



KANSAS CORPORATION COMMISSION 1048200
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: Lyndal Moreno
Phone: (972) 969-3941
CONTRACTOR: License # 4824
Name: Pioneer Natural Resources USA, Inc.
Wellsite Geologist: Ruben Martinez
Purchaser: Pioneer Natural Resources USA, Inc.

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 #: _____

7/8/2010	7/14/2010	9/23/2010
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-189-22743-00-00
Spot Description: _____
SW SW NE SW Sec. 16 Twp. 31 S. R. 38 East West
1600 Feet from North / South Line of Section
1390 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Stevens
Lease Name: Lucas Well #: 4-16
Field Name: Hugoton Panama
Producing Formation: Chase Council Grove
Elevation: Ground: 3097 Kelly Bushing: 4007
Total Depth: 2950 Plug Back Total Depth: 2872
Amount of Surface Pipe Set and Cemented at: 2830 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: 24000 ppm Fluid volume: 1000 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	
<input type="checkbox"/> Letter of Confidentiality Received	Date: _____
<input type="checkbox"/> Confidential Release Date: _____	
<input checked="" type="checkbox"/> Wireline Log Received	
<input type="checkbox"/> Geologist Report Received	
<input type="checkbox"/> UIC Distribution	
ALT <input checked="" type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III	Approved by: <u>Deanna Gantbor</u> Date: <u>06/08/2011</u>



1048200

Operator Name: Pioneer Natural Resources USA, Inc. Lease Name: Lucas Well #: 4-16
 Sec. 16 Twp. 31 S. R. 38 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: GR-CCL-CBL=VDL NEUTRON OPEN HOLE	<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	603	POZ/Class G	352	
Production	7.8750	5.5	15.5	2830	POZ/Class G	417	

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 <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. _____		Producing Method: <input 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	Lucas 4-16
Doc ID	1048200

Tops

Glorieta	1179	KB
Hollenberg	2328	KB
Herington	2351	KB
Krider	2377	KB
Towanda	2493	KB
Ft. Riley	2548	KB
A1 Lime	2682	KB
B1 Lime	2739	KB
B2 Lime	2763	KB
Base B2 Lime	2776	KB

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Perforations

3	Chase	Shot & Fractured	2515-2524
3	Chase	Shot & Fractured	2526-2530
3	Chase	Shot & Fractured	2556-2588
3	Chase	Shot & Fractured	2612-2624
3	Chase	Shot & Fractured	2646-2650
3	Chase	Shot & Fractured	2656-2666
3	Council Grove	Shot & Fractured	2746-2760
3	Council Grove	Shot & Fractured	2770-2780

CEMENTING TREATMENT REPORT

TREATMENT NUMBER	DATE
50210217	7/13/2010
STAGE	JOB TYPE
1	Leak Sealing

WELL NAME AND NO.	LOCATION (LEGAL)	RIG NAME	CEMENT PUMPER
Leaves 4-16	Sec. 16, T15N, R11W	Placer Neutral Resources Rig # 3	7155
FIELD	FORMATION	WELL DATA	BOTTOM
Hypocenters		BIT SIZE	7 7/8
COUNTY	STATE	TOTAL DEPTH	2950
Stevens	Kansas	WEIGHT	13.5
	API NO.	FOOTAGE	2930
	151F912741	GRADE	1.55
		THREAD	1TAC
		MUD DENSITY	42
		MUD VISC	11.7
		DISP. CAPACITY	69.7

REJ FOREMAN: Derrick Dew/Tina Bernaby
 CEMENT SUPERVISOR: Steve Owen

HEAD & TOOLS	TYPE	DEPTH
Double Box 6		
Single		
Swage		
Knockout		
NEW	TYPE	DEPTH
USED		
TAIL PIPE	SIZE	DEPTH
TUBING VOLUME		
CSG VOL BELOW TOOL		
TOTAL		
ANNULAR VOLUME		
DEPTH		

11FT PRESSURE	PSI	NO. of Controllers	WATER QUALITY	TEMP
15.0	15.0	12	8.5	323

TIME	THG	CSG	VOLUME PUMPED	NO. of Controllers	ARRIVE ON LOCATION	RIG UP	LEFT LOCATION
0001 to 2400			DSCR CUM		TIME: 18:00 DATE: 7/12/2010	TIME: 8:30 DATE: 7/13/2010	TIME: DATE: 7/13/2010
12:00							Pre job safety meeting.
12:27	2000		0.5	0.5	H2O	8.3	Test Pumps and Lines.
12:30	50		20	3	H2O	8.3	Pump H2O ahead.
12:37			110	3	CMT	12.5	Mix and pump lead cement @ 12.5 ppg.
13:13	50		45	3	CMT	15	Mix and pump tail cement @ 15 ppg.
13:28							Shut down and wash pumps and lines.
13:30							Drop top plug.
13:35			68.7	3	KCL	8.3	Pump displacement.
13:56	1500			2	KCL	8.3	Bump plug and check floats. (Did not hold.)
14:00	2000			2	KCL	8.3	Pump again to close floats. (Held O.K.)
							Call Outs 20 Bbls 200 Psi. 50 Bbls 540 Psi. 68 Bbls Final 800 Psi. Bumped @ 1500 psi.
							Well circulated cement at 40 bbls KCL displacement away.
							Pumped 25 bbls good cement to the pit.
14:30							Post job safety meeting.

System Used	COMPOSITION OF SYSTEM		MUD MIXED	
	WATER	CEMENT	BBLs	DENSITY
	770	2.06	110	12.5
	200	1.25	45	15

CIRCULATION	WASHED CASING DOWN	BREAKDOWN	PSI	FINAL	PSI
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	BEFORE PLUG BUMP	800	770	PSI
DISPLACEMENT VOL.	RETURNED TO SURFACE	PRESSURE	RATE		
69.7 BBLs	21 BBLs		2 BPM		

CEMENTING TREATMENT REPORT

TREATMENT NUMBER	80272016	DATE	7/7/2010
STAGE	1	JOB TYPE	Service

WELL NAME AND NO.	Loc 4-14	LOCATION (LEGAL)	Sec 1A, T15N, R37W	WIG NAME	Phoenix Normal Resources Rig # 3	CEMENT PUMPER	235
COUNTY	Cherokee	STATE	Karoo	API NO.	1576721341		

RIJ FOREMAN	Derrick Berry/Tom Borchky	MUD DENSITY	43	TOTAL	34.7
CEMENT SUPERVISOR	Steve Owens	MUD VISC	Diag. Capacity	34.7	

SPECIAL INSTRUCTIONS		TYPE		TYPE	
		DEPTH		DEPTH	

HEAD & PEGS		TYPE		TYPE	
		DEPTH		DEPTH	

LEFT PRESSURE	210	PSI		CEMENT TEMPERATURE	
PRESSURE LIMIT	1000	PSI		WATER QUALITY	8.0

NO. of Controllers	4	BUMP PLUG TO	900	ARRIVE ON LOCATION	TIME: 15:00 DATE: 6/22/10
				DEPT UP	TIME: 11:00 DATE: 6/22/10

TIME	PRESSURE	VOLUME PUMPED	NO. of Controllers	CEMENT TYPE	DEPTH	REMARKS
00:00 to 24:00	TDG	INCR	CLM	TIME: 12:33 DATE: 7/7/10	RATE	FIELD TYPE: DENSITY
20:30						Pre job safety meeting.
20:45			0.5	H2O	8.3	Test Pumps and Lines.
20:55	80	20	4	H2O	8.3	Pump H2O ahead.
21:01	60	86	4	CMT	12.5	Mix and pump lead cement @ 12.5 ppg.
21:32	60	33	4	CMT	15	Mix and pump tail cement @ 15 ppg.
21:45						Shut down and drop top plug.
21:46	220	14.6	4	H2O	8.3	Pump displacement.
21:55	900		2	H2O		Bump plug and check floats. (Held OK)
						Call Outs 10 Bbls 60 Psi. 20 Bbls 120 Psi Final 220 Psi. Bumped @ 900 psi.
						Well circulated cement at 5 bbls lead cement away.
						Pumped 45 bbls good cement to the pit.
22:30						Post job safety meeting.

System Used	Name	Yield	COMPOSITION OF SYSTEM		MIXED	
			SDC	Surface Cement	BBLs	DENSITY
	230	2.06			86	12.5
	150	1.25			31	15

CIRCULATION	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	WASHED CASING DOWN	<input type="checkbox"/> Yes <input type="checkbox"/> No	BREAKDOWN BEFORE PLUG BUMP	PSI	FINAL	900	PSI
DISPLACEMENT VOL.	34.7	BBLs		RETURNED TO SURFACE	43 LBS.	RATE	2	BPM