

COPY

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 04824Name: PIONEER NATURAL RESOURCES USA, INC.Address 5205 N. O'CONNOR BLVD., ROOM 1357City/State/Zip IRVING TX 75039

Purchaser: _____

Operator Contact Person: ANGIE HERNANDEZPhone (972) 969-3973Contractor: Name: CHEYENNE DRILLING CO., INC.License: 5382

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/Reentry: Old Well Info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

☐ Deepening ☐ Re-perf. ☐ Conv. to Inj/SWD☐ Plug Back _____ PBDT☐ Commingled _____ Docket No. _____☐ Dual Completion _____ Docket No. _____☐ Other (SWD or Inj?) _____ Docket No. _____12/9/99 12/11/99 1/17/00

Spud Date _____ Date Reached TD _____ Completion Date _____

API NO. 15- 189223240001County STEVENS- - N2 - N2 Sec. 19 Twp. 31S Rge. 37W X E W660' FNL _____ Feet from X (circle one) Line of Section2640' FWL _____ Feet from X (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)Lease Name FULK Well # 2-19RPANOMAProducing Formation COUNCIL GROVEElevation: Ground _____ KB 3124.80'Total Depth 3275' PBDT 3227'

Amount of Surface Pipe Set and Cemented at _____ Feet

Multiple Stage Cementing Collar Used? _____ Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan 6-23-'00 U.C.
(Data must be collected from the Reserve Pit)Chloride content 1000 ppm Fluid volume 3000 bblsDewatering method used DRY OUT/EVAPORATION/BACKFILL

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. _____ Twp. _____ S Rge. _____ E/W

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 on 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 Angie HernandezTitle ENGINEERING TECH III Date 6/20/00Subscribed and sworn to before me this 20TH day of JUNE20 00Notary Public F. Jean LageDate Commission Expires 3-23-2002

F. JEAN LAGE
Notary Public
State of Texas

Comm. Expires 3-23-2002

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Drillers Timelog Received

Distribution

☒ KCC ☐ SWD/Rep ☐ NGPA
☐ KGS ☐ Plug ☒ Other
IOG (Specify)

Operator Name PIONEER NATURAL RESOURCES USA, INC. Lease Name FULK Well # 2-19R
☐ East County STEVENS
 Sec. 19 Twp. 31S Rge. 37W ☒ West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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:
 GR-CCL-CBL

☒ Log Formation (Top), Depth and Datums ☐ Sample

Name Top Datum

TOP OF COUNCIL GROVE	2783'	MD
FUNSTON	2863'	MD
CRAUSE	2887'	MD
BADER	2937'	MD
BEATTIE	2982'	MD

CASING RECORD

☒ New ☐ 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	12-1/4"	8-5/8"	24#	657'	LT PREM+	305	2%CaCl2
PRODUCTION	7-7/8"	5-1/2"	15.5#	3275'	15/85 POZ	580	2%CaCl2
					PREM+		

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
2	2939' - 2954'	ACID-1000GALS 15% HCl-Fe ACID	2939' -
4	3106' - 3114'		2954'
	CIBP @ 3075' KB		

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2-3/8"	2955' KB	N / A		
Date of First, Resumed Production, SWD or Inj.		Producing Method			
2/18/00		<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
	0	17	0	0	

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

☐ Vented ☒ Sold ☐ Used on Lease
 (If vented, submit ACO-18.)

☐ Open Hole ☒ Perforation ☐ Dually Comp. ☐ Commingled 2939' - 2954'

☐ Other (Specify) _____