



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1069236

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

3rd well

TICKET NUMBER 52771
FIELD TICKET REF # 45221
LOCATION Thayer
FOREMAN Gaylord

**TREATMENT REPORT
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-1-11	4759	Chlorine # 8	22	25	17	WO

CUSTOMER
Legends Oil & Gas

MAILING ADDRESS

CITY STATE ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
524	Trapp		
478	Morris		
582	Wes		
488/7102	Brian		

WELL DATA

CASING SIZE <i>2 1/2</i>	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
<i>792.5-802.5 (31) Saturated</i>	

TYPE OF TREATMENT

Acid Spot / Sand Frac

CHEMICALS

<i>City Water</i>	<i>75 15% HCl Acid</i>
<i>KIC Stabilizer</i>	<i>Inhibitor</i>
<i>20% Gel/Breaker</i>	<i>Stimul</i>
<i>Bioocide</i>	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
<i>Pad</i>	<i>15</i>	<i>160</i>				BREAKDOWN <i>1600</i>
<i>20/10</i>		<i>160</i>		<i>300</i>		START PRESSURE
<i>12/10</i>			<i>1700</i>		END PRESSURE	
<i>change 10 balls</i>						BALL OFF PRESS
<i>12/10 10 balls</i>			<i>500</i>			ROCK SALT PRESS
<i>12/10</i>			<i>1500</i>			ISIP <i>450</i>
<i>Flush over</i>	<i>10</i>					5 MIN
<i>Release balls</i>						10 MIN
<i>Overhaul</i>	<i>5</i>					15 MIN
						MIN RATE
						MAX RATE
<i>Totals</i>	<i>132</i>			<i>41000</i>		DISPLACEMENT

REMARKS: *Spot acid to perforation breakdown and stage*

AUTHORIZATION _____ TITLE _____ DATE _____

Terms and Conditions are printed on reverse side.

Water
6-28-11
6-29-11
6-30-11

OWENS PETROLEUM SERVICES, LLC
DRILLER'S LOG

Operator: Legend Oil Marshall Goldberg
Lease / Well #: Orth Billispic #8 22-25-17
API #: 15-207-27875-0000

	Date		Date		Date		Date
Spud/Surface	6-28-11	Drilled to TD	6-30-11	Logged		1" / pump	
Set Surface	6-28-11	Run/Casing	6-30-11	Perforated		Lead Line/Elec	
Spud/Casing	6-29-11	Cemented LS		Frac		Closed Pit	

Purpose	Size Drilled	Size Pipe	Weight #/ft	Setting Depth	Cement	# Sacks	Additives
Surface:	1 1/2"	7"	new	40	Shoreline	20	-
Casing:	5 1/4"	2 3/8"	used	835			
Frac:							

Driller's TD:	847 ft	Seat Nipple:	770 ft	Pipe TD:	835 ft	Fluid Volume:	bbbs
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Surface Bit and Subs: 3.70'
Kelly: Top of Groove to Square: 22.60'
Footage Above Ground Level: _____ / _____ Total

FOOTAGE: FORMATION:

Bit and Sub	FOOTAGE	FORMATION
	1.9	0-1 top 1-13 lime 13-40 shale
1st Collar	19.9	
2nd Collar	20.0	41.8
Joints 20.7' /	62.5	S
2	83.2	S
2	103.9	S
2	124.6	L130 -
2	145.3	L-156 L162 -
2	166.0	L-170 L172 -
2	186.7	L
2	207.4	L-210 L220
2	228.1	L-222 L235
2	248.8	L
2	269.5	S ALL SACKS L 286 -
2	290.2	L-290
2	310.9	L
2	331.6	L
2	352.3	L-360 blk shale L-362-366 L368
2	373.0	L
2	393.7	L-397 L399
2	414.4	L-407 shale
2	435.1	S
2	455.8	S
2	476.5	S
2	497.2	S
2	517.9	S
2	538.6	L548-551

OPERATOR:

LEASE/WELL#

FOOTAGE:

FORMATION:

FOOTAGE:	FORMATION:
26 559.3	L 574-576 L 577-579
28 580.0	Shaly lime
27 600.7	L 604-609 L 613-616 soft lime
28 621.4	soft lime L 632
28 642.1	L 672-677
28 662.8	L 672-677
27 683.5	L 683-
22 704.2	L-705 L 710-713
25 724.9	L L 737-741
6-30-11 24 745.6	L 745-753 slight cor
35 766.3	776-778 shale 779-779 cap 779-779 shale 785-787 good
36 787.0	777-779 shale 779-781 shale 781-785 shale
37 807.7	cap 788-788 788-788 good shale 787-788 good
38 828.4	789-801 geth shale 801-803 shale 803-805 shale
39 849.1	
40 869.8	
41 890.5	
42 911.2	
43 931.9	
44 952.6	
45 973.3	
46 994.0	#8 SIN 770
47 1014.7	
48 1035.4	
49 1056.1	
50 1076.8	RTD 847
51 1097.5	
52 1118.2	pipe TD 835
53 1138.9	
54 1159.6	
55 1180.3	
56 1201.0	
57 1221.7	
58 1242.4	
59 1263.1	
60 1283.8	
61 1304.5	
62 1325.2	
63 1345.9	
64 1366.6	
65 1387.3	
66 1408.0	
67 1428.7	
68 1449.4	
69 1470.1	
70 1490.8	

Owens Petroleum Services, LLC
 Scott and Jody Owens
 1274 202nd Rd
 Yates Center, KS 66783

(620) 625-3607

Invoice

Bill To:
Legend Oil & Gas Ltd. 1420 5th Avenue, Suite 2200 Seattle, WA 98101

LEASE	WELL #	DATE	INVOICE#
Orth Gillespie	8	6/30/2011	063011,OGil

DETAIL	HRS/GALS/QTY	RATE	AMOUNT
*DOZER Dug drill pit		600.00	600.00
*TANK TRUCK Filled pit with water		225.00	225.00
*SET SURFACE AND CEMENT 20 bags of Monarch cement		500.00	500.00
*DRILLING RIG Rig TD - 847' Pipe TD - S/N -	847.0	7.00	5,929.00
Total:			\$7,254.00

Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date	Invoice #
6/30/2011	45607

Cement Treatment Report

Legend Oil & Gas Ltd.
4500, 601 Union Street
Seattle, WA 98101

(x) Landed Plug on Bottom at 800 PSI
 () Shut in Pressure
 (x) Good Cement Returns
 () Topped off well with _____ sacks
 (x) Shut In

TYPE OF TREATMENT: Production Casing
 HOLE SIZE: 5 5/8"
 TOTAL DEPTH: 847

Well Name	Terms	Due Date		
	Net 15 days	6/30/2011		
Service or Product	Qty	Per Foot Pricing/Unit Pricing	Amount	
Run and cement 2 7/8"	835	3.00	2,505.00	
Sales Tax		7.30%	0.00	

Orth-Gillespie #8
 Woodson County
 Section: 22
 Township: 25
 Range: 17

Hooked onto 2 7/8" casing. Established circulation with 5.5 barrels of water, 2 GEL, METSO, COTTONSEED ahead, blended 93 sacks of OWC, dropped rubber plug, and pumped 4.9 barrels of water

Total	\$2,505.00
Payments/Credits	\$0.00
Balance Due	\$2,505.00



MIDWEST SURVEYS

LOGGING • PERFORATING • CONSULTING • M.I.T. SERVICES

P.O. Box 68 • Osawatomie, KS 66064
Phone 913-755-2128 • Fax 913-755-6533

Perforation Record

Company: Legends Oil & Gas, LTD
Lease/Field: Orth Gillespie Lease
Well: # 8
County, State: Woodson County, Kansas
Service Order #: 24164
Purchase Order #: N/A
Date: 7/8/2011
Perforated @: 792.5 to 802.5
Type of Jet, Gun or Charge: 2" DML RTG 120 Degree Phase
Number of Jets, Guns or Charges: Thirty One (31)
Casing Size: 2 7/8"