



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: _____



1077948

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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**OWENS PETROLEUM SERVICES, LLC
DRILLER'S LOG**

Operator: Legend - Marshall D

Lease / Well #: Orth - Gillespie 10

API #: 15-207-28008-000 22-25-17 Wood

	Date		Date		Date		Date
Spud/Surface	<u>12-18-11</u>	Drilled to TD	<u>12-21-11</u>	Logged		1" / pump	
Set Surface	<u>12-18-11</u>	Run/Casing	<u>12-21-11</u>	Perforated		Lead Line/Elec	
Spud/Casing	<u>12-19-11</u>	Cemented LS		Frac		Closed Pit	

Purpose	Size Drilled	Size Pipe	Weight #/ft	Setting Depth	Cement	# Sacks	Additives
Surface:	<u>11 5/8</u>	<u>7"</u>	<u>new</u>	<u>22</u>	<u>monarch</u>	<u>11</u>	<u>-</u>
Casing:	<u>5 1/2</u>						
Frac:							

Driller's TD: <u>868</u> ft	Seat Nipple: <u>797</u> ft	Pipe TD: <u>860</u> ft	Fluid Volume: _____ bbls
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Surface Bit and Subs: 3.70'
 Kelly: Top of Groove to Square: 22.60'
 Footage Above Ground Level: 1 Total

FOOTAGE: FORMATION:

Bit and Sub	FOOTAGE	FORMATION
	<u>1.9</u>	<u>0-18' lime 18-22 shale</u>
1st Collar	<u>19.9</u>	
2nd Collar	<u>20.0</u>	<u>41.8</u>
Joints 20.7'	<u>62.5</u>	<u>S</u>
2	<u>83.2</u>	<u>S Rained out</u>
<u>12-20-11</u> 3	<u>103.9</u>	<u>S</u>
4	<u>124.6</u>	<u>L 130'</u>
5	<u>145.3</u>	<u>-144 L146 -</u>
6	<u>166.0</u>	<u>L</u>
7	<u>186.7</u>	<u>L</u>
8	<u>207.4</u>	<u>L</u>
9	<u>228.1</u>	<u>L</u>
10	<u>248.8</u>	<u>L-250 L258</u>
11	<u>269.5</u>	<u>S</u>
12	<u>290.2</u>	<u>L 294</u>
13	<u>310.9</u>	<u>L</u>
14	<u>331.6</u>	<u>L</u>
15	<u>352.3</u>	<u>L</u>
16	<u>373.0</u>	<u>L</u>
17	<u>393.7</u>	<u>L</u>
18	<u>414.4</u>	<u>L-419 L420</u>
19	<u>435.1</u>	<u>L-434 Shale</u>
20	<u>455.8</u>	<u>S</u>
21	<u>476.5</u>	<u>S</u>
22	<u>497.2</u>	<u>S</u>
23	<u>517.9</u>	<u>S</u>
24	<u>538.6</u>	<u>S</u>

OPERATOR:

LEASE/WELL#

Orth - Gillespie #10

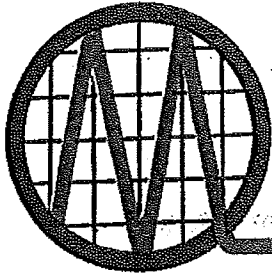
FOOTAGE:

FORMATION:

	FOOTAGE:	FORMATION:	
26	559.3	L559-566	
28	580.0	L583-587 L588-596	
27	600.7	L609-617	
28	621.4	S	
29	642.1	L642-647	
30	662.8	L667-670 L680-	
31	683.5	- 685 L690	
12-21-4 32	704.2	L707-711 L714-715 L717-720	
38	724.9	S L744	
34	745.6	-749 L752-760	756 odor in lime
35	766.3	L769-772	
36	787.0	cap 800-803	
37	807.7		775 777 shale - odor
38	828.4		777 779 some sand odor - show
39	849.1		774-780 some sand - odor, show
40	869.8		781-783 sand & shale good odor some show
41	890.5		783-785 shale some sand
42	911.2		785-787 shale some sand
43	931.9		787-790 sandy shale
44	952.6		
45	973.3		803-805 good sand good odor show
46	994.0		805-807 good sand good show
47	1014.7		807-809 good
48	1035.4		809-811 good odor mostly shale
49	1056.1		811-813 shale
50	1076.8		
51	1097.5		
52	1118.2		
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		

THIS WELL #10

868
RTP
5/1/97



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: # 10

County, State: Woodson County, Kansas

Service Order #: 25440

Purchase Order #: N/A

Date: 1/11/2012

Perforated @: 803.0 to 813.0

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"



Invoice

MIDWEST SURVEYS

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

P. O. Box 68 • Osawatomie, KS 66064

Phone 913-755-2128

Date	Invoice #
1/11/2012	25440

Bill To
LEGENDS OIL & GAS, LTD 4500 601 UNION ST SEATTLE, WA 98101

Ship To
ORTH-GILLESPIE #10 WOODSON CO, KS

Customer Order No.	Terms
JERRY SCHEIBMEIR	JERRY SCH...

Qty	Description	Amount
1	GAMMA RAY / NEUTRON / CCL	475.00
31	2" DML RTG 120° PHASE THREE (3) PERFORATIONS PER FOOT MINIMUM CHARGE -- TEN (10) PERFORATIONS TWENTY ONE (21) ADDITIONAL PERFORATIONS @ \$20.00 EA	725.00 420.00
	PERFORATED AT: 803.0 TO 813.0	
	<i>mp</i> <i>1-27-12</i> <i>AFE LOG L-10-2011</i>	

Net Due Upon Receipt	Late Charge of 1 - 1/2 % per Month on Accounts over 30 Days	Total	\$1,620.00
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Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date	Invoice #
12/30/2011	46464

Cement Treatment Report

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

(x) Landed Plug on Bottom at 700 PSI
() Shut in Pressure 700
(x) Good Cement Returns
() Topped off well with _____ sacks
(x) Set Float Shoe

TYPE OF TREATMENT: Production Casing
HOLE SIZE: 5 5/8"
TOTAL DEPTH: 868

Well Name	Terms	Due Date		
	Net 15 days	12/30/2011	12-22-11	
Service or Product	Qty	Per Foot Pricing/Unit Pricing	Amount	
Run and cement 2 7/8"	860	3.00	2,580.00	
Sales Tax		7.30%	0.00	

Orth-Gillespie #10
Woodson County
Section: 22
Township: 25
Range: 17

LOG
A FE 10-2011
mf
12-19-12
9320-414
0-6 #10

Hooked onto 2 7/8" casing. Established circulation with 5.5 barrels of water, 2 GEL, METSO. COTTONSEED ahead. blended 86 sacks of 2% cement. dropped 2 rubber plugs. and pumped 5 barrels of water

Total	\$2,580.00
Payments/Credits	\$0.00
Balance Due	\$2,580.00

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	10	12/22/2011	122211,OGil

DETAIL	HRS/GALS/QTY	RATE	AMOUNT
*DOZER Dug drill pit and cleared trees		600.00	600.00
*TANK TRUCK Filled pit with water		200.00	200.00
*SET SURFACE AND CEMENT 11 bags of Portland cement		500.00	500.00
*DRILLING RIG Rig TD - 868' Pipe TD - 860' S/N - 797'	868.0	7.00	6,076.00
Orth Gillespie #10 and Massoth Ellis #6 *TANK TRUCK Supplied water for cement company		200.00	200.00
*DOZER Pulled cement company in and back out.		240.00	240.00
Total:			\$7,816.00



CONSOLIDATED
Oil Well Services, LLC

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

3RD well

TICKET NUMBER 56410
FIELD TICKET REF # 47257
LOCATION Thayer
FOREMAN Brett Bush

TREATMENT REPORT
FRAC & ACID

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-13-12		Beth-Gillespie # 10	22	255	17E	WO
CUSTOMER			TRUCK #			
Legends Oil & Gas			DRIVER			
MAILING ADDRESS			TRUCK #			
CITY			DRIVER			
STATE			TRUCK #			
ZIP CODE			DRIVER			
			TRUCK #			
			DRIVER			
			TRUCK #			
			DRIVER			
			TRUCK #			
			DRIVER			

WELL DATA

CASING SIZE	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE <u>2 1/2</u>	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
<u>803-13 (31)</u>	<u>Squirrel</u>

TYPE OF TREATMENT

Acid job - frac

CHEMICALS

KALSUB - Biocide + Breaker
Acid - Inhibitor - Stim Dil

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
<u>PAID</u>	<u>20</u>	<u>20</u>			<u>1200</u>	BREAKDOWN <u>1800</u>
<u>20-40</u>		<u>20</u>	<u>15-110</u>	<u>1000</u>		START PRESSURE
<u>12-20</u>			<u>110</u>			END PRESSURE
<u>12-20</u>			<u>2.0</u>	<u>1400</u>	<u>1100</u>	BALL OFF PRESS
<u>Ballsealers (10) + (5)</u>		<u>20-12</u>	<u>8-15</u>			ROCK SALT PRESS
<u>12-20</u>		<u>12</u>	<u>110</u>		<u>1500</u>	ISIP <u>400</u>
<u>12-20</u>		<u>12</u>	<u>2.0</u>	<u>1,000</u>		5 MIN
<u>Ballsealers (5)</u>		<u>16</u>	<u>8-15</u>		<u>1100-1900</u>	10 MIN
<u>12-20</u>		<u>16-20</u>	<u>110</u>			15 MIN
<u>12-20</u>		<u>20</u>	<u>2.0</u>	<u>1,500</u>		MIN RATE
<u>FLUSH CASING</u>	<u>5</u>	<u>20</u>			<u>1100</u>	MAX RATE
<u>Release balls to T.D.</u>			<u>TOTAL</u>	<u>4,000</u>		DISPLACEMENT <u>4.7</u>
<u>OVER FLUSH</u>	<u>10</u>	<u>20</u>	<u>SAND</u>		<u>1500</u>	
<u>TOTAL BBL'S</u>	<u>195</u>					

REMARKS:

Spotted 75 gal. 15% HCL acid on perfs

Location 12:15 PM - 1:30 PM 30: miles

AUTHORIZATION _____ TITLE _____ DATE 1-13-12



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
Fax 620/431-0012

INVOICE Invoice # 247169

Invoice Date: 01/19/2012 Terms: 0/0/30,n/30 Page 1

LEGEND OIL & GAS, LTD
1420 5TH AVEUNE, SUITE 2200
SEATTLE WA 98101
(206) 274-5165

ORTH GILLESPIE 9,10
47257
22-25S-17E
1-13-12
KS

AFE LOGL-9-2011
AFE LOGL-10-2011
9320-415
Orth Gillespie

Part Number	Description	Qty	Unit Price	Total
1275	15% HCL	150.00	2.1000	315.00
1202	ACID INHIBITOR	.50	46.0000	23.00
1219B	STIMOIL FBA	1.00	55.0000	55.00
1268	CITY WATER	5500.00	.0156	85.80
1268	CITY WATER	5500.00	.0156	85.80
1231	FRAC GEL	200.00	6.0000	1200.00
1215	KCL SUB MB6875 CC3107	12.00	36.5000	438.00
1205A	BIOCIDE (AMA-35-D-P) (DR	6.00	30.0000	180.00
1208	BREAKER LEB4-ESA 14-GB10	.50	187.0000	93.50
4326	7/8" RUBBER BALL SEALERS	40.00	3.0000	120.00
2101A	20-40 BROWN SAND	200.00	.2600	52.00
2102	12/20 BROWN SAND	7800.00	.2700	2106.00

Description	Hours	Unit Price	Total
VALVE FRAC VALVES (2" OR 3")	2.00	100.00	200.00
BALLI BALL INJECTOR	2.00	.00	.00
476 MINIMUM COMBO CHARGE 1300 HP UNIT	1.00	2070.00	2070.00
476 MINIMUM COMBO CHARGE 1300 HP UNIT	1.00	2070.00	2070.00
476 MILEAGE CHARGE (ONE WAY)	30.00	.00	.00
T-95 WATER TRANSPORT (FRAC)	2.50	112.00	280.00
478 PROPANT DELIVERY	1.00	.00	.00
490 MILEAGE CHARGE (ONE WAY)	30.00	.00	.00
T-102 WATER TRANSPORT (FRAC)	2.50	112.00	280.00
521 MINIMUM ACID SPOTTING CHARGE	2.00	375.00	750.00
521 MILEAGE CHARGE (ONE WAY)	30.00	.00	.00

=====
Parts: 4754.10 Freight: .00 Tax: 21.28 AR 10425.38
Labor: .00 Misc: .00 Total: 10425.38
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 47257

LOCATION Thayer

PO BOX 884 STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
1-13-12	4759	Orl Gillespie		22	25S	17E	WO	Squirrel
CHARGE TO <u>Legends Oil & Gas</u>			OWNER					
MAILING ADDRESS			OPERATOR					
CITY & STATE			CONTRACTOR					

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5102B	1	PUMP CHARGE 1300 Combo	2 nd well	2070
5102B	1		3 rd well	2070
			(of 3)	750
5302	2	Acidspotter		315
1275	150	15% HCL acid		23
1202	1/2 gal	ESA 24 inhibitor		55.00
1219B	1	Stim Oil		85.80
1268	5,500 gal	Thayer		85.80
1268	5,500 gal	Yates Center		1200
1231	200#	Frac gel		438
1215	12 gal	KEL SUB		180
1205A	64 gal	Biocide		93.50
1208	1/2 gal	Breaker		200
5604	2	Frac valve		NO charge
5115	2	Ball injector		120
4326	40	1.3SG 7/8" ballsealers		
		BLENDING & HANDLING		
5109	30	TON-MILES		
		STAND BY TIME		
5108	30	MILEAGE Mobilization X 3 P, S, I		560.00
5501F	4 hcs	WATER TRANSPORTS - 2 @ 2.5 hrs.		
		VACUUM TRUCKS		52
2107A	200#	FRAC SAND 20-40		2106.00
2102	7800#	12-20		
			SALES TAX	21.29
		247169	ESTIMATED TOTAL	10475.

Rev'n 2790

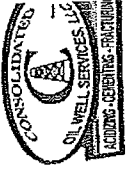
CUSTOMER or AGENTS SIGNATURE _____

COWS FOREMAN Brett Busby

DATE 1-13-12

CUSTOMER or AGENT (PLEASE PRINT) _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account, and conditions of services on the back of this form are in effect for services identified on this form.



SERVICE COMPANY: Unknown C.O.W.S.
 TICKET NO: 56410
 CUSTOMER NAME: Legends Oil & Gas
 WELL NUMBER: Orth-Gillespie #10
 WELL LOCATION: Sec 22-25s-17e W. Co.

DATE RECORDED: 01/13/2012
 JOB NO: Unknown
 UNIT DESCRIPTION: Unknown
 UNIT NOTES: Squirrel sand frac
 FILE NAME: Legends Oil & Gas_12_01_13_#2.csv

Pen# 1: Pump Pressure (Pressure : psi)
 Pen# 2: Pump Rate (Flowrate : bpm)

