

Land Operations Only

Return To: Kimberly Burke / Michele Bennett 119499
 EFS Midstream LLC
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 Irving, Texas 75039
 972-969-4047 Fax 972-969-3548

**EFS Midstream LLC
 Certificate Of Insurance**

FOR INFORMATION PURPOSES ONLY. This is to certify to PIONEER NATURAL RESOURCES / EFS MIDSTREAM LLC, and any direct or indirect subsidiaries, hereafter referred to as PIONEER, that policies described below have been issued to the insured by the undersigned and are in full force and effect at this time.

Name and Address of the Insured	Insurance Carriers
	TEXAS DEPT. OF INSURANCE AUSTIN, TEXAS APPROVED APR 5 2012
	Company A _____
	Company B _____
	Company C _____
	Company D _____
	Company E _____
	Company F _____

INSURANCE POLICIES IN FORCE

Coverage	Company Letter	Policy Number	Policy Period	Limits of Liability
A. Workers' Compensation Employer's Liability				Statutory \$ _____ each accident \$ _____ Disease-each employee \$ _____ Disease-policy limit
B. Commercial (Occurrence) or Commercial (Claims Made) General Liability Bodily Injury Property Damage Combined Single Limit Products/Completed Operations Personal Injury				\$ _____ deductible \$ _____ each occurrence \$ _____ each occurrence \$ _____ each occurrence, (if applicable) \$ _____ aggregate \$ _____ aggregate
C. Commercial Auto Liability Combined Single Limit Bodily Injury Property Damage				\$ _____ each occurrence, (if applicable) \$ _____ each occurrence \$ _____ each occurrence
D. Aircraft Liability				\$ _____ each person \$ _____ aggregate
E. Excess Liability (if other than umbrella, define below)				\$ _____ each occurrence \$ _____ aggregate
F. Other				\$ _____

Location of Insured operations: _____

Describe type of operations insured: _____

Does this policy (ies) provide a notice to EFS MIDSTREAM LLC if the insurer cancels or nonrenews a policy or material change is made to the policy? () Yes () No If so, how many days notice? _____

Name, Address, Phone and Fax Number of Agency: _____

Date Issued: _____

Authorized Representative

Phone _____ Fax _____

EFS Midstream LLC
Insurance Questionnaire

119499

TEXAS DEPT. OF INSURANCE
AUSTIN, TEXAS
APPROVED
APR - 5 2012

Named Insured: _____

General Provisions (Applicable to ALL POLICIES certified)

Do all insurance carriers have a minimum A.M. Best rating of A-, VI?..... () Yes () No

A. Workers' Compensation and Employer's Liability

As defined in the policy, does this policy provide:

- a. "Waiver of Subrogation" endorsement? () Yes () No
b. Alternate Employers Endorsement?..... () Yes () No

The "Waiver of Subrogation" endorsement must be in favor of PIONEER NATURAL RESOURCES COMPANY / EFS MIDSTREAM LLC, and any of their direct or indirect subsidiaries.

B. General Liability

As defined in the policy, does the policy provide:

- a. "Waiver of Subrogation" endorsement? () Yes () No
b. "Additional Insured" endorsement? () Yes () No
c. Premises and Operations Coverage? () Yes () No
d. Products and Completed Operations? () Yes () No
e. Sudden & Accidental Pollution Liability? () Yes () No

Are the following excluded from the policy;

- a. Explosion? () Yes () No
b. Blowout? () Yes () No
c. Collapse? () Yes () No
d. Underground Property? () Yes () No

Please provide territories covered by policy _____

The "Waiver of Subrogation" and "Additional Insured" endorsements must be in favor of PIONEER NATURAL RESOURCES COMPANY / EFS MIDSTREAM LLC, and any of their direct or indirect subsidiaries.

C. Automobile Liability

1. As defined in the policy, does the policy provide:

- a. "Waiver of Subrogation" endorsement? () Yes () No
b. "Additional Insured" endorsement? () Yes () No

2. Does the policy include:

- a. All Owned Automobiles? () Yes () No
b. Non-Owned Automobiles? () Yes () No
c. Hired Automobiles? () Yes () No

3. If applicable, does the Commercial Auto Liability Policy include form MCS-90 Motor Carrier Policies of Insurance Endorsement with minimum limits of \$1,000,000 bodily injury and property damage per occurrence? () Yes () No

The "Waiver of Subrogation" and "Additional Insured" endorsements must be in favor of PIONEER NATURAL RESOURCES COMPANY / EFS MIDSTREAM LLC, and any of their direct or indirect subsidiaries.

EFS Midstream LLC
Insurance Questionnaire

TEXAS DEPT. OF INSURANCE
AUSTIN, TEXAS
APPROVED
APR - 5 2012

119 499

Named Insured: _____

D. Aircraft Liability (if applicable)

- 1. As defined in the policy, does the policy provide:
 - a. "Waiver of Subrogation" endorsement? () Yes () No
 - b. "Additional Insured" endorsement? () Yes () No
- 2. Does the policy include:
 - a. All Owned Aircraft? () Yes () No
 - b. Non-Owned Aircraft? () Yes () No
 - c. All Owned Helicopters? () Yes () No
 - d. Non-Owned Helicopters? () Yes () No

The "Waiver of Subrogation" and "Additional Insured" endorsements must be in favor of PIONEER NATURAL RESOURCES COMPANY / EFS MIDSTREAM LLC, and any of their direct or indirect subsidiaries.

E. Excess Liability Triggered by Occurrence _____ Claims Made _____ (Check One)

- Does this policy contain:
- a. "Waiver of Subrogation" endorsement? () Yes () No
 - b. "Additional Insured" endorsement? () Yes () No

- 1. Does the policy follow form:
 - a. Employers Liability? () Yes () No
 - b. General Liability policy as certified? () Yes () No
 - c. Automobile Liability as certified? () Yes () No
 - d. Aircraft Liability as certified? () Yes () No

The "Waiver of Subrogation" and "Additional Insured" endorsements must be in favor of PIONEER NATURAL RESOURCES COMPANY / EFS MIDSTREAM LLC, and any of their direct or indirect subsidiaries.