

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 04824

Name: PIONEER NATURAL RESOURCES USA, INC.

Address ATTN: LINDA KELLY - ROOM 1325

City/State/Zip IRVING, TX 75039

Purchaser: PIONEER NATURAL RESOURCES USA, INC.

Operator Contact Person: LINDA KELLY

Phone (972) 444-9001

Contractor: Name: CHEYENNE

License: 33375

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 _____ Original Total Depth _____

Deepening Re-perf. Conv. to Enhr./SWD

Plug Back _____ Plug Back Total Depth _____

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (SWD or Enhr?) _____ Docket No. _____

<u>04/12/05</u>	<u>04/15/05</u>	<u>06/29/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API NO. 15- 15-067-21601-0000

County GRANT

 - NF - SW - SW Sec. 22 Twp. 30S S. R. 38W E W

1250' FSL _____ Feet from S/N (circle one) Line of Section

1250' FWL _____ Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name SCHMIDT Well # 3-22R

Field Name HUGOTON

Producing Formation CHASE

Elevation: Ground 3138' Kelley Bushing 3144'

Total Depth 3200' Plug Back Total Depth 3171'

Amount of Surface Pipe Set and Cemented at 641' 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 AH 1 NCR 8-11-08
(Data must be collected from the Reserve Pit)

Chloride content 1000 ppm Fluid volume 3000 bbbls

Dewatering method used DRY OUT/EVAPORATION/BACKFILL

Location of fluid disposal if hauled offsite: _____

Operator Name PIONEER NATURAL RESOURCES

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ E W

County _____ Docket No. _____

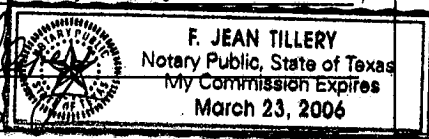
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side 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 Linda Kelly
Title ENGINEERING TECH Date 7/22/05

Subscribed and sworn to before me this 22nd day of July 2005

Notary Public F. Jean Tillery
Date Commission Expires 3/23/06



KCC Office Use ONLY

NO Letter of Confidentiality Attached
If Denied, Yes Date: _____

_____ Wireline Log Received

_____ Geologist Report Received

_____ UIC Distribution

Operator Name PIONEER NATURAL RESOURCES USA, INC. Lease Name SCHMIDT Well # 3-22R

Sec. 22 Twp. 30S S.R. 38W 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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No List All E.Logs Run: DUAL SPACED NEUTRON LOG CEMENT BOND LOG	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;"><input checked="" type="checkbox"/> Log</td> <td style="width:60%;">Formation (Top), Depth and Datums</td> <td style="width:25%;"><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>CHASE</td> <td>2144'</td> <td>MD</td> </tr> <tr> <td>KRIDER</td> <td>2461'</td> <td>MD</td> </tr> <tr> <td>FT. RILEY</td> <td>2623'</td> <td>MD</td> </tr> <tr> <td>COUNCIL GROVE</td> <td>2726'</td> <td>MD</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample	Name	Top	Datum	CHASE	2144'	MD	KRIDER	2461'	MD	FT. RILEY	2623'	MD	COUNCIL GROVE	2726'	MD
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample																	
Name	Top	Datum																	
CHASE	2144'	MD																	
KRIDER	2461'	MD																	
FT. RILEY	2623'	MD																	
COUNCIL GROVE	2726'	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#	641'	LT. PREM+	375	2%CaC12
PRODUCTION	7-7/8"	5-1/2"	15.5#	3200'	LT PREM+	530	2%CaC12

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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
4	2430' -2714'	ACDZ 5000 GAL 15% HCLFe. FLSH 58	
		BBL 2% KCL. FRAC 90000 GAL 70Q N2	
		WFG-R11, FLS 2469 GAL. 125,000#	
		White sand.	

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			
6/30/05		<input checked="" 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
		100	0	--	--

Disposition of Gas: METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled 2430' -2714'
 (If vented, submit ACO-18.) Other (Specify) _____

HALLIBURTON JOB SUMMARY				SALES ORDER NUMBER 3656948	TICKET DATE 04/14/05
REGION Central Operations		MWA / COUNTRY Mid Continent/USA		BDA / STATE MC/Ks	COUNTY GRANT
MBU ID / EMPL # MCLI0110 / 217398		H.E.S. EMPLOYEE NAME Mickey Cochran		PSL DEPARTMENT Cement	ORIGINAL
LOCATION LIBERAL		COMPANY PIONEER NATURAL RESOURCES		CUSTOMER REP / PHONE DAVID HIGGINS	
TICKET AMOUNT \$18,316.63		WELL TYPE 02 Gas		API/UWI #	
WELL LOCATION ULYSSES, KS		DEPARTMENT ZI		SAP BOMB NUMBER 7523	Cement Production Casing
LEASE NAME SCHMIDT		Well No. 3-22R	SEC / TWP / RNG 22 - 30S - 38W	HES FACILITY (CLOSEST TO WELL SITE) Liberal, Ks	

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Cochran, M 217398	8.5			
Beasley, J 299920	8.5			
Milbourn, W 321935	8.5			
Brady, P 322238	8.5			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10441883	40			
10589601	40			
10243558/10011276	20			
10010748/10011277	20			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	4/14/2005	4/14/2005	4/15/2005	4/15/2005
Time	1730	2030	0358	0506

Type and Size	Qty	Make
Float Collar	1	H
Float Shoe		O
Centralizers	13	W
Top Plug	1	C
HEAD	1	H O
Limit clamp	1	O
Weld-A	1	W
Guide Shoe	1	C
BTM PLUG BASKET	1	O

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	NEW	15.5#	5 1/2		0	3,205	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			7 7/8"				Shots/Ft.
Perforations							
Perforations							
Perforations							

Materials			
Mud Type _____	Density _____	Lb/Gal _____	
Disp. Fluid _____	Density _____	Lb/Gal _____	
Prop. Type _____	Size _____	Lb _____	
Prop. Type _____	Size _____	Lb _____	
Acid Type _____	Gal. _____	% _____	
Acid Type _____	Gal. _____	% _____	
Surfactant _____	Gal. _____	In _____	
NE Agent _____	Gal. _____	In _____	
Fluid Loss _____	Gal/Lb _____	In _____	
Gelling Agent _____	Gal/Lb _____	In _____	
Fric. Red. _____	Gal/Lb _____	In _____	
Breaker _____	Gal/Lb _____	In _____	
Blocking Agent _____	Gal/Lb _____		
Perfpac Balls _____	Qty. _____		
Other _____			
Other _____			
Other _____			
Other _____			

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
4/14	3.5	4/15	1.0	Cement Production Casing
4/15	6.0			
Total	9.5	Total	1.0	

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Ordered _____	<input checked="" type="checkbox"/> Hydraulic Horsepower	Used _____
Treating _____	<input checked="" type="checkbox"/> Average Rates in BPM	Overall _____
Feet 21	<input checked="" type="checkbox"/> Cement Left in Pipe	Reason _____
		SHOE JOINT

Cement Data							
Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	305	MHLC C		8% TOTAL GEL - 5# GILSONITE - 6/10% HALAD-322 -	10.48	2.10	12.60
2	180	PREM PLUS C		5# GILSONITE - 2% CC - .6% HALAD-322 - 1/4# FLOCELE -	6.30	1.42	14.50
3							
4							

Summary							
Circulating _____	Displacement _____	Preflush: BBI _____	Type: _____				
Breakdown _____	MAXIMUM _____	Load & Bkdn: Gal - BBI _____	Pad: Bbl - Gal _____				
Lost Returns _____	Lost Returns-1 _____	Excess /Return BBI _____	Calc. Disp Bbl _____				
Cmt Rtrn#Bbl _____	Actual TOC _____	Calc. TOC: _____	Actual Disp. _____				
Average _____	Frac. Gradient _____	Treatment: Gal - BBI _____	Disp: Bbl _____				
Shut In: Instant _____	5 Min. _____	Cement Slurry BBI _____	160.0				
	15 Min. _____	Total Volume BBI _____	236.00				

Frac Ring #1 _____ | Frac Ring #2 _____ | Frac Ring #3 _____ | Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT
CUSTOMER REPRESENTATIVE _____

 SIGNATURE

ORIGINAL

HALLIBURTON JOB LOG			TICKET # 3656948	TICKET DATE 04/14/05
REGION Central Operations		NWA / COUNTRY Mid Continent/USA		BDA / STATE MC/Ks
MBU ID / EMPL # MCLI0110 / 217398		H.E.S EMPLOYEE NAME Mickey Cochran		COUNTY GRANT
LOCATION LIBERAL		COMPANY PIONEER NATURAL RESOURCES		PSL DEPARTMENT Cement
TICKET AMOUNT \$18,316.63		WELL TYPE 02 Gas		CUSTOMER REP / PHONE DAVID HIGGINS 1-620-353-8548
WELL LOCATION ULYSSES, KS		DEPARTMENT Z1		API/UMI #
LEASE NAME SCHMIDT		Well No. 3-22R	SEC / TWP / RNG 22 - 30S - 38W	JOB PURPOSE CODE Cement Production Casing
HES FACILITY (CLOSEST TO WELL S) Liberal, Ks				

HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS
Cochran, M 217398	9.5						
Beasley, J 299920	9.5						
Milbourn, W 321935	9.5						
Brady, P 322238	9.5						

Chart No.	Time	Rate (BPM)	Volume (BBL/GAL)	Rate			Press. (PSI)			Job Description / Remarks
				N2	CSG	Tbg	N2	CSG	Tbg	
4/14/2005	2130									JOB READY
	1730									CALLER FOR JOB
	1800									PRETRIP SAFETY MEETING
	2030									ARRIVE ON LOCATION
	2035									PREJOB SAFETY MEETING W/ HALLIBURTON CREW
	2040									SPOT EQUIPMENT
	2045									RIG UP EQUIPMENT
	2119									START CASING
4/15/2005	0030									CASING ON BOTTOM & COULD NOT GET CIRCULATION W/ RIG PUMP
	0358						3500			GOT RETURNS BACK & READY TO CEMENT
	0402	5.0	114.0				200			PRESSURE TEST PUMPS & LINES
	0424	5.0	46.0				150			START LEAD CEMENT 305 SKS @ 12.6#
	0439									START TAIL CEMENT 180 SKS @ 14.5#
	0440									SHUT DOWN & WASH PUMP & LINES
	0443	5.0	0				20			DROP PLUG
	0448	5.0	20.0				100			START DISPLACEMENT W/ 1% KCL
	0454	3.0	50.0				600-500			DISPLACEMENT CAUGHT CEMENT
	0457	1.7	66.0				600			LOST RETURNS 3LOW RATE
	0505	1.7	76.0				1400			SLOW RATE
	0506						0			BUMP PLUG
	0506									RELEASE --- FLOAT HELD
										END JOB
							800			PRESSURE BEFORE PLUG LANDED
										DID NOT CIRCULATED CEMENT TO PIT
THANK YOU FOR CALLING HALLIBURTON MICKEY & CREW										

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INVOICE

HALLIBURTON

Halliburton Energy Services, Inc.

Remit To : P.O. Box 203143, Houston, TX 77216-3143

Wire Transfer Information

Account Number:

ABA Routing Number:

Invoice Date: April 16, 2005

Invoice Number: 93180855

DIRECT CORRESPONDENCE TO:

P.O. Box 1598
LIBERAL, KS 67905-1598
US
Tel: 620-624-3879
Fax: 620-629-4673

Rig Name:
Well Name: PIONEER SCHMIDT 3-22R, GRANT
Ship to: ULYSSES, KS 67880
GRANT

Job Date: April 15, 2005
Cust. PO No.: N/A
Payment Terms: Net 30 days from Invoice date
Quote No.: 21182569
Sales Order No.: 3656948
Manual Ticket No.:
Shipping Point: LIBERAL Hwy 54 W. Ship Pt.
Ultimate Destination Country: US
Customer Account No.: 304606

TO:

PIONEER NATURAL RES U S A INC
OPERATIONS DEPT.
PO BOX 1006
ULYSSES KS 67880

Contract No.:
Contract from:
Contract to:

Material	Description	QTY	UOM	Base Amount	Unit Amount	Gross Amount	Discount	Net Amount
7523	CMT PRODUCTION CASING BOM JP035	1.00	JOB					
1	ZI-MILEAGE FROM NEAREST HES BA 000-117 Number of Units	40.000 1	MI unit		6.56	262.40	136.45	125.95
86955	ZI FUEL SURCHG-HEAVY TRKS >1 1 FUEL SURCHG-HEAVY TRKS >1 1/2 TON/PER.MI Number of Units	40.000 1	MI unit		0.30	12.00		12.00
2	MILEAGE FOR CEMENTING CREW,ZI 000-119 Number of Units	40.000 1	MI unit		3.86	154.40	80.29	74.11
86954	ZI FUEL SURCHG-CARS/PICKUPS <1 FUEL SURCHG-CARS/PICKUPS <1 1/2TON/PER/MI Number of Units	40.000 1	MI unit		0.10	4.00		4.00
16091	ZI - PUMPING CHARGE 001-016 DEPTH FEET/METERS (FT/M)	1.000 3,155	EA FT		3,350.00	3,350.00	1,742.00	1,608.00
132	PORT. DAS W/CEMWIN;ACQUIRE W/H 045-050 NUMBER OF DAYS	1.000 1	JOB Days		1,153.00	1,153.00	599.56	553.44
142	AXIAL FLOW MIXER,W/O ADC,/JOB, 046-070 NUMBER OF JOBS	1.000 1	EA Job		797.00	797.00	414.44	382.56

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Continuation

HALLIBURTON

Halliburton Energy Services, Inc.

Remit To : P.O. Box 203143, Houston, TX 77216-3143

Invoice Date: April 16, 2005

Invoice Number: 93180855

Material	Description	QTY	UOM	Base Amount	Unit Amount	Gross Amount	Discount	Net Amount
74038	ZI PLUG CONTAINER RENTAL-1ST D DAYS OR FRACTION (MINI)	1.000 1	EA Days	924.00		924.00	480.48	443.52
*101237390	PLUG,CMTG.TOP,5 1/2,HWE,4.38 M PLUG, CEMENTING, TOP, 5 1/2, HWE, 4.38 / MIN/5.09 MAX CASING ID, SYNTHETIC / SERVICE	1.000	EA		145.03	145.03	75.42	69.61
*100004723	SHOE,GID,5-1/2 8RD SHOE,GUIDE, 5-1/2 8RD	1.000	EA		272.70	272.70	95.44	177.26
*100076173	FLOAT-IFV,5 1/2,8RD,LG,8RD & B VALVE ASSEMBLY, INSERT FLOAT, 5-1/2 / 14-23 LBS/FT, 8RD, LG 8RD AND BUTTRESS	1.000	EA		336.07	336.07	117.63	218.44
*100013930	FILUP ASSY,1.250 ID,4 1/2,5 IN 27815.19113 / FILLUP ASSY - 1.250 ID - 4-1/2 - / 5 IN. INSERT FLOAT VALVE	1.000	EA		72.57	72.57	25.40	47.17
*100004476	CTRZR ASSY,5 1/2 CSG X 7 7/8 H 806.60022 / CENTRALIZER ASSY - API - 5-1/2 CSG X / 7-7/8 HOLE - HINGED - W/WELDED / IMPERIAL BOWS	13.000	EA		102.00	1,326.00	464.10	861.90
*100004639	COLLAR-STOP-5 1/2"-W/DOGS XXXXXXXX 806.72730 / CLAMP - LIMIT - 5-1/2 - FRICTION - / W/DOGS	1.000	EA		54.47	54.47	19.06	35.41
*100005045	KIT,HALL WELD-A KIT, HALLIBURTON WELD-A / (1 kit per fiberboard box)	1.000	EA		46.82	46.82	16.39	30.43
*100004596	BSKT,CEM,5 1/2 CSG X 7 7/8,8 3 806.70030 / BASKET - CEMENT - 5-1/2 CSG X 7-7/8 - / 8-3/4 HOLE - SLIP-ON - STEEL VANE - / UNIVERSAL BOW	1.000	EA		294.80	294.80	103.18	191.62
100001585	CHEM-KCL POTASSIUM CHLORIDE - CHEM-KCL POTASSIUM CHLORIDE - 50#	250.000	LB		0.78	195.00	101.40	93.60
372867	Cmt PSL - DOT Vehicle Charge, Cmt PSL - DOT Vehicle Charge, CMT	3.000	EA		161.50	484.50		484.50
*66994	SBM Modified Hall Light Cmt Pr 504-112	305.000	SK		29.78	9,082.90	4,723.11	4,359.79

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Continuation

HALLIBURTON
Halliburton Energy Services, Inc.

APR 22 2005

Remit To : P.O. Box 203143, Houston, TX 77216-3143

MIDCONTINENT

Invoice Date: April 16, 2005

HUGOTON PRODUCE Invoice Number: 93180855

Material	Description	QTY	UOM	Base Amount	Unit Amount	Gross Amount	Discount	Net Amount
*100005053	Chemical - Calcium Chloride Hi 509-406890.50812 / CALCIUM CHLORIDE - HI TEST PELLET - / 94- 97% CACL 2 - 80# BAG	5.000	SK		150.30	751.50	390.78	360.72
*100005049	Chemical - Flocele (25 lb sk) XXXXXXXX 890.50071 / FLOCELE - 3/8 - 25 LB SACK	122.000	LB		4.47	545.34	283.58	261.76
*100012205	CEM,CLASS C / PREMIUM PLUS, BU 504-050516.00265 / CEMENT - CLASS C - PREMIUM - BULK	180.000	SK		30.61	5,509.80	2,865.10	2,644.70
*100003646	CHEMICAL - HALAD-322 - 50 LB S 507-775516.00144 / CHEMICAL - HALAD-322 - 50 LB SACK	268.000	LB		12.99	3,481.32	1,810.29	1,671.03
*101007446	CHEM,D-AIR 3000, 40 LB BAG Chemical - D-Air 3000	45.000	LB		7.05	317.25	164.97	152.28
*100003700	Chem- Gilsonite (Bulk) 508-292 516.00337 / CHEMICAL - GILSONITE - BULK	2,425.000	LB		1.00	2,425.00	1,261.00	1,164.00
3965	HANDLE&DUMP SVC CHR, CMT&ADDI 500-207 NUMBER OF EACH	595.000	CF		3.68	2,189.60	1,138.59	1,051.01
76400	ZI MILEAGE,CMT MTLs DEL/RET MI 500-306 / MILEAGE,CMTG MTLs DEL/RET PER/TON MI.MIN NUMBER OF TONS	501.000	MI		2.24	1,122.24	583.56	538.68
87605	ZI FUEL SURCHG-CMT & CMT ADDIT FUEL SURCHG-CMT & CMT ADDITIVES/PER TNM NUMBER OF TONS	501.000	MI		0.10	50.10		50.10
Total						35,359.81	17,692.22	17,667.59
Sales Tax - State								649.04
INVOICE TOTAL								18,316.63
								US Dollars
VENDOR <u>0477166</u>								
LSE/WELL GEN SUB						Amount	Disc. Date	
<u>93180855-001016309</u>						<u>18,316.63</u>	<u>4/16/05</u>	
<u>AFC007083</u>								
							<u>S-16-05</u>	
							<u>OH</u>	

Payment Terms:

If customer does not have an approved open account with Halliburton, all sums are payable in cash at the time of performance of services or delivery of equipment, products, or materials. If customer has an approved open account, Invoices are payable on the twentieth day after date of invoice. Customer agrees to pay interest on unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Halliburton employs an attorney for collection of any amount, Customer agrees to pay attorney fees of 20% of the unpaid account, plus all collection and court costs.

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HALLIBURTON JOB SUMMARY

REGION Central Operations	NWA / COUNTRY Mid Continent/USA	SALES ORDER NUMBER 3652145	TICKET DATE 04/12/05
MBU ID / EMPL # MCIL 0110 / 198516	H.E.S. EMPLOYEE NAME JASON CLEMENS	BDA / STATE MC/KS	COUNTY GRANT
LOCATION LIBERAL	COMPANY PIONEER NATURAL RESOURCES 3	PSL DEPARTMENT Cement	ORIGINAL
TICKET AMOUNT \$12,146.08	WELL TYPE 01 Oil	CUSTOMER REP / PHONE DAVID HIGGINS	
WELL LOCATION ULYSSES	DEPARTMENT ZI	SAP BOMB NUMBER 7521	Cement Surface Casing
LEASE NAME SCHMIDT	Well No. SEC / TWP / RNG 13-22R 22 - 30S - 38W	HES FACILITY (CLOSEST TO WELL SITE) LIBERAL, KS	

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Clemens, A 198516	3.0			
Montez, M 325346	3.0			
Chavez, E 3478816	3.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10547690	40			
10251403	40			
10011392-10011272	20			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	4/12/2005	4/12/2005	4/12/2005	4/12/2005
Time	1200	1600	1801	1837

Tools and Accessories

Type and Size	Qty	Make
Float Collar		H
Float Shoe		O
Centralizers	4	W
Top Plug	1	C
HEAD	1	H O
Limit clamp	1	O
Weld-A	1	W
Guide Shoe	1	C
BTM PLUG		O

Well Data

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	NEW	24#	8 5/8"		0	643	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			12 1/4"				Shots/Ft.
Perforations							
Perforations							
Perforations							

Materials

Mud Type _____	Density _____	Lb/Gal _____
Disp. Fluid _____	Density _____	Lb/Gal _____
Prop. Type _____	Size _____	Lb _____
Prop. Type _____	Size _____	Lb _____
Acid Type _____	Gal. _____	% _____
Acid Type _____	Gal. _____	% _____
Surfactant _____	Gal. _____	In _____
NE Agent _____	Gal. _____	In _____
Fluid Loss _____	Gal/Lb _____	In _____
Gelling Agent _____	Gal/Lb _____	In _____
Fric. Red. _____	Gal/Lb _____	In _____
Breaker _____	Gal/Lb _____	In _____
Blockage Agent _____	Gal/Lb _____	
Perfpac Balls _____	Qty. _____	
Other _____		
Other _____		
Other _____		
Other _____		

Hours On Location / Operating Hours

Date	Hours	Date	Hours
4/12	3.0	4/12	1.0
Total	3.0	Total	1.0

Description of Job
Cement Surface Casing

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Hydraulic Horsepower
 Ordered _____ Avail. _____ Used _____
Average Rates in BPM
 Treating _____ Disp. _____ Overall _____
Cement Left in Pipe
 Feet **42** Reason _____ **SHOE JOINT**

Cement Data

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	200	HLC PP C		2% CC - 1/4# FLOCELE	11.22	2.04	12.30
2	175	PREM PLUS C		2% CC - 1/4# FLOCELE	6.36	1.35	14.80
3							
4							

Summary

Circulating Breakdown _____	Displacement _____	Flush: BBI _____	Type: FRESH
Lost Returns _____	MAXIMUM _____	Load & Bkdn: Gal - BBI _____	Pad: Bbl - Gal _____
Cmt Rtrn#Bbl _____	Lost Returns-# _____	Excess /Return BBI _____	Calc. Disp Bbl _____
Average _____	Actual TOC _____	Calc. TOC: _____	Actual Disp. 38
Shut In: Instant _____	Frac. Gradient _____	Treatment: Gal - BBI _____	Disp: Bbl _____
	5 Min. _____ 15 Min. _____	Cement Slurry BBI _____	
		Total Volume BBI 158.00	

Frac Ring #1 _____ | Frac Ring #2 _____ | Frac Ring #3 _____ | Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____
 SIGNATURE _____

ORIGINAL

HALLIBURTON JOB LOG				TICKET #	TICKET DATE
				3652145	04/12/05
REGION		NWA / COUNTRY		BDA / STATE	COUNTY
Central Operations		Mid Contitnent/USA		MC/Ks	GRANT
MBU ID / EMPL #		H.E.S. EMPLOYEE NAME		PSL DEPARTMENT	
MCIL 0110 / 198516		JASON CLEMENS		Cement	
LOCATION		COMPANY		CUSTOMER REP / PHONE	
LIBERAL		PIONEER NATURAL RESOURCES		DAVID HIGGINS 1-620-353-8548	
TICKET AMOUNT		WELL TYPE		API/WI #	
\$12,146.08		01 Oil			
WELL LOCATION		DEPARTMENT		JOB PURPOSE CODE	
ULYSSES		ZI		Cement Surface Casing	
LEASE NAME		Well No.	SEC / TWP / RNG	HES FACILITY (CLOSEST TO WELL S)	
SCHMIDT		3-22R	22 - 30S - 38W	LIBERAL, KS	

HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS
Clemens, A 198516	3						
Montez, M 325346	3						
Chavez, E 3478815	3						

Chart No.	Time	Rate (BPM)	Volume (BBL)(GAL)	Rate			Press.(PSI)			Job Description / Remarks
				N2	CSG.	Tbg	N2	CSG.	Tbg	
	1200									CALLED FOR JOB
	1530									ARRIVE ON LOCATION
	1545									PRE-JOB SAFTEY MEETING
	1600									SPOT EQUIPMENT
	1645									START CASING
	1745									CASING ON BOTTOM, CIRCULATE W/ RIG
	1802						1500			PRESSURE TEST
	1803	6.0	0-5				75			START FRESH H2O SPACER
	1806	6.0	0-73				100			START LEAD 200 SKS (HLC PP C) MIXED @ 12.3#
	1816	6.0	0-42				120			START TAIL 176 SKS (PREM PLUS) MIXED @ 14.8#
	1823	6.0	115.0				100			END CEMENT /// DROP PLUG
	1823	4.0	0-38				25			START DISPLACEMENT
	1828	6.0	20.0				100			CAUGHT CEMENT
	1830	2.0	28.0				175			SLOW RATE
	1837	2.0	38.0				1100			LAND PLUG /// FLOAT HELD
	1840									END JOB
							250			PRESSURE BEFORE LANDING PLUG
										CIRCULATED CEMENT

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INVOICE

ORIGINAL

HALLIBURTON <small>Halliburton Energy Services, Inc.</small>	Wire Transfer Information Account Number: ABA Routing Number:
Remit To : P.O. Box 203143, Houston, TX 77216-3143	

Invoice Date: April 13, 2005	Invoice Number: 93175632
DIRECT CORRESPONDENCE TO: P.O. Box 1598 LIBERAL, KS 67905-1598 US Tel: 620-624-3879 Fax: 620-629-4673	Rig Name: Well Name: PIONEER SCHMIDT 3-22R, GRANT Ship to: ULYSSES, KS 67880 GRANT Job Date: April 12, 2005 Cust. PO No.: N/A Payment Terms: Net 30 days from Invoice date Quote No.: 21182567 Sales Order No.: 3652145 Manual Ticket No.: Shipping Point: LIBERAL Hwy 54 W. Ship Pt. Ultimate Destination Country: US Customer Account No.: 304606
TO: PIONEER NATURAL RES U S A INC OPERATIONS DEPT. PO BOX 1006 ULYSSES KS 67880	Contract No.: Contract from: Contract to:

Material	Description	QTY	UOM	Base Amount	Unit Amount	Gross Amount	Discount	Net Amount
7521	PSL - CMT SURFACE CASING - BOM JP010	1.00	JOB					
1	*ZI-MILEAGE FROM NEAREST HES B 000-117 Number of Units	40.000	MI		6.56	262.40	136.45	125.95
86955	ZI FUEL SURCHG-HEAVY TRKS >1 1 FUEL SURCHG-HEAVY TRKS >1 1/2 TON/PER,MI Number of Units	40.000	MI		0.30	12.00		12.00
2	MILEAGE FOR CEMENTING CREW,ZI 000-119 Number of Units	40.000	MI		3.86	154.40	80.29	74.11
86954	ZI FUEL SURCHG-CARS/PICKUPS<1 FUEL SURCHG-CARS/PICKUPS<1 1/2TON/PER/MI Number of Units	40.000	MI		0.10	4.00		4.00
16091	ZI - PUMPING CHARGE 001-016 DEPTH 700 FEET/METERS (FT/M)	1.000	EA		2,817.00	2,817.00	1,464.84	1,352.16
132	PORTABLE DAS,/DAY/JOB,ZI 045-050 NUMBER OF DAYS	1.000	JOB		1,153.00	1,153.00	599.56	553.44
142	AXIAL FLOW MIXER,W/O ADC,/JOB, 046-070 NUMBER OF JOBS	1.000	EA		797.00	797.00	414.44	382.56

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Halliburton Energy Services, Inc.

Remit To : P.O. Box 203143, Houston, TX 77216-3143

Invoice Date: April 13, 2005

Invoice Number: 93175632

Material	Description	QTY	UOM	Base Amount	Unit Amount	Gross Amount	Discount	Net Amount
74038	ZI PLUG CONTAINER RENTAL-1ST D DAYS OR FRACTION (MIN1)	1.000 1	EA Days	924.00		924.00	480.48	443.52
*101227839	PLUG,CMTG, TOP, 8 5/8, HWE, 7.20 M PLUG, CEMENTING, TOP, 8 5/8, HWE, 7.20 / MIN/8.09 MAX CASING ID, SYNTHETIC / SERVICE	1.000	EA		265.83	265.83	138.23	127.60
*101314446	SHOE, CSG, TIGER TOOTH, 8 5/8 IN SHOE, CASING, TIGER TOOTH, 8 5/8 INCH / 8RD, 7.972 DRIFT ID	1.000	EA		651.20	651.20	227.92	423.28
*100004702	VALVE ASSY-INSERT FLOAT-8-5/8 24A- 815.19502 / VALVE ASSY - INSERT FLOAT - 8-5/8 8RD / CSG 24#	1.000	EA		474.91	474.91	166.22	308.69
*100013933	FILLUP ASSY - 1.500 ID - 7 IN. 815.19405 / FILLUP ASSY - 1.500 ID - 7 IN. - 8-5/8 / INSERT FLOAT VALVE	1.000	EA		105.13	105.13	36.80	68.33
*100004521	CENTRALIZER ASSY - 8-5/8 CSG X 40806.61048 / CENTRALIZER ASSY - 8-5/8 CSG X 12-1/4 / HOLE - HINGED - W/WELDED STANDARD / BOWS	4.000	EA		129.53	518.12	181.34	336.78
*100004599	BASKET - CEMENT - 8 5/8 CSG X 806.70060 / BASKET - CEMENT - 8-5/8 CSG X 11 - / 12-1/4 HOLE - SLIP-ON - STEEL VANE - / UNIVERSAL BOW	1.000	EA		417.74	417.74	146.20	271.54
*100004642	CLP,LIM, 8 5/8, FRICT, WTH DOGS XXXXXXXX 806.72750 / CLAMP - LIMIT - 8-5/8 - FRICTION - / W/DOGS	1.000	EA		63.30	63.30	22.16	41.14
*100005045	HALLIBURTON WELD-A KIT HALLIBURTON WELD-A KIT	1.000	EA		46.82	46.82	16.39	30.43
372867	Cmt PSL - DOT Vehicle Charge, Cmt PSL - DOT Vehicle Charge, CMT	2.000	EA		161.50	323.00		323.00
*14241	SBM Halliburton Light Premium 504-120	200.000	SK		24.07	4,814.00	2,503.28	2,310.72
*100005049	Chemical - Flocele (25 lb sk) XXXXXXXX 890.50071 / FLOCELE - 3/8 - 25 LB SACK	94.000	LB		4.47	420.18	218.49	201.69

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Halliburton Energy Services, Inc.

APR 18 2005

Remit To : P.O. Box 203143, Houston, TX 77216-3143 MIDCONTINENT

Invoice Date: April 13, 2005 HUGOTON PRO Invoice Number: 93175632

Material	Description	QTY	UOM	Base Amount	Unit Amount	Gross Amount	Discount	Net Amount
*100005053	Chemical - Calcium Chloride Hi 509-406890.50812 / CALCIUM CHLORIDE - HI TEST PELLET - / 94- 97% CACL 2 - 80# BAG	9.000	SK		150.30	1,352.70	703.40	649.30
*100012205	Cement- Class C / Premium Plus 504-050516.00265 / CEMENT - CLASS C - PREMIUM - BULK	175.000	SK		30.61	5,356.75	2,785.51	2,571.24
3965	HANDLE&DUMP SVC CHRГ, CMT&ADDI 500-207 NUMBER OF EACH	411.000	CF		3.68	1,512.48	786.49	725.99
76400	ZI MILEAGE,CMT MTLs DEL/RET MI 500-306 / MILEAGE,CMTG MTLs DEL/RET PER/TON MI.MIN NUMBER OF TONS	357.000	MI		2.24	799.68	415.83	383.85
87605	ZI FUEL SURCHG-CMT & CMT ADDIT FUEL SURCHG-CMT & CMT ADDITIVES/PER TNM NUMBER OF TONS	357.000	MI		0.10	35.70		35.70
Total						23,281.34	11,524.32	11,757.02
Sales Tax - State								389.06
INVOICE TOTAL								12,146.08 US Dollars

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VENDOR

047766

USE/WELL	GEN	SUB	Amount	Exc. Date
4263109	001016	309	12,146.08	4-12-05

AFE 001083

4.25.05
Q.N. ✓

Be 4/24/05 ✓

Payment Terms:

If customer does not have an approved open account with Halliburton, all sums are payable in cash at the time of performance of services or delivery of equipment, products, or materials. If customer has an approved open account, invoices are payable on the twentieth day after date of invoice. Customer agrees to pay interest on unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Halliburton employs an attorney for collection of any amount, Customer agrees to pay attorney fees of 20% of the unpaid account, plus all collection and court costs.