

FORM 17

Rev 6/99

State of Colorado Oil and Gas Conservation Commission

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DE ET OE ES Document Number: 1629774

BRADENHEAD TEST REPORT

Step 1. Record all tubing and casing pressures as found. Step 2. Sample now. If intermediate or surface casing pressure > 25 psi. In sensitive areas, 1 psi. Step 3. Conduct Bradenhead test. Step 4. Conduct intermediate casing test. Step 5. Send report to BLM within 3 days and to OGCC within 10 days. Include wellbore diagram if not previously submitted or if wellbore configuration has changed since prior program. Attach gas and liquid analyses if sampled.

1. OGCC Operator Number: 10084 3. BLM Lease No: 2. Name of Operator: PIONEER NATURAL RESOURCES USA INC 4. API Number: 05-071-07259-00 5. Multiple completion? Yes No 6. Well Name: LOS NINOS Number: 14-21 7. Location (QtrQtr, Sec, Twp, Rng, Meridian): SWSW,21,33S,65W,6 8. County LAS ANIMAS 9. Field Name: PURGATOIRE RIVER 10. Minerals: Fee State Federal Indian

11. Date of Test: 07/20/2009 12. Well Status: Flowing Shut In Gas Lift Pumping Injection Clock/Intermitter Plunger Lift 13. Number of Casing Strings: Two Three Liner?

14. EXISTING PRESSURES

Record all pressures as found Tubing: 0 Tubing: Prod Csg 8 Intermediate Surf. Csg Fm: VRMJ Fm: Csg: 0

BRADENHEAD TEST

Bradenhead test data table with columns: Elapsed Time (Min:Sec), Fm: Tubing, Fm: Tubing, Prod Csg PSIG, Intermedia Csg PSIG, Bradenhead Flow. Includes instructions and checkboxes for buried valve, confirmed open, and sample taken.

INTERMEDIATE CASING TEST

Intermediate casing test data table with columns: Elapsed Time (Min:Sec), Fm: Tubing, Fm: Tubing, Prod Csg PSIG, Intermedia Csg PSIG, Bradenhead Flow. Includes instructions and checkboxes for buried valve, confirmed open, and sample taken.

Comments: Not pumping.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Test Performed By: _____ Title: _____ Phone: (719) 846-7898

Signed: NICHOLAS L. Title: FLOORHAND Date: 10/19/2009

Witnessed By: _____ Title: Floorhand Agency: _____