruce Green and J.R. Ortiz			MUD TYPE		FOOTAGE	
SPECIAL INSTRUCTIONS				<input type="checkbox"/> BHST		GRADE	J-55
				<input type="checkbox"/> BHCT		THREAD	LT&C
				MUD DENSITY		LESS FOOTAGE SHOE JOINT(S)	
				MUD VISC		Disp. Capacity	
				Include Footage From Ground Level To Head In Disp. Capacity			
				TYPE		DEPTH	
				DEPTH		TYPE	
				TYPE		DEPTH	
				DEPTH		TYPE	

Head & Plugs	<input type="checkbox"/> TBG	<input type="checkbox"/> D.P.	
<input type="checkbox"/> Double Box 6	WEIGHT		
<input type="checkbox"/> Single	GRADE		
<input type="checkbox"/> Swage	THREADS		
<input type="checkbox"/> Knockout	<input type="checkbox"/> New <input type="checkbox"/> Used		
LIFT PRESSURE	70	psi	
PRESSURE LIMIT	500	psi	
BUMP PLUG TO	200		
NO. of Centralizers	5		
CEMENT TEMPERATURE:	68		
WATER QUALITY:	8 pH	325 SG	70 TEMP

TIME	0001 to 2400	PRESSURE	TBG	CSG	VOLUME PUMPED	INCR	CUM	JOB SCHEDULED FOR	ARRIVE ON LOCATION	RIG UP	LEFT LOCATION
								TIME: 20:00 DATE: 4/18/2011	TIME: 19:30 DATE: 4/18/2011	TIME: 21:00 DATE: 4/18/2011	TIME: DATE: 4/19/2011
								RATE	FLUID TYPE	DENSITY	

22:00											Pre job safety meeting.
22:24		500		2		0.5	H2O	8.3			Test Pumps and Lines.
22:30		40		3		3	H2O	8.3			Pump H2O till circulation established.
22:33		90		100		3	CMT	15			Mix and pump CMT @ 15 ppg.
											Slow down and drop top plug.
23:06		220		30		3	H2O	8.3			Pump displacement.
23:22		800		5		2	H2O	8.3			Bump plug and check floats. (Held O.K.)
											Call Outs 10 Bbls/75 Psi. 20 Bbls/140 Psi 30 Bbls./ 220 Psi. Final 800 Psi.
											Pumped 15 bbls good cement to the pit.
23:55											Post job safety meeting.

System Used	No. of Sacks	Yield ft ³ /sk	COMPOSITION OF SYSTEM				SLURRY MIXED	
							BBLs	DENSITY
Surface Set	460	1.23	Surface Set				100	15 ppg.

CIRCULATION	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	WASHED CASING DOWN	<input type="checkbox"/> Yes <input type="checkbox"/> No	BREAKDOWN	PSI	FINAL	800	PSI
DISPLACEMENT VOL.	35	BBLs	RETURNED TO SURFACE	BEFORE PLUG BUMP	220	PSI	RATE	2 BPM
			15 Bbls.	PRESSURE				

CEMENTING TREATMENT REPORT



TREATMENT NUMBER SO2011005	DATE 4/21/2011
STAGE 1	JOB TYPE Long String

WELL NAME AND NO. Thurrow-Hill B ATU	LOCATION (LEGAL) Sec. 32 T30S R36W	RIG NAME: Trinidad Drilling	CEMENT PUMPER: 2304
FIELD Hugoton	FORMATION Chase/Council Grove	WELL DATA	BOTTOM
COUNTY Grant	STATE Kansas	AFE 20195	FT TOP
RIG FOREMAN Phillip Gibson	MUD DENSITY		FT
CEMENT SUPERVISOR Stan Owens	MUD VISC		TOTAL:
CEMENT EMPLOYEES Robert Mittlieder, Bruce Green and J.R. Ortiz	Include Footage From Ground Level To Head In Disp. Capacity		69.6

SPECIAL INSTRUCTIONS	Head & Plugs	TBG	D.P.
	WEIGHT	SIZE	TOOL
	GRADE	DEPTH	DEPTH
	THREADS	DEPTH	DEPTH
	Knockout	New	Used

LIFT PRESSURE	1200	psi	BUMP PLUG TO	2000
PRESSURE LIMIT	1400	psi	NO. of Centralizers	12
			WATER QUALITY:	pH

TIME	0001 to 2400	ARRIVE ON LOCATION	TIME: 22:00	DATE: 4/20/2011	RIG UP	TIME: 0:00	DATE: 4/21/2011	LEFT LOCATION	TIME: 3:00	DATE: 4/21/2011
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TIME	PRESSURE	VOLUME PUMPED	JOB SCHEDULED FOR	ARRIVE ON LOCATION	RIG UP	LEFT LOCATION
0001 to 2400	TBG CSG	INCR CUM	TIME: 0:00 DATE: 4/20/2011	TIME: 22:00 DATE: 4/20/2011	TIME: 0:00 DATE: 4/21/2011	TIME: 3:00 DATE: 4/21/2011
			RATE FLUID TYPE DENSITY			
0:00						Pre job safety meeting.
0:49	2000	2	0.5 H20 8.3			Test Pumps and Lines.
0:51	60	4	3 H20 8.3			Pump H2O till circulation established.
0:52	120	139.4	3 CMT 12.5			Mix and pump lead cement @ 12.5 ppg.
1:51	230	57	3 CMT 15			Mix and pump tail cement @ 15 ppg.
2:07						Shut down and wash pumps and lines.
2:09						Drop top plug.
2:11	1200	60	4 H20 8.3			Pump displacement.
2:29	1400	9.6	2 H20 8.3			Slow rate to bump plug.
2:31	2000					Bump plug and check floats. (Held O.K.)
3:00						Post job safety meeting.

Water Requirement	No. of Sacks	Yield ft ³ /sk	COMPOSITION OF SYSTEM		SLURRY MIXED	
			BBLs	DENSITY	BBLs	DENSITY
10.21	380	2.06	SDC	139.4	12.5	
4.97	260	1.23	Surface Set	57	15	

CIRCULATION	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	WASHED CASING DOWN	<input type="checkbox"/> Yes <input type="checkbox"/> No	BREAKDOWN	PSI	FINAL	2000	PSI
DISPLACEMENT VOL.	70	BBLs	RETURNED TO SURFACE	BEFORE PLUG BUMP	1400	PSI	RATE	2 BPM
			60	PRESSURE				

