



KANSAS CORPORATION COMMISSION 1056491
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 Brookes
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>7/24/2010</u>	<u>7/28/2010</u>	<u>8/25/2010</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-189-22740-00-00

Spot Description: _____
SW SW NE SW Sec. 34 Twp. 31 S. R. 37 East West
1368 Feet from North / South Line of Section
1373 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: Stevens
Lease Name: Newby Well #: 4-34
Field Name: _____

Producing Formation: Chase/Council Grove
Elevation: Ground: 3115 Kelly Bushing: 11
Total Depth: 3185 Plug Back Total Depth: 3120
Amount of Surface Pipe Set and Cemented at: 545 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 cmf.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content: 12000 ppm Fluid volume: 4200 bbls
Dewatering method used: Evaporated
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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 Gantor Date: 06/08/2011



1056491

Operator Name: Pioneer Natural Resources USA, Inc. Lease Name: Newby Well #: 4-34
 Sec. 34 Twp. 31 S. R. 37 East West County: Stevens

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: NEURON	<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	8.625	24	560	POZ/Class G	240	
Production	7.875	5.5	15.5	3178	POZ/Class G	470	

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 <i>(Amount and Kind of Material Used)</i>	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. 10/18/2010		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 Bbbs.	Gas Mcf	Water Bbbs. 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)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
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Well Name	Newby 4-34
Doc ID	1056491

Tops

Glorieta	1257	KB
Hollenberg	2538	KB
Herington	2557	KB
Krider	2586	KB
Towanda	2697	KB
Ft. Riley	2751	KB
A1 Lime	2884	KB
B1 Lime	2945	KB
B2 Lime	2971	KB
Base B2 Lime	2984	KB

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Perforations

Perforations			
3	Chase	Shot & Fractured	2702-2726
3	Chase	Shot & Fractured	2730-2753
3	Chase	Shot & Fractured	2762-2788
3	Chase	Shot & Fractured	2810-2812
3	Council Grove	Shot & Fractured	2854-2859
3	Council Grove	Shot & Fractured	2869-2880
3	Council Grove	Shot & Fractured	2958-2973
3	Council Grove	Shot & Fractured	2988-2994

CEMENTING TREATMENT REPORT

TREATMENT NUMBER: SQZ10023
 DATE: 7/29/2010
 STAGE: 1
 JOB TYPE: Loop Seals

WELL NAME AND NO.: Newby 4-34
 LOCATION (LEGAL): Sec 34, T11S, R17W
 FIELD: (Blancet-Strawberry)
 COUNTY: Rowles
 STATE: Kansas
 API NO.: 151F222740
 NO FOR MAN: Derrick Berry/Dill Vigil
 CEMENT SUPERVISOR: Stan Owens

RIG NAME: Pioneer Natural Resources Rig # 3
 CEMENT PUMPER: 2109
 WELL DATA:
 BIT SIZE: 7 7/8" CSG 1 Inset Size
 TOTAL DEPTH: 3175
 MUD TYPE: FOOTAGE: 3176
 GRADE: J-55
 THREAD: LT&C
 MUD DENSITY: 41
 MUD VISC: 74.4
 (Dep. Capacity)

SPECIAL INSTRUCTIONS

HEAD & FLAPS:
 [] TYPH [] DEPTH [] TYPH [] DEPTH
 [] TYPH [] DEPTH [] TYPH [] DEPTH
 [] Double Box 6 WEIGHT GRADE TAIL PIPE SIZE DEPTH
 [] Single GRADE TAIL PIPE SIZE DEPTH
 [] Swage THREADS TUBING VOLUME BBLs
 [] Knockout [] New [] Used CSG VOL BELOW TOOL BBLs
 DEPTH TOTAL ANNULAR VOLUME BBLs

LIFT PRESSURE: 1200
 PRESSURE LIMIT: 1650
 NO. of Controllers: 14
 BUMP PLUG TO: 2200
 CEMENT TEMPERATURE: 13
 WATER QUALITY: 8.5 pH
 ARRIVE ON LOCATION: TIME: 2:35 DATE: 7/29/2010
 RIG UP: TIME: 9:00 DATE: 7/29/2010
 LEFT LOCATION: TIME: DATE: 7/29/2010

TIME (OO) to (MM)	PRESSURE (PSI)	VOLUME PUMPED (BBL)	NO. of Controllers	JOB SCHEDULED FOR TIME (HH:MM)	DATE	ARRIVE ON LOCATION TIME (HH:MM)	DATE	RIG UP TIME (HH:MM)	DATE	LEFT LOCATION TIME (HH:MM)	DATE	DESCRIPTION
			14		7/29/2010	2:35	7/29/2010	9:00	7/29/2010		7/29/2010	Pre job safety meeting.
11:27	2000	0.5										Test Pumps and Lines.
11:29	90	20										Pump H2O ahead.
11:42	100	106										Mix and pump lead cement @ 12.5 ppg.
12:14	100	37										Mix and pump tail cement @ 15 ppg.
12:32												Shut down and wash pumps and lines.
12:33												Drop top plug.
12:34	220	69.6										Pump displacement.
12:56	1750	5										Bump plug and check floats. (Float did not hold.)
13:00	2000	0.5										Bump plug and check floats. (Held O.K.)
												Call Outs 25 Bbls 250 Psi. 50 Bbls 800Psi 72 Bbls 1100 Psi. Bumped @ 1500 psi.
												Well circulated cement at 55 bbls. displacement away.
												Pumped 20 bbls good cement to the pit.
13:15												Post job safety meeting.

System Used	No. of Bbls	Yield (Yield)	COMPOSITION OF SYSTEM		MIXED	
			BBLs	DENSITY	BBLs	DENSITY
	321	2	SDC		116	12.5
	179	1.21	Surface Cement		37	11

CIRCULATION: Yes No
 WASHED CASING DOWN: Yes No
 RETURNED TO SURFACE: 25 Bbls
 BREAKDOWN: PSI
 FINAL: PSI
 RATE: 2 BPM

