



KANSAS CORPORATION COMMISSION 1056458
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009
Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4824
Name: Pioneer Natural Resources USA, Inc.
Address 1: 5205 N O CONNOR BLVD
Address 2: _____
City: IRVING State: TX Zip: 75039 + 3707
Contact Person: Ron Hehmann
Phone: (972) 444-9001
CONTRACTOR: License # 4824
Name: Pioneer Natural Resources USA, Inc.
Wellsite Geologist: Larry Brooks
Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to ENHR Conv. to SWD
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____

<u>7/3/2010</u>	<u>8/4/2010</u>	<u>8/26/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-067-21716-00-00

Spot Description: _____
NW NW SE SW Sec. 25 Twp. 30 S. R. 36 East West
1200 Feet from North / South Line of Section
1637 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Grant

Lease Name: Evans Well #: 4/25R

Field Name: _____

Producing Formation: Chase/Council Grove

Elevation: Ground: 2910 Kelly Bushing: 11

Total Depth: 3025 Plug Back Total Depth: 2916

Amount of Surface Pipe Set and Cemented at: 591 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

(Data must be collected from the Reserve Pit)

Chloride content: 12000 ppm Fluid volume: 4200 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: Hayden Operating

Lease Name: Liz Smith #3 License #: 33562

Quarter NE Sec. 26 Twp. 30 S. R. 34 East West

County: Haskell Permit #: D26802

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Deanna Gantico Date: 06/08/2011



1056458

Operator Name: Pioneer Natural Resources USA, Inc. Lease Name: Evans Well #: 4/25R
 Sec. 25 Twp. 30 S. R. 36 East West County: Grant

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: NEUTRON	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Attached Attached Attached
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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	12.25	8.6250	24	606	POZ/Class G	280	
Production	7.8750	5.5	15.5	2996	POZ/Class G	417	

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
Attached	Attached	Attached	Attached

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or ENHR. 10/21/2010		Producing Method: <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

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input checked="" type="checkbox"/> Commingled <i>(Submit ACO-5) (Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	Pioneer Natural Resources USA, Inc.
Well Name	Evans 4/25R
Doc ID	1056458

Tops

Glorieta	1147	KB
Hollenberg	2399	KB
Herington	2428	KB
Krider	2452	KB
Towanda	2554	KB
Ft. Riley	2608	KB
A1 Lime	2723	KB
B1 Lime	2798	KB
B2 Lime	2822	KB
Base B2 Lime	2835	KB

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Perforations

Perforations			
3	Chase	Shot & Fractured	2570-2586
3	Chase	Shot & Fractured	2595-2608
3	Chase	Shot & Fractured	2620-2643
3	Council Grove	Shot & Fractured	2714-2714
3	Council Grove	Shot & Fractured	2730-2734
3	Council Grove	Shot & Fractured	2776-2782
3	Council Grove	Shot & Fractured	2808-2822
3	Council Grove	Shot & Fractured	2832-2844

CEMENTING TREATMENT REPORT

TREATMENT NUMBER 20201021	DATE 8/1/2010
STAGE 1	JOB TYPE Surface

WELL NAME AND NO. Evans 4-25 R	LOCATION (LEGAL) Sec. 25, T30N, R16W
FIELD Horton-Peruvia	FORMATION
COUNTY Otero	STATE Kansas
	API NO. 13467-21716-0000

LOG NAME Process Natural Resources Rig # 3	CEMENT PUMPER
WELL DATA	BOTTOM
BIT SIZE 12 1/4	CNG. Line Size 8.50
TOTAL DEPTH 616	WEIGHT 24
MUD TYPE	FOOTAGE 591
<input type="checkbox"/> BSST	GRADE 1-55
<input type="checkbox"/> BSCT	TREAD LTAC
MUD DENSITY	42
MUD VISC.	Disp. Capacity 35
Exclude Forces from Current Level To Head in Disp. Capacity	
TYPE	DEPTH
TYPE	DEPTH
TYPE	DEPTH
TYPE	DEPTH
TOTAL: 35	

RIG FOREMAN: Derrick Ross/Tony Boushby
 CEMENT SUPERVISOR: Sam Owens

SPECIAL INSTRUCTIONS

HEAD & HOOP	SIZE	TYPE
<input type="checkbox"/> Double Box 6	WEIGHT	DEPTH
<input type="checkbox"/> Single	GRADE	DEPTH
<input type="checkbox"/> Swage	THREADS	DEPTH
<input type="checkbox"/> Knockout	DEPTH	DEPTH
<input type="checkbox"/> New	<input type="checkbox"/> Used	DEPTH
CEMENT TEMPERATURE: 82	WATER QUALITY: 7.5 pH	ANNULAR VOLUME: 325 SG

LEFT PRESSURE: 250 psi	PUMP PLUG TO: 900	NO. of Centralizers: 4
PRESSURE LIMIT: 1200 psi	JOB SCHEDULED FOR TIME: 7:00 DATE: 7/31/2010	ARRIVE ON LOCATION TIME: 21:00 DATE: 7/31/2010
	RATE: PLUG TYPE: DENSITY:	RIG UP TIME: 6:00 DATE: 8/1/2010

TIME	THRO	CSG	VOLUME PUMPED INCR	CUM	RATE	PLUG TYPE	DENSITY	DESCRIPTION
11:00								Pre job safety meeting.
11:21					0.5	H2O	8.3	Test Pumps and Lines.
11:24		80	20		4	H2O	8.3	Pump H2O ahead.
11:30		60	46		4	CMT	12.5	Mix and pump lead cement (@ 12.5 ppg.
11:45		60	24		4	CMT	15	Mix and pump tail cement (@ 15 ppg.
11:53								Shut down and drop top plug.
11:54		220	30		4	H2O	8.3	Pump displacement.
12:03		900	5		2	H2O	8.3	Bump plug and check floats. (Did not hold.)
12:07		1200	1		2	H2O	8.3	Re-bump plug and check floats. (Held O.K.)
								Call Outs 10 Bbls/50 Psi, 20 Bbls/100 Psi 30 Bbls./200 Psi. Final 350 Psi. Bumped (@ 900 psi.
								Pumped 15 bbls good cement to the pit.
12:15								Post job safety meeting.

System Used	No. of Sacks	Yield (cu ft)	COMPOSITION OF SYSTEM		MIXTURE MIXED	
			BBLS	DENSITY	BBLS	DENSITY
SDC	130	2		SDC	46	12.5
Surface Set	110	1.23		Surface Cement	24	15

CIRCULATION <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	WASHED CASING DOWN <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	BREAKDOWN BEFORE PLUG BUMP PRESSURE: 200 PSI	FINAL: 250 PSI
DISPLACEMENT VOL: 35 BBLS	RETURNED TO SURFACE: 15 Bbls.	RATE: 2 BPM	

