

FORM 5A

Rev 06/12

State of Colorado Oil and Gas Conservation Commission

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Table with columns DE, ET, OE, ES

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COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 10084
2. Name of Operator: PIONEER NATURAL RESOURCES USA INC
3. Address: 1401 17TH ST STE 1200 City: DENVER State: CO Zip: 80202
4. Contact Name: Judy Glinisty Phone: (303) 675-2658 Fax: (303) 294-1275

5. API Number 05-071-08567-00
6. County: LAS ANIMAS
7. Well Name: Smith Well Number: 22-18R
8. Location: QtrQtr: SENW Section: 18 Township: 33S Range: 67W Meridian: 6
9. Field Name: PURGATOIRE RIVER Field Code: 70830

Completed Interval

FORMATION: RATON COAL Status: PRODUCING Treatment Type: FRACTURE STIMULATION

Treatment Date: 10/22/2013 End Date: 10/22/2013 Date of First Production this formation: 10/27/2013

Perforations Top: 1030 Bottom: 1157 No. Holes: 52 Hole size: 0.48

Provide a brief summary of the formation treatment: Open Hole: []

Fraced intervals 1030' - 1034', 1128' - 1134', 1154' - 1157'. 16/30 - 104,713# - no nitrogen - no acid

This formation is commingled with another formation: [] Yes [X] No

Total fluid used in treatment (bbl): 521 Max pressure during treatment (psi): 3650

Total gas used in treatment (mcf): 0 Fluid density at initial fracture (lbs/gal): 8.35

Type of gas used in treatment: Min frac gradient (psi/ft): 0.43

Total acid used in treatment (bbl): 0 Number of staged intervals: 3

Recycled water used in treatment (bbl): 521 Flowback volume recovered (bbl): 0

Fresh water used in treatment (bbl): 0 Disposition method for flowback: DISPOSAL

Total proppant used (lbs): 131047 Rule 805 green completion techniques were utilized: [X]

Reason why green completion not utilized:

Fracture stimulations must be reported on FracFocus.org

Test Information:

Date: 10/30/2013 Hours: 24 Bbl oil: 0 Mcf Gas: 80 Bbl H2O: 14

Calculated 24 hour rate: Bbl oil: 0 Mcf Gas: 80 Bbl H2O: 14 GOR: 0

Test Method: Pumping Casing PSI: 19 Tubing PSI: 0 Choke Size: 64/64

Gas Disposition: SOLD Gas Type: COAL GAS Btu Gas: 1005 API Gravity Oil: 0

Tubing Size: 2 + 7/8 Tubing Setting Depth: 1313 Tbg setting date: 10/25/2013 Packer Depth: 0

Reason for Non-Production:

Date formation Abandoned: Squeeze: [] Yes [] No If yes, number of sacks cmt

** Bridge Plug Depth: ** Sacks cement on top: ** Wireline and Cement Job Summary must be attached.

Comment:

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

Signed: _____ Print Name: Judy Glinisty

Title: Lead Engineering Tech Date: 11/27/2013 Email: Judy.Glinisty@pxd.com
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Attachment Check List

Att Doc Num **Name**

400519936	FORM 5A SUBMITTED
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Total Attach: 1 Files

General Comments

User Group **Comment** **Comment Date**

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