

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

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 Energy

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. _____

05/24/03 05/28/03 07/07/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API NO. 15- 081214820000

County Haskell

NE Sec. 23 Twp. 29S S. R. 34W E W

330' FNL Feet from SW (circle one) Line of Section

330' FEL Feet from EW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name Mossbarger Well # 3-23R

Field Name Panoma

Producing Formation Council Grove

Elevation: Ground 2959' Kelley Bushing 2964'

Total Depth 3082' Plug Back Total Depth 3052'

Amount of Surface Pipe Set and Cemented at 686' 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 Ait I NoR 1-26-09
(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. _____

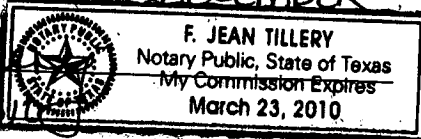
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side 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 12-13-07

Subscribed and sworn to before me this 13TH day of DECEMBER

Notary Public [Signature]
Date Commission Expires 3/23/2010



KCC Office Use ONLY

- Letter of Confidentiality Attached
- If Denied, Yes No Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution

Operator Name Pioneer Natural Resources

Lease Name Mossbarger

Well # 3-23R

Sec. 23 Twp. 29S S.R. 34W East West

County Haskell

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:

Sonic Cement Log
Photo. Density Neutron Log
Array Induction Shallow Focused Log

Log Formation (Top), Depth and Daturms Sample

Name	Top	Datum
Council Grove	2856'	MD
Chase	2529'	MD
Funston	2923'	MD
3 Mile	2860'	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#	686'	LT Prem+	375	2% CaCl2
production	7 - 7/8"	5 - 1/2"	15.5#	3082'	Poz Prem+	560	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
		2 SPF	2869' - 2911'	
		20# wtr frac. Frac 57000 G 20# wtr		
		frac G & 15000# 100 msh snd &		
		103830# 16/30 Ottawa snd.		

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 - 3/8"	2911'	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
07/07/03			<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
		287	0		

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled 2869' - 2911'
 (If vented, submit ACO-18.) Other (Specify) _____