



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: _____

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

Operator: Legend Oil

Lease / Well #: Pat Collins #6 17-25-17

API #: 15-207-28625-0000

111
Break

	Date		Date		Date		Date
Spud/Surface	7-23-13	Drilled to TD	7-25-13	Logged		1"/rods, pump	
Set Surface	7-23-13	Run Casing	7-25-13	Perforated		Lead Line/Elec	
Spud/Casing	7-24-13	Cemented LS	7-25-13	Frac/Acidized		Closed Pit	

Purpose	Size Drilled	Size Pipe	Weight #/ft	Setting Depth	Cement	# Sacks	Additives
Surface:	11"	7"	new	20	924/1000	10	
Casing:	5 3/8"	2 3/8"	used	897	Hurricane Bond		
Frac:							

Driller's TD:	910 ft	Seat Nipple:	835 ft	Pipe TD:	897 ft	Fluid Volume:	bbbs
---------------	--------	--------------	--------	----------	--------	---------------	------

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 2-7 clay 7-20 lime
1st Collar	19.9	L-28
2nd Collar	20.0	41.8 S
Joints 20.7': 1	62.5	S
2	83.2	S
3	103.9	S
4	124.6	S
5	145.3	L 144
6	166.0	L
7	186.7	L
8	207.4	L
9	228.1	L
10	248.8	L
11	269.5	S L S
12	290.2	S
13	310.9	L
14	331.6	L
15	352.3	L
16	373.0	L
17	393.7	L
18	414.4	L
19	435.1	L
20	455.8	L-461
21	476.5	S
22	497.2	S
23	517.9	S
24	538.6	S

OPERATOR:

Legend

LEASE/WELL#

Pet Collins #6

FOOTAGE:

FORMATION:

DEPTH	FOOTAGE	FORMATION	DESCRIPTION
25	559.3	S	
26	580.0	S	
27	600.7	L 612-620	
28	621.4	L 635-636 L 638-	
29	642.1	- 648 L 650-652 L 658-660	
30	662.8	S	
31	683.5	S	
32	704.2	L 715-719	
33	724.9	L 729-741 L 744-	
34	745.6	- 748 L 753-757	
35	766.3	L 775-781 L 783-	odor 788-792
36	787.0	- 792	
37	807.7	L 801 1/2 - 804	810 sandy shale
38	828.4	S	814 Sand shale
39	849.1	L 836-839	
40	869.8	S	839-841 Sand-some shale - show
41	890.5		841-843 Sand & little shale - show
42	911.2		843-845 sand - shale - show
43	931.9		845-847 some sand sandy shale - odor
44	952.6		847-849 sandy shale - odor
45	973.3		849-851 sandy shale - slight odor
46	994.0		851-853 shale
47	1014.7		
48	1035.4		
49	1056.1		
50	1076.8		
51	1097.5		
52	1118.2		
53	1138.9	SIN 834-835	
54	1159.6		
55	1180.3	RTD 910	
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		

725-13

Hurricane Services, Inc.
Cementing & Circulating Division
250 N. Water, Suite 200
Wichita, KS 67202

FED ID # 48-1214033
 Shop # (620) 437-2661
 Cellular # (620) 437-7582
 Office # (316) 303-9515
 Office Fax # (316) 263-0432

MC ID# 165290

Shop Address: 3613A Y Road
 Madison, KS 66860

Customer:
 LEGEND OIL & GAS LTD
 840 6TH AVE SW
 SUITE 230
 CALGARY, AB T2P3E5

Invoice Date: 7/28/2013
 Invoice #: 0010836
 Lease Name: PATRICK COLLINS
 Well #: 6
 County: WOODSON

Date/Description	HRS/QTY	Rate	Total
7/25/13 See work ticket 100289 of BB	1.000	790.000	790.00
70/30 Pozmix cement	117.000	12.000	1,404.00 T
Cementing products	205.000	0.300	61.50 T
Flocele	38.000	2.150	81.70 T
Gel flush	200.000	0.300	60.00 T
Water truck	3.500	84.000	294.00
City water	3,000.000	0.013	39.00
Pickup truck mileage	40.000	1.500	60.00
Bulk truck	1.000	250.000	250.00
2 7/8" Top rubber plugs	2.000	25.000	50.00 T
5% Fuel surcharge	1.000	154.500	154.50 T

Net Invoice	3,244.70
Sales Tax: (7.15%)	129.54
Total	3,374.24

All invoices are due upon receipt. Interest at the rate of 1 1/2% per month may be charged on all invoices not paid within 30 days from date of invoice.

WE APPRECIATE YOUR BUSINESS!

Hurricane Services, Inc.
 3613 A Y Road
 Madison, KS 66860
 Office # 620-437-2661
 Brad Cell # 620-437-6765



Ticket Number 100289
 Location Madison
 Foreman Brad Butler

Cement Service ticket

Date	Customer #	Well Name & Number	Sec./Township/Range	County
7-25-13		Patrick Collins #6	17-25-17E	Woodson
Customer		Mailing Address	City	State Zip
Legend Oil & Gas LTD		840 6 th Avenue SW, Suite 230	Calgary, Alberta	T2P 3E5 CANADA

Job Type:	Longstring	Truck #	Driver
Hole Size:	5 7/8"	201	Kelly
Hole Depth:	910'	203	Jerry
Bridge Plug:		106	Mark
Packer:			
Casing Size:		Displacement:	5 Bbl.
Casing Weight:		Displacement PSI:	400
Tubing:	2 7/8"	Cement Left in Casing:	1000'
PBTD:	898'		

Quantity Or Units	Description of Services or Product	Pump charge	
0	Mileage Truck in Area	\$3.25/Mile	790.00 N/C
117 SACKS	70/30 Pozmix cement	12.00	1404.00
205 lbs	Gel 22	.30	61.50
38 lbs	Flocel, X3 * P/SK	2.15	81.70
200 lbs	Gel Flush	.30	60.00
3 1/2 HD.	WATER Truck	84.00	294.00
3000 GAL	WATER	13.00 P/1000	39.00
40 miles	Truck #290	1.50	60.00
	wire line Services	50.00	N/C
Tons	Bulk Truck > minimum charge	\$1.15/Mile	250.00
2	Plugs 2 7/8" Top Rubber	25.00	50.00
		Subtotal	3090.20
		Sales Tax	118.49
		Estimated Total	3208.69

Remarks: Rig up to 2 7/8" Tubing, Taped Float shoe at 898' by wireline.
 Break circulation with 5 Bbls water, Pumped 10 Bbl Gel Flush, circulated Gel around to condition hole.
 Mixed 117 Sks 70/30 Pozmix cement w/ 22 Gel and X3 * P/SK of Flocel, shut down washout Pump + Lines.
 Released 2-Top Rubber Plugs, Displaced Plugs with 5 Bbls water, Final Pumping @ 400 PSI
 Bumped Plugs to 1000 PSI, closed Tubing w/ 1000 PSI.
 Good cement returns with 4 Bbl slurry
 "Thank you"

Called by Scott Owens (Driller)
 Customer Signature

MIDWEST SURVEYS, INC.

Invoice

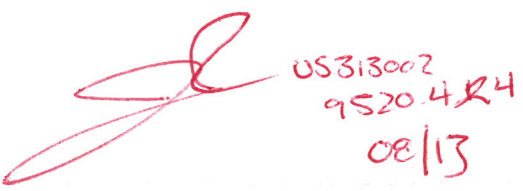
PO BOX 68
 OSAWATOMIE, KS 66064
 913-755-2128

Date	Invoice #
8/22/2013	29555

Bill To
LEGENDS OIL & GAS, LTD 1420 5TH AVE, STE. 2200 SEATTLE, WA 98101

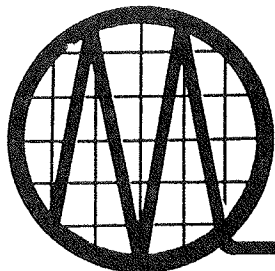
Ship To
PAT COLLINS # 6 WOODSON CO, KS

Customer Order No.	Terms
J. SCHEIBMEIR	J. SCHEIBM...

Qty	Description	Amount
1	GAMMA RAY / NEUTRON / CCL	575.00
31	2" DML RTG 120° PHASE THREE (3) PERFORATIONS PER FOOT MINIMUM CHARGE --- TEN (10) PERFORATIONS TWENTY ONE (21) ADDITIONAL PERFORATIONS @ \$ 21.00 EA	775.00 441.00
	PERFORATED AT: 840.5 TO 850.5	
		
Net Due Upon Receipt		Total
Late Charge of 1 - 1/2 % per Month on Accounts over 30 Days		\$1,791.00

Phone #
913-755-2128

29555



MIDWEST SURVEYS

LOGGING • PERFORATING • M.I.T. SERVICES

P. O. Box 68
Osawatomie, KS 66064
913 / 755-2128

Date 8/22/2013

TERMS AND CONDITIONS: Midwest Surveys is hereby instructed to deliver the equipment or perform the services ordered hereon or as verbally directed, under the terms and conditions printed on the reverse side of this order, which I have read and understand and which I accept as Customer or as Customer's Authorized Agent.

Service and/or Equipment Ordered GRINDING & Perforate

SIGN BEFORE COMMENCEMENT OF WORK

Customer's Name Legend Oil & Gas LTD By [Signature]
Customer's Authorized Representative

Charge to Legend Oil & Gas LTD Customer's Order No. J. Schubert

Mailing Address

Well or Job Name and Number Pat Collins # 6 County Woodson State Kansas

QUANTITY	DESCRIPTION OF SERVICE OR MATERIAL	PRICE
1 ea	Gamma Ray / Neutron Tool	\$ 575.00
31 ea	2" DML RTG 120° Phos-	
	Three (3) Perforations Per Foot	
	Minimum Charge - Ten (10) Perforations	\$ 775.00
	Twenty One (21) Additional Perforations @ \$22	\$ 441.00
	Perforated At 840.5 To 850.5	

Total 1791.00

The above described service and/or material has been received and are hereby accepted and approved for payment.

Served by: S. Winderick

Customer's Name Legend Oil & Gas LTD
By [Signature] Date 8/22/13
Customer's Authorized Representative



CONSOLIDATED
Oil Well Services, LLC

261907

TICKET NUMBER **48569**

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
8-26-13	4759	Pat Collins					HC	
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
5102C	1	PUMP CHARGE 1000HP Combo 1 st well		2300-
5102C	1	2 nd		2070-
5102C	1	3 rd		2070-
5102C	1	4 th		1725-
5302	4	Acid Spatter		1520-
1275	300	15% HCl Acid		525.00
1207	1	Acid Inhibitor		50-
1219B	2	Stim Oil		130-
1268	16,500	City Water (Balance Customer)		285.45
1215A	18	KCL Substitute		689.94
1231	440	Frac Gel		3960-
1208	1	Breaker		200-
1205A	12	Bio-2c		360-
5604	4	Frac Valves		400-
5115	3	Ball Injector		No Charge
4326	53	7/8" Ballsealers		159-
BLENDING & HANDLING				
5109	45	TON-MILES Bulk Delivery (Minimum)		315-
STAND BY TIME				
5108	45	MILEAGE Mobilization + 2 P.S		360-
5501F	16 1/2	WATER TRANSPORTS reduced		1440-
VACUUM TRUCKS				
2104A	900	FRAC SAND 16/30		225-
2102	11,100	12/20		2997.00
			SALES TAX	32.89

524
582
524
1558
524582
791
90
221

Thank you!
We appreciate your business!!
Ravin 2790
CUSTOMER or AGENTS SIGNATURE [Signature] COWS FOREMAN Gary Winkel
ESTIMATED TOTAL 21794.28

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE 8-26-13

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



CONSOLIDATED
Oil Well Services, LLC

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

TICKET NUMBER 55772
FIELD TICKET REF # 48569
LOCATION Thayer
FOREMAN Consolidated

2nd well

**TREATMENT REPORT
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
8-26-13	4759	Pat Collins #6	17	25	17	WO

CUSTOMER
Legends Oil & Gas

MAILING ADDRESS

CITY STATE ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
54	Trampis		
458	Tim		
582	Dwayne		
489/T 90	Wade		

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>840.5-50.5 (31)</i>	

TYPE OF TREATMENT

Acid Spot / Fracture

CHEMICALS

<i>City Water</i>	<i>75 1570 14L A-2</i>
<i>14L Sub.</i>	<i>Inh. Inhib</i>
<i>20# Gel/Breaker</i>	<i>Sim O.I</i>
<i>Biorate</i>	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
<i>Pad</i>	<i>15</i>	<i>-16</i>				BREAKDOWN <i>1900</i>
<i>16/30</i>				<i>300</i>		START PRESSURE
<i>12/20</i>				<i>1700</i>		END PRESSURE
<i>12/20 10-5 3+2 bulls (20)</i>				<i>1</i>		BALL OFF PRESS
<i>12/20</i>				<i>2000</i>		ROCK SALT PRESS
<i>Flush-over</i>	<i>10</i>					ISIP <i>550</i>
<i>Release</i>						5 MIN
<i>Overlunch</i>	<i>3</i>					10 MIN
						15 MIN
						MIN RATE
						MAX RATE
<i>Totals</i>	<i>133</i>			<i>4000</i>		DISPLACEMENT

REMARKS: *Spot and to perf's - breakdown and stage*

AUTHORIZATION _____ TITLE _____ DATE _____

Terms and Conditions are printed on reverse side.

SERVICE COMPANY: COWS
 TICKET NO: 55772
 CUSTOMER NAME: Legends Oil & Gas
 WELL NAME: Pat Collins#6
 WELL LOCATION:

DATE RECORDED: 08/26/2013
 JOB NO:
 UNIT DESCRIPTION:
 UNIT NOTES:
 FILE NAME: LegendsOilGas_13_08_26_#2.csv



Pen# 1: Pump Pressure (Pressure : psi) Pen# 2: Pump Rate (Flowrate : bpm) Pen# 3: Pump Totals (Volume : bbl)

Pen# 1 2300.00 Pen# 2 22.00 Pen# 3 160.00

2070.00 19.80 144.00

1840.00 17.60 128.00

1610.00 15.40 112.00

1380.00 13.20 96.00

1150.00 11.00 80.00

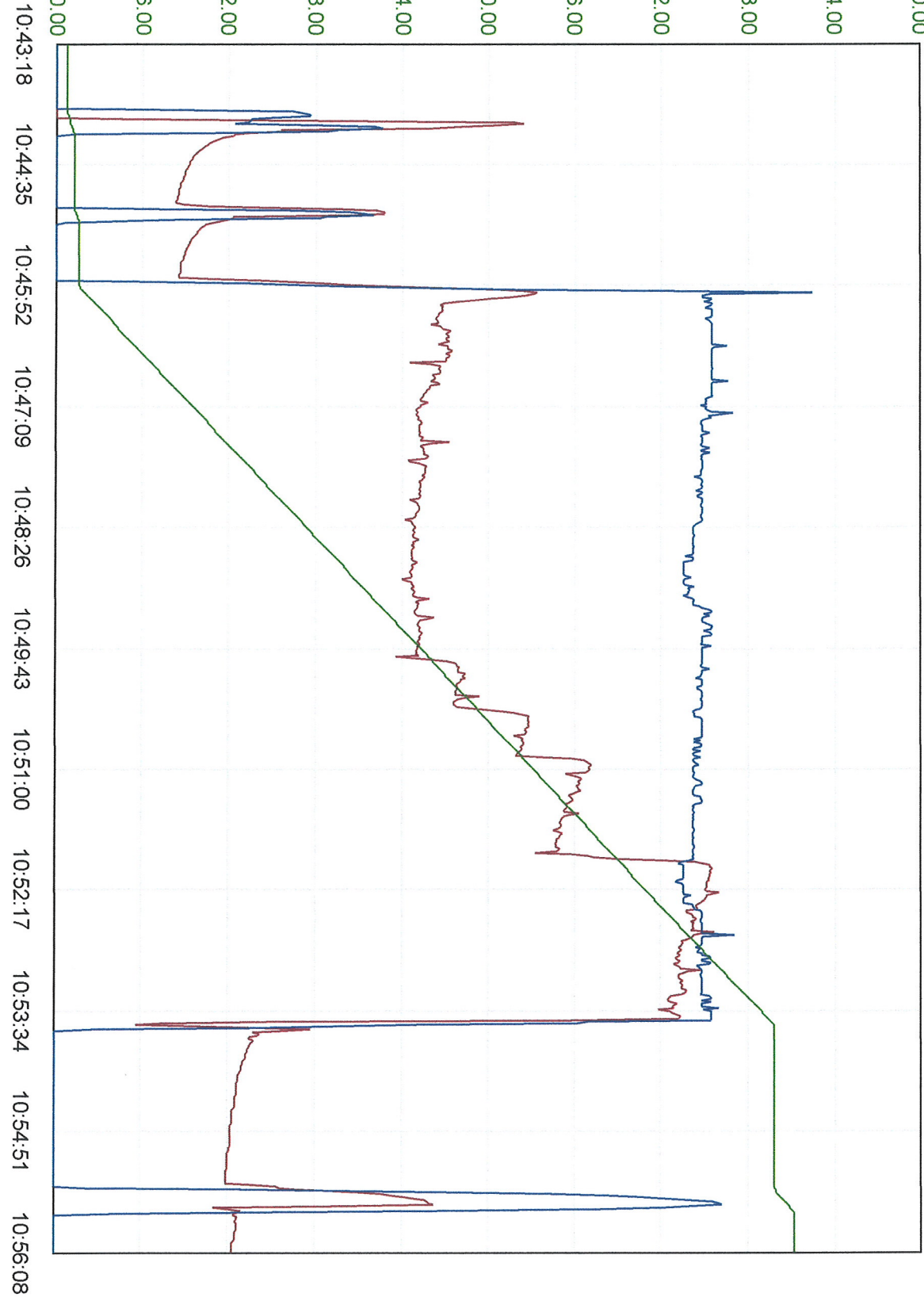
920.00 8.80 64.00

690.00 6.60 48.00

460.00 4.40 32.00

230.00 2.20 16.00

0.00 0.00 0.00



10:43:18 10:44:35 10:45:52 10:47:09 10:48:26 10:49:43 10:51:00 10:52:17 10:53:34 10:54:51 10:56:08