



KANSAS CORPORATION COMMISSION 1110588  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
June 2009  
Form Must Be Typed  
Form must be Signed  
All blanks must be Filled

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34471  
Name: Legend Oil & Gas Ltd.  
Address 1: 1218 3rd Ave, STE 505  
Address 2: \_\_\_\_\_  
City: SEATTLE State: WA Zip: 98101 + \_\_\_\_\_  
Contact Person: John Riad  
Phone: ( 403 ) 263-2472  
CONTRACTOR: License # 33986  
Name: Owens Petroleum Services, LLC  
Wellsite Geologist: None  
Purchaser: \_\_\_\_\_

Designate Type of Completion:

- New Well     Re-Entry     Workover
- Oil     WSW     SWD     SLOW  
 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 #: \_\_\_\_\_

<u>08/20/2012</u>	<u>08/22/2012</u>	<u>9/13/2012</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-207-28190-00-00  
Spot Description: \_\_\_\_\_  
NE NE SW SW Sec. 22 Twp. 25 S. R. 17  East  West  
1155 Feet from  North /  South Line of Section  
1155 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE     NW     SE     SW  
County: Woodson  
Lease Name: Gillespie-South Well #: 7  
Field Name: \_\_\_\_\_  
Producing Formation: Squirrel Sand  
Elevation: Ground: 1027 Kelly Bushing: 1030  
Total Depth: 868 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at: 22 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from: 0  
feet depth to: 868 w/ 132 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 20 bbls  
Dewatering method used: Evaporated  
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  
 UTC Distribution  
ALT  I  II  III Approved by: Deanna Gantson Date: 01/28/2013



1110588

Operator Name: Legend Oil & Gas Ltd. Lease Name: Gillespie-South Well #: 7  
 Sec. 22 Twp. 25 S. R. 17  East  West County: Woodson

**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 checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i>  List All E. Logs Run:  Gamma Ray/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Squirrel Sand</td> <td>778</td> <td></td> </tr> </table>	Name	Top	Datum	Squirrel Sand	778	
Name	Top	Datum					
Squirrel Sand	778						

CASING RECORD <input checked="" 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
Surface Casing	11.625	7	25	22	Portland	20	None
Production Casing	5.625	2.785	10.5	863	OWC	132	2% Gel

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	-			
	-			

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
3	806-816	15% HCL, 300# 16/30 sand & 3700# of 12/20 sand	806-816

TUBING RECORD:	Size: <u>1</u>	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or ENHR. <u>9/18/2012</u>		Producing Method: <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) _____		
Estimated Production Per 24 Hours	Oil Bbls. <u>1</u>	Gas Mcf	Water Bbls. <u>0.5</u>	Gas-Oil Ratio <u>0.5</u>
				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 checked="" 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: <u>806</u> <u>816</u>
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**OWENS PETROLEUM SERVICES, LLC  
DRILLER'S LOG**

Operator: Legend

Lease / Well #: Gilispie South #7

API #: 15-207-28190-0000 22-25-17

*111*  
*111*

	Date		Date		Date		Date
Spud/Surface	8-20-12	Drilled to TD	8-22-12	Logged		1" / pump	
Set Surface	8-20-12	Run/Casing	8-22-12	Perforated		Lead Line/Elec	
Spud/Casing	8-21-12	Cemented LS	8-22-12	Frac		Closed Pit	

Purpose	Size Drilled	Size Pipe	Weight #/ft	Setting Depth	Cement	# Sacks	Additives
Surface:	11 3/4"	7"	new	22'	orange	20	---
Casing:	5 1/2"	2 1/2"	used	863			
Frac:							

Driller's TD:	868 ft	Seat Nipple:	800 ft	Pipe TD:	863 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	1.9		
1st Collar	19.9	<i>A rock pushed surface pipe back expd</i>	
2nd Collar	20.0	41.8	
Joints 20.7'	62.5	S	
	83.2	S	
	103.9	S	
	124.6	L 137	
	145.3	L 2 S	
	166.0	L	
	186.7	L	
	207.4	L	
	228.1	L	
	248.8	S	L 267
	269.5	L	S
	290.2	L	
	310.9	L	
	331.6	L	
	352.3	L	Bills Gate L
	373.0	L	
	393.7	L	
	414.4	L - 434	
	435.1	S	
	455.8	S	
	476.5	S	
	497.2	S	
	517.9	S	
	538.6	S	

# Legend

LEASE/WELL# Gibbespie South #7

	FOOTAGE:	FORMATION:	
25	559.3	S	
26	580.0	L588 - <del>598</del> 599	
27	600.7	L607 - <del>609</del> L611 -	
28	621.4	-622	
29	642.1	L658 - 660	
30	662.8	S	
31	683.5	L684 - 688 L692 -	
32	704.2	-715 L720 - 724	
33	724.9	S	
34	745.6	L748 - 765	
35	766.3	L769 - 782 L773 - 775 Local 779	
36	787.0	samples → L <del>786</del> 806 - 807	
37	807.7	samples →	779-781 mostly shale slight odor
38	828.4	S	781-783 mostly sand - odor - show
39	849.1		783-785 mostly sand odor - show
40	869.8		785-787 mostly sand better oil show
41	890.5		787-789 <del>mostly</del> sand better oil show
42	911.2		789-791 mostly shale slight odor
43	931.9		791-793 shale
44	952.6		
45	973.3		807-809 sand & shale ? show on top
46	994.0		809-811 sand, some shale - good show
47	1014.7		811-813 good sand - good show
48	1035.4		813-815 good sand & show
49	1056.1		815-817 shale
50	1076.8		817-819 shale
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		

SIN  
800-~~801~~

RTD 868

Fought every connection  
due to surface being  
cork eyed

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

(620) 625-3607

# Invoice

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

LEASE	WELL #	DATE	INVOICE#
Gillespie South	7	8/22/2012	082212,GS7

DETAIL	HRS/GALS/QTY	RATE	AMOUNT
*DOZER Cleared brush and dug drill pit		960.00	960.00
*TANK TRUCK Filled pits with water		200.00	200.00
*SET SURFACE AND CEMENT 20 bags of Portland cement		500.00	500.00
*DRILLING RIG Rig TD - 868' Pipe TD - 863' S/N - 800'	868.0	7.00	6,076.00
<b>Total:</b>			<b>\$7,736.00</b>

**Kepley Well Service, LLC**

19245 Ford Road  
Chanute, KS 66720

<b>Date</b>	<b>Invoice #</b>
8/27/2012	47062

## Cement Treatment Report

Legend Oil & Gas Ltd.  
Suite 230, 840 6th Avenue SW  
Calgary Alberta CANADA T2P 3E5

(x) Landed Plug on Bottom at 700 PSI  
 () Shut in Pressure  
 (x) Good Cement Returns  
 () Topped off well with \_\_\_\_\_ sacks  
 (x) Set float shoe

TYPE OF TREATMENT: Production Casing  
 HOLE SIZE: 5 7/8"  
 TOTAL DEPTH: 868

Well Name	Terms	Due Date		
	Net 15 days	8/27/2012		
Service or Product	Qty	Per Foot Pricing/Unit Pricing	Amount	
Cement 2 7/8"	863	3.00	2,589.00	
Sales Tax		7.30%	0.00	

8-23-12  
Gillespie-South #7  
Woodson County  
Section: 22  
Township: 25  
Range: 17

Hooked onto 2 7/8" casing. Established circulation with 5 barrels of water, 2 GEL, METSO, COTTONSEED ahead, blended 132 sacks of 2% cement, dropped 2 rubber plugs, and pumped 5 barrels of water

<b>Total</b>	<b>\$2,589.00</b>
<b>Payments/Credits</b>	<b>\$0.00</b>
<b>Balance Due</b>	<b>\$2,589.00</b>



**MIDWEST SURVEYS**  
 LOGGING • PERFORATING • CONSULTING • M.I.T. SERVICES  
 P. O. Box 68 • Osawatomie, KS 66064  
 Phone 913-755-2128

# Invoice

Date	Invoice #
9/10/2012	27340

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

<b>Ship To</b>
GILLESPIE-SOUTH # 7 WOODSON CO, KS

Customer Order No.	Terms
J SCHEIBMIER	J SCHEIBMI...

Qty	Description	Amount
1	GAMMA RAY / NEUTRON / CCL	550.00
31	2" DML RTG 120° PHASE	
	THREE (3) PERFORATIONS PER FOOT	0.00
	MINIMUM CHARGE -- TEN (10) PERFORATIONS	760.00
	TWENTY ONE (21) ADDITIONAL PERFORATIONS	441.00
	PERFORATED AT: 806.0 TO 816.0	

<b>Net Due Upon Receipt</b>	Late Charge of 1 - 1/2 % per Month on Accounts over 30 Days	<b>Total</b>	\$1,751.00
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**MIDWEST SURVEYS**  
 LOGGING • PERFORATING • M.I.T. SERVICES

27340

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

Date 9/10/2012

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 Legends Oil & Gas Ltd By \_\_\_\_\_  
 Customer's Authorized Representative

Charge to Legends Oil & Gas Ltd Customer's Order No. Leg & Schobinger

Mailing Address.....

Well or Job Name and Number Gillette South County Woodson No-7 State Kansas

QUANTITY	DESCRIPTION OF SERVICE OR MATERIAL	PRICE
<u>1 ea</u>	<u>Gunnery Rig, Identia 1000</u>	<u>\$ 350.00</u>
<u>31 ea</u>	<u>2" DMC RIG 120" Phase</u>	
	<u>Three (3) Perforations Per Foot</u>	
	<u>Minimum Charge - Ten (10) Perforations</u>	<u>\$ 700.00</u>
	<u>Twenty one (21) Additional Perforations @ \$22.00</u>	<u>\$ 462.00</u>
	<u>Perforated At \$06.00 To \$16.00</u>	

Total ..... 1751.00

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

Served by: S Woodson

Customer's Name Legends Oil & Gas Ltd  
 By \_\_\_\_\_ Date 9/10/12  
 Customer's Authorized Representative

White — Customer

Canary — Accounting





**CONSOLIDATED**  
Oil Well Services, LLC

TICKET NUMBER **47806**

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

LOCATION Thayer

**FIELD TICKET**

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
9-13-12	1757	Smithville		22	25	17	MO	
CHARGE TO <u>Legend Oil Co</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5122C	1	PUMP CHARGE 1100 m <sup>3</sup> cement / 1" well		2300-
5122C	1	2" well		2070-
5302	2	Acid Spatter		750-
1275	150	15% HCl Acid		315-
1202	.5	Acid Inhibitor		25-
1211B	1	Slur Oil		65-
1265	11,000	Cost Water		171.60
1212A	12	10% Substrate		438-
1231	200	Fuel		1800-
1208	5	Flux		100-
1205A	6	Pro-De		180-
5604	2	Flare Valves		200-
5115	2	Well Transport		NO Charge
4326	40	Wellhead		120-
		BLENDING & HANDLING		
5109	43	TON-MILES South Delivery		315-
		STAND BY TIME		
5105	43	MILEAGE Mobilization + 2 P.S.		344-
5511F	6	WATER TRANSPORTS		672-
		VACUUM TRUCKS		
2104	600	FRAC SAND 16/30		150-
2102	7400	11/20		1998.00
			SALES TAX	21.29
		<b>252931</b>		

Flavin 2790

ESTIMATED TOTAL **12034.89**

CUSTOMER or AGENTS SIGNATURE

*Amy Schabman*

OOVS FOREMAN

*Consolidated*

CUSTOMER or AGENT (PLEASE PRINT)

DATE

9-13-12

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

*1st well*

TICKET NUMBER 53992  
FIELD TICKET REF # 47806  
LOCATION Thayer  
FOREMAN Georgina

**TREATMENT REPORT  
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/15/12	4759	South Gillingham #7	22	25	17	W0

CUSTOMER  
*Leonard Oil & Gas*

MAILING ADDRESS

CITY STATE ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
524	Tompson		
5458	Tina		
521	Daniel		
621/1162	Steve		

**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>200-160</i>	<i>(1)</i>

**TYPE OF TREATMENT**

*Acid gel / Frac*

**CHEMICALS**

<i>City Water</i>	<i>75 15% HCl A.S</i>
<i>KCl sub.</i>	<i>Tal. S. L.</i>
<i>20% HCl / Borax</i>	<i>Stim. O.I</i>
<i>Bicarb</i>	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
<i>Prod</i>	<i>15</i>	<i>-15</i>				BREAKDOWN <i>1100</i>
<i>16/30</i>				<i>700</i>		START PRESSURE
<i>16/20</i>				<i>1700</i>		END PRESSURE
<i>16/10</i>						BALL OFF PRESS
<i>12/20 5x5 balls</i>				<i>1000</i>		ROCK SALT PRESS
<i>12/10</i>				<i>1000</i>		ISIP <i>375</i>
<i>Flush &amp; Cure</i>	<i>10</i>					5 MIN
<i>Release</i>						10 MIN
<i>Overflush</i>	<i>5</i>					15 MIN
						MIN RATE
						MAX RATE
<i>Totals</i>	<i>129</i>			<i>4000</i>		DISPLACEMENT

REMARKS: *prod and to prod breakdown and stage*  
*252431*

AUTHORIZATION \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Terms and Conditions are printed on reverse side.



**CONSOLIDATED**  
Oil Well Services, LLC

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

TICKET NUMBER 53993  
FIELD TICKET REF # 47806  
LOCATION Chanute  
FOREMAN Greg White

**TREATMENT REPORT**  
**FRAC & ACID**

*2nd well*

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-12-12	4759	South 1/4 Sec 22 T25 R17	22	25	17	WO

CUSTOMER  
*Legend Oil & Gas*

MAILING ADDRESS

CITY STATE ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
524	Triumph		
458	Tim		
521	David		
614/791	George		

**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>790-500 (31)</i>	

**TYPE OF TREATMENT**

*Acid / Frac*

**CHEMICALS**

<i>20% HCl / Packer</i>	<i>75 1/2 HCl Acid</i>
<i>Brine</i>	<i>T. Ball</i>
	<i>Shut in</i>

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
<i>1st</i>	<i>1</i>	<i>1</i>				BREAKDOWN <i>1800</i>
<i>10/30</i>				<i>300</i>		START PRESSURE
<i>10/30</i>				<i>1700</i>		END PRESSURE
<i>10/30</i>						BALL OFF PRESS
<i>10/30</i>				<i>1000</i>		ROCK SALT PRESS
<i>10/30</i>				<i>1000</i>		ISIP <i>425</i>
<i>10/30</i>	<i>10</i>					5 MIN
<i>Release</i>						10 MIN
<i>Overhead</i>	<i>5</i>					15 MIN
						MIN RATE
						MAX RATE
<i>Totals</i>	<i>130</i>			<i>4000</i>		DISPLACEMENT

REMARKS: *got a shut in pressure breakdown and stage*

AUTHORIZATION \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Terms and Conditions are printed on reverse side.

SERVICE COMPANY: C.O.W.S.  
 TICKET NO: 53992  
 CUSTOMER NAME: Legend Oil and Gas  
 WELL NAME: South Gillespie #7  
 WELL LOCATION:

DATE RECORDED: 09/13/2012  
 JOB NO:  
 UNIT DESCRIPTION:  
 UNIT NOTES:  
 FILE NAME: LegendOilandGas\_12\_09\_13\_#1.csv

