

STATE OF KANSAS
STATE CORPORATION COMMISSION
130 S. Market - Room 2078
Wichita, Kansas 67202

WELL PLUGGING RECORD
K.A.R.-82-3-117

API NUMBER 15-175-216790000

LEASE NAME Clark

TYPE OR PRINT
NOTICE: Fill out completely
and return to GORS. Div.
office within 30 days

WELL NUMBER 2-14

1250 Ft. from S Section Line

1390 Ft. from E Section Line

LEASE OPERATOR Pioneer Natural Resources USA, Inc.

SEC. 14 TWP. 31S RGE. 32 (E) or (W)

ADDRESS 14000 Quail Springs Pkwy. #5000 Oklahoma City, OK 73134-2600

COUNTY Seward

PHONE # (405) 749-1780 OPERATORS LICENSE NO. 32193

Date Well Completed _____

Character of Well Gas

Plugging Commenced 11/17/97

(Oil, Gas, O&A, SWD, Input, Water Supply Well)

Plugging Completed 11/19/97

The plugging proposal was approved on 11/17/97 (date)

by Steve Bennett (KCC District Agent's Name)

is ACO-1 filed? Yes If not, is well log attached? _____

RECEIVED
STATE CORPORATION COMMISSION

Producing Formation Dry Hole Depth to Top _____ Bottom 12-5-97 T.D. 5850'

DEC 05 1997

Show depth and thickness of all water, oil and gas formations.

CONSERVATION DIVISION
CASING RECORD

OIL, GAS OR WATER RECORDS

Formation	Content	From	To	Size	Put in	Pulled out
				8-5/8	1831'	0
						0

Describe in detail the manner in which the well was plugged, indicating where the mud fluid was placed and the method or methods used in introducing it into the hole. If cement or other plug were used, state the character of same and depth placed, from ___ feet to ___ feet each set

#1 plug cemented w/25 sxs 60/40 Poz + 6% gel from 3000' up to 2635'. #2 plug @ 1860' up to 1623', cemented w/50 sxs 60/40 Poz + 6% gel. #3 plug @ 720' up to 593', cemented w/25 sxs 60/40 Poz + 6% gel. #4 top plug @ 0-40', cemented w/10 sxs 60/40 Poz + 6% gel. Cut off 8-5/8" casing 3' below GI & weld on plate.

Name of Plugging Contractor Plugged by Pioneer Natural Resources Personnel License No. _____

Address _____

NAME OF PARTY RESPONSIBLE FOR PLUGGING FEES: Pioneer Natural Resources USA, Inc.

STATE OF OKLAHOMA COUNTY OF OKLAHOMA, ss.

Tommy Royal (Employee of Operator) or (Operator) of above-described well, and matters herein contained and the log of the above-described well as filed that the same are true and correct, so help me God.

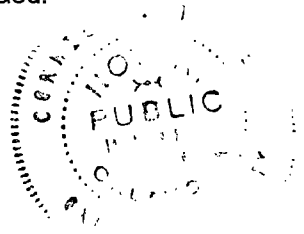
(Signature) Tommy Royal

(Address) 14000 Quail Spgs. Pkwy. Okla. City, OK 73134

SUBSCRIBED AND SWORN TO before me this 1st day of December, 19 97

Connie B. Suran
Notary Public

My Commission Expires: Sept 2, 2000



USE ONLY ONE SIDE OF EACH FORM