

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

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: RE-SUBMITTED AT THE REQUEST OF KCC

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>1/16/01</u>	<u>1/20/01</u>	<u>2/20/01</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API NO. 15- 189-22353-0000

County Stevens

NW - SE - SE4 Sec. 17 Twp. 32S S. R. 38W E W

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

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

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name Howell Well # B-2R

Field Name Panoma

Producing Formation Council Grove

Elevation: Ground 3198' Kelley Bushing 3203'

Total Depth 3070' Plug Back Total Depth 3030'

Amount of Surface Pipe Set and Cemented at 629' Feet

Multiple Stage Cementing Collar Used? _____ Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to Atk - Dlg - 6/13/08 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 1000 ppm Fluid volume 3000 bbls

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 [Signature]

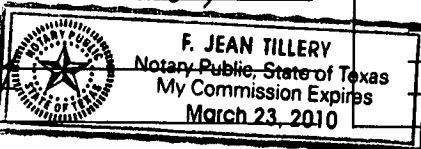
Title Engineering Tech Date 3-4-08

Subscribed and sworn to before me this 4th day of March

2008

Notary Public [Signature]

Date Commission Expires 3/23/2010



KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

copy to Jim

Operator Name Pioneer Natural Resources

Lease Name Howell

Well # B-2R

Sec. 17 Twp. 32S S.R. 38W East West

County Stevens

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

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run (Submit Copy.) Yes No

List All E.Logs Run:

Array Induction Shallow Focused Elec
Micro Resistivity
Compensated Neutron Photo Density
Cement Bond

Log Name	Formation (Top), Depth and Datums		Sample Datum
	Top	Datum	
Council Grove	2814'	MD	
Funston	2896'	MD	
Crause	2922'	MD	
Wreford	2788'	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#	629'	LT Prem+	335	2%CaCl2
Production	7 - 7/8"	5 - 1/2"	15.5#	3070'	15/85 POZMX	495	2%CaCl2

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose ____ Perforate ____ Protect Casing ____ Plug Back TD ____ Plug Off Zone	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			

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
1	2828' - 2950' (78' w/ 78 holes)	Acidiz & frac w/ 3500 G 15% HCL flsh w/ 2850 G. 14000 G of WF + 15000# 100 msn snd + 47000 G 65 Q WF + 103000# 16/30 Ottawa snd.	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 - 3/8"	2978'	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
2/21/01			<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
53	0	X	0	0	0

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled 2828' - 2950'
(If vented, submit ACO-18.) Other (Specify) _____