

WELL COMPLETION FORM ORIGINAL
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 04824
Name: PIONEER NATURAL RESOURCES USA, INC.
Address ATTN: David Vincenti
City/State/Zip IRVING, TX 75039-9895
Purchaser: Pioneer Natural Resources USA, Inc.
Operator Contact Person: David Vincenti
Phone (972) 444-9001
Contractor: Name: Val Drilling
License: 5822

API NO. 15- 067-21469-000 201
County Grant
 - - - NW Sec. 9 Twp. 30S S. R. 36W E W
1250' FNL Feet from SW (circle one) Line of Section
204' FWL Feet from EW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name Bain Well # 1-9R
Field Name Hug-Pan-Commingled

Producing Formation Chase-Council Grove
Elevation: Ground 3043.31' Kelley Bushing 3048'
Total Depth 3010' Plug Back Total Depth 2957'
Amount of Surface Pipe Set and Cemented at 550.15' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to 11/1/2008 w/ 14158 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 _____ RECEIVED
Lease Name _____ KANSAS CORPORATION COMMISSION
License No. _____
Quarter _____ Sec. _____ Twp. 30S S. R. _____ E W
County _____ CONSERVATION DIVISION
WICHITA, KS

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: _____
Original Comp. Date 01/18/01 Original Total Depth 3026'
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back 2957' Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr?) Docket No. _____
12/27/00 12/30/00 11/08/07
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

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 [Signature]
Title Engineering Tech Date 01/17/08
Subscribed and sworn to before me this 17th day of January
20 08
Notary Public [Signature]
Date Commission Expires 7-14-2009

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied Yes Date: _____
Wireline Log Received
ANGIE G. HERNANDEZ
Geologist Report Received
Notary Public, State of Texas
My Commission Expires
JULY 14, 2009
Cop y to Jim



Operator Name Pioneer Natural Resources

Lease Name Bain Well # 1-9R

Sec. 9 Twp. 30S S.R. 36W East West

County Grant

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 all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets.) Yes No

Log Formation (Top), Depth and Datums Sample

Samples Sent to Geological Survey Yes No

Name Top Datum

Cores Taken Yes No

Chase 2494' MD

Electric Log Run (Submit Copy.) Yes No

Krider 2544' MD

List All E.Logs Run:

Ft. Riley 2706' MD

Council Grove 2822' MD

CASING RECORD <input checked="" 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
Surface	12 - 1/4"	8 - 5/8"	24#	550.15'	LT. Prem+	280	2% CaCl2
Production	7 - 7/8"	5 - 1/2"	15.5#	3010'	15/85 Pozmx	540	2% CaCl2

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 SPF	2830' - 2850'	Acidz 3500 G 15% HclFe.F1sh 3276 to	2830'
2 SPF	2852' - 2878'	Gal WF130. Frac 69000 G 65Q WF130	2910'
2 SPF	2896' - 2910'	Gel Foam. 151000# 16/30 Brady snd	
4 SPF	2706' - 2731'	Acidz 3500 G 15% hcl. 151753# 16/30	brady snd

TUBING RECORD		Size	Set At	Packer At N/A	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method			
11/14/07		<input type="checkbox"/> Flowing <input 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
87	0	X	0	0	0

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled

(If vented, submit ACO-10)

