



Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION 1254160
OIL & GAS CONSERVATION DIVISION

Form ACO-1

August 2013

Form must be Typed
Form must be Signed
All blanks must be Filled

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
- Plug Back Conv. to GSW Conv. to Producer
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

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

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical 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

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



1254160

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

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

INSTRUCTIONS: Show important tops 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.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*

Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*

Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

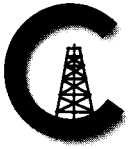
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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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 # 272288

Invoice Date: 10/31/2014 Terms: 0/0/30,n/30

Page 1

LEGEND OIL & GAS, LTD
STE. 400 555 N. POINT CTR EAST
ALPHARETTA GA 30022
(760) 846-6295

VOLUNTEER UNIT #65
45997
27-29-15
10/31/2014
KS

Description	Hours	Unit Price	Total
WATER TRANSPORT (CEMENT)	4.00	120.00	480.00

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	100.00	13.1800	1318.00
1107A	PHENOSEAL (M) 40# BAG)	160.00	1.3500	216.00
1110A	KOL SEAL (50# BAG)	900.00	.4600	414.00
1111	SODIUM CHLORIDE (GRANULA	350.00	.3900	136.50
1118B	PREMIUM GEL / BENTONITE	800.00	.2200	176.00
1126	OIL WELL CEMENT	55.00	19.7500	1086.25
1123	CITY WATER	5400.00	.0173	93.42
4404	4 1/2" RUBBER PLUG	1.00	47.2500	47.25

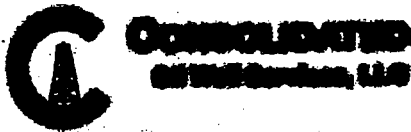
Sublet Performed	Description	Total
9996-170	CEMENT MATERIAL DISCOUNT	-1004.03

Description	Hours	Unit Price	Total
479 MIN. BULK DELIVERY	1.00	368.00	368.00
485 CEMENT PUMP	1.00	1085.00	1085.00
485 EQUIPMENT MILEAGE (ONE WAY)	50.00	4.20	210.00
611 MIN. BULK DELIVERY	1.00	368.00	368.00

Parts:	3487.42	Freight:	.00	Tax:	152.72	AR	5147.11
Labor:	.00	Misc:	.00	Total:	5147.11		
Sublt:	-1004.03	Supplies:	.00	Change:	.00		

Signed _____ Date _____

JM-651



272288

TICKET NUMBER 45997
 LOCATION Eureka
 FOREMAN Jason Cooper

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

FIELD TICKET & TREATMENT REPORT
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-31-14	684759	Volunteer # 65	29	29	15	Wilson
CUSTOMER Legend Oil & Gas			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS			485	Zevi		
CITY			479	Colby		
STATE			611	Jason		
ZIP CODE			452 T103	Brent Melten		

JOB TYPE L.S. HOLE SIZE 6 7/8 HOLE DEPTH 1370' CASING SIZE & WEIGHT 4 1/2 10.5#
 CASING DEPTH 1366' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.6/14 SLURRY VOL 1.48/1.24 WATER gal/sk 6.8/7.9 CEMENT LEFT IN CASING -0-
 DISPLACEMENT 21.78 DISPLACEMENT PSI 350 MIX PSI 200 @ 1200 RATE 4.5

REMARKS: Arrived on location, hooked up to 4 1/2 casing, washed down 6' to land, rigged up cement head, pumped 8 sks gel w 5.5 sks gravel, pumped 115 sks Lead 60/40, 4% Gel, 5# Kal-Seal, 1# Pheno @ 13.6ppg w 5.5 sks Tail 6 7/8 OWC, 2% Gel, 2% C.C., 6# Kal-Seal, 10% Salt, 1# Pheno @ 14ppg, flushed pump + lines, displaced plug to bottom, landered plug @ 1000psi float would not hold shut in @ 500psi. Rigged down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		1085.00
5406	50	MILEAGE		210.00
5407	x2	Min Bulk Delivery		236.00
5501C	4hr	Transport		480.00
989 1131	100 sks	60/40 Poz (Lead)		1318.00
1102A	160 #	Pheno-Seal		216.00
1110A	900 #	Kal-Seal		414.00
1111	350 #	Salt		136.50
1118B	800 #	Gel		176.00
991 1126	55 sks	OWC cement (Tail)		1086.25
1183	5400 gal	Colby Water		93.42
4404	1	4 1/2 Rubber Plug		47.25
Chemical Total \$ 3346.75				
- 30% Discount \$ 1004.03				
\$ 2342.72				
				4994.39 ✓
6.15%				SALES TAX
				ESTIMATED
				TOTAL
				\$ 5147.11 ✓

Form 3737

AUTHORIZATION _____ TITLE _____ DATE _____

... that the payment terms unless specifically amended in writing on the front of the form or in the customer's ... 0

Rig Number: 1	S. 27 T. 29 R. 15 E	
API No. 15- 205-28293	County: Wilson	
Elev. 999'	Location: NE-NW-NW	

Operator: Legend oil & Gas	Lease Name: volunteer	
Address: 555 Northpoint cnts East Ste 400 Alpharetta GA 30022		
Well No: 65		
Footage Location: 330 ft. from the (N) (S) Line		
990 ft. from the (E) (W) Line		
Drilling Contractor: McPherson Drilling LLC		
Spud date: 10/28/14	Geologist:	
Date Completed: 10/30/14	Total Depth: 1370'	

Gas Tests:

930'	Ø
1005'	Blight Blow
1230'	Same

Casing Record			Rig Time:
	Surface	Production	
Size Hole:	11"	6 3/4"	
Size Casing:	8 5/8"		
Weight:	23#		
Setting Depth:	41'		
Type Cement:	port		
Sacks:	8		

Inj water @ 480'

Formation			Well Log			Formation			
Top	Btm.		Formation	Top	Btm.		Formation	Top	Btm.
Top Soil	0	2	lime	654	706		Shale	1022	1051
lime	2	29	Sand	706	728	no sho	Coal	1051	1052
Shale	29	47	Shale	728	794		Shale	1052	1075
lime	47	83	Sand/Shale	794	798		Sand	1075	1086
Shale	83	103	Sand	798	809	sho	Sand/Shale	1086	1127
lime	103	128	Sand/Shale	809	820		Coal	1127	1128
Shale	128	131	lime	820	823		Shale	1128	1133
lime	131	142	coal	823	824		Sand	1133	1158
Shale	142	272	Shale	824	827		Oil Sand	1158	1224
Sand	272	358	lime	827	841		Coal	1224	1225
Sand/Shale	358	378	Black shale	841	848		Sand/Shale	1225	1244
lime	378	380	Shale	848	878		Coal	1244	1245
Sand/Shale	380	393	SW lime	878	902		Shale	1245	1290
lime	393	476	Summit	902	910		Coal	1290	1291
Sand/Shale	476	484	lime	910	921		Shale	1291	1296
lime	484	494	Mulkey	921	928		Miss	1296	1370
Sand	494	507	lime	928	933				
Sand/Shale	507	526	Sand	933	936	sho			
lime	526	551	Oil Sand	936	940				
Shale	551	598	Sand/Shale	940	947				
lime	598	609	Shale	947	997				
Shale	609	640	lime	997	1001				
lime	640	648	Coal	1001	1002				
Shale	648	654	Sand/Shale	1002	1022				