Edgar Filing: PIONEER NATURAL RESOURCES CO - Form 4

PIONEER NATURAL RESOURCES CO

Form 4

February 23, 2016

FΟ	R	M	4
----	---	---	---

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box

January 31, Expires: 2005

OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Estimated average burden hours per response... 0.5

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

Common

Common

02/22/2016

Stock

Stock

(Print or Type Responses)

1. Name and Address of Reporting Person * SHEFFIELD KENNETH H JR			2. Issuer Name and Ticker or Trading Symbol PIONEER NATURAL RESOURCES CO [PXD]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
	(Last)	(First) (Middle)	3. Date of (Month/D) 02/22/2	•	ransaction		Director Officer (give below)	titleOthe	Owner r (specify
	SUITE 200	CONTOR BEVE	·• ,	0212212	010			EVP, STA	T, WAT, Corp.	Eng.
		(Street)		4. If Ame	ndment, Da	ate Original		6. Individual or Jo	int/Group Filin	g(Check
			Filed(Month/Day/Year)			Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting				
	IRVING, T	X 75039						Person	iore man One Rej	porting
	(City)	(State)	(Zip)	Tabl	e I - Non-D	Derivative Se	ecurities Acqu	uired, Disposed of	, or Beneficiall	y Owned
	1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution any		3. Transactio Code (Instr. 8)	4. Securities on(A) or Disposition (Instr. 3, 4 a	osed of (D)	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						,	,	Transaction(s)		

Code V Amount (D)

1,521

or

Price

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

F

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

(Instr. 3 and 4)

Ι

D

200

22,715

Family

Trust

Edgar Filing: PIONEER NATURAL RESOURCES CO - Form 4

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Title		8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secur
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Excicisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
SHEFFIELD KENNETH H JR 5205 N. O'CONNOR BLVD., SUITE 200 IRVING, TX 75039			EVP, STAT, WAT, Corp. Eng.				

Signatures

Thomas J. Murphy, Attorney-in-Fact For Kenneth H. Sheffield, Jr.

02/23/2016

Relationshins

**Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2