



KANSAS CORPORATION COMMISSION 1108672
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 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 #:
8/15/2012 08/17/2012 9/13/2012
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-207-28189-00-00
Spot Description:
NW NE SW SW Sec. 22 Twp. 25 S. R. 17 East West
1155 Feet from North / South Line of Section
825 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 #: 6
Field Name:
Producing Formation: Squirrel Sand
Elevation: Ground: 1020 Kelly Bushing: 1030
Total Depth: 860 Plug Back Total Depth:
Amount of Surface Pipe Set and Cemented at: 40 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: 860 w/ 125 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
 UIC Distribution
ALT I II III Approved by: Deanna Garrison Date: 01/24/2013

1108672

Operator Name: Legend Oil & Gas Ltd. Lease Name: Gillespie-South Well #: 6
 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>760</td> <td></td> </tr> </table>	Name	Top	Datum	Squirrel Sand	760	
Name	Top	Datum					
Squirrel Sand	760						

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	40	Portland	20	None
Production Casing	5.625	2.785	10.5	846	OWC	125	2% Gel

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
3	790-800	15% HCL, 300# 16/30 sand & 3700# of 12/20 sand	790-800

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	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>790</u> <u>800</u>
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**OWENS PETROLEUM SERVICES, LLC
DRILLER'S LOG**

Operator: Legend

Lease / Well #: Gillespie South #6

API #: 15-207-28189-0000

22-25-17

Peck
9-21-17

	Date		Date		Date		Date
Spud/Surface	8-15-12	Drilled to TD	8-17-12	Logged		1" / pump	
Set Surface	8-15-12	Run/Casing	8-17-12	Perforated		Lead Line/Elec	
Spud/Casing	8-16-12	Cemented LS	8-21-12	Frac		Closed Pit	

Purpose	Size Drilled	Size Pipe	Weight #/ft	Setting Depth	Cement	# Sacks	Additives
Surface:	11 5/8"	7"	new	40	ashgrove	20	
Casing:							
Frac:							

Driller's TD:	860 ft	Seat Nipple:	860 784 ft	Pipe TD:	846 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: _____ / _____ Total

FOOTAGE: FORMATION:

Bit and Sub	FOOTAGE	FORMATION
Bit and Sub	1.9	
1st Collar	19.9	
2nd Collar	20.0	41.8
Joints 20.7'	62.5	S
	83.2	S
	103.9	L 114'
	124.6	L
	145.3	L
	166.0	L
	186.7	L
	207.4	L
	228.1	S
	248.8	L 251
	269.5	L 275
	290.2	L
	310.9	L
	331.6	L 811.5
	352.3	L-378
	373.0	L-378 L381
	393.7	L ?
	414.4	L-418 S
	435.1	S
	455.8	S
	476.5	S
	497.2	S
	517.9	S
	538.6	S

OPERATOR: Legend

LEASEWELL# Gillespie South #6

110.4
x/y

	FOOTAGE:	FORMATION:	
20	559.3	L563-	
25	580.0	-580 L591-	599-603 ² oil show
27	600.7	-606	
28	621.4	L628-632 L640-642	
28	642.1	S	
28	662.8	L667-670 L675-	
28	683.5	-688 L698-699	688
22	704.2	L702-706 L716-718	
25	724.9	L730-	
24	745.6	-749 L754-757 cor 761	762-764 Sand-odor show
38	766.3	Samples →	764-766 Sand-odor show
38	787.0	L788-790 Samples →	766-768 better sand show
27	807.7	S	768-770 better sand show
38	828.4	S	770-772 more shale than 200
38	849.1		772-774 shale
40	869.8		
41	890.5		
42	911.2		790-792 sand odor show
43	931.9		792-794 good show - sand
44	952.6		794-796 looks good
45	973.3		796-798 looks good
46	994.0		798-800 shale
47	1014.7		800 802 shale
48	1035.4		802-804 shale
49	1056.1		
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		

S/N 784

RTD 860

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

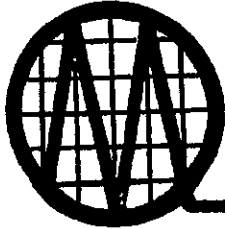
(620) 625-3607

Invoice

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

LEASE	WELL #	DATE	INVOICE#
Gillespie South	6	8/17/2012	081712,GS6

DETAIL	HRS/GALS/QTY	RATE	AMOUNT
*DOZER Cleared brush and dug drill pit		800.00	800.00
*TANK TRUCK Filled pit with water		150.00	150.00
*SET SURFACE AND CEMENT 20 bags of Portland cement		500.00	500.00
*DRILLING RIG Rig TD - 860' Pipe TD - 846' S/N - 784'	860.0	7.00	6,020.00
Total:			\$7,470.00

**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	27339

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

Ship To
GILLESPIE-SOUTH #6 WOODSON CO, KS

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

Qty	Description	Amount
1	GAMMA RAY / NEUTRON / CCL	550.00
31	2" DML RTG 120° PHASE	
	THREE (3) PERFORATIONS PER FOOT	
	MINIMUM CHARGE -- TEN (10) PERFORATIONS	760.00
	TWENTY ONE (21) ADDITIONAL PERFORATIONS @ \$21.00 EA	441.00
	PERFORATED AT: 790.0 TO 800.0	
Net Due Upon Receipt		Total \$1,751.00
Late Charge of 1 - 1/2 % per Month on Accounts over 30 Days		



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	4751	Smithville #6		22	25	17	W0	
CHARGE TO <u>Legend Oil - Gas</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5102L	1	PUMP CHARGE 10000' stem hole 1" well		2300-
5102C	1	2" well		2070-
5302	2	Acid Spatter		750-
1275	150	15% HCl Acid		315-
1202	.5	Acid Inhibitor		25-
1111B	1	Stim Oil		65-
1205	11000	Cost Water		171.60
1215A	13	10% substitute		438-
1231	200	Frac Sand		1800-
1208	.5	Proppant		100-
1207A	6	Proppant		180-
5601	2	Fracturing		200-
5115	2	Well Treatment		NO Charge
4324	40	Drill bits		120-
BLENDING & HANDLING				
5107	43	TON-MILES Bulk Delivery		315-
STAND BY TIME				
5105	43	MILEAGE Mobilization + 2 P.S		344-
5111	6	WATER TRANSPORTS		672-
VACUUM TRUCKS				
2101	600	FRAC SAND 16/30		150-
2102	7400	12/20		1995.00
252931				
			SALES TAX	21.29
ESTIMATED TOTAL				12634.89

Revin 2790

CUSTOMER or AGENTS SIGNATURE Amy Schubert COWS FOREMAN Gay Wital

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 Gregg

**TREATMENT REPORT
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9/13/12	4759	South Galloway #7	22	25	17	W0

CUSTOMER
Legend Oil & Gas

MAILING ADDRESS

CITY STATE ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
524	Trumps		
458	Tim		
521	Daniel		
622/1122	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>16 1/2</i>	<i>(1)</i>

TYPE OF TREATMENT

Acid gel/foam

CHEMICALS

<i>City Water</i>	<i>75 15% Meq</i>
<i>13% sub</i>	<i>Tul 1.1</i>
<i>2% HCl/Breaker</i>	<i>Stimol</i>
<i>Bioride</i>	

STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
<i>100</i>	<i>15</i>	<i>-15</i>				BREAKDOWN <i>1100</i>
<i>16/30</i>				<i>300</i>		START PRESSURE
<i>16/20</i>				<i>1700</i>		END PRESSURE
<i>12/20 5-5 ball</i>				<i>1000</i>		BALL OFF PRESS
<i>12/20</i>				<i>1000</i>		ROCK SALT PRESS
<i>Flushing</i>	<i>10</i>					ISIP <i>375</i>
<i>Release</i>						5 MIN
<i>Overhead</i>	<i>5</i>					10 MIN
						15 MIN
						MIN RATE
						MAX RATE
<i>Totals</i>	<i>129</i>			<i>4000</i>		DISPLACEMENT

REMARKS: *gel acid to perforation breakdown good stage*
25/245

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

2nd well

TICKET NUMBER 53993
FIELD TICKET REF # 47806
LOCATION Thayer
FOREMAN George White

**TREATMENT REPORT
FRAC & ACID**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-12-12	4759	Wells 1, 16, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30	22	25	17	WO

CUSTOMER
Thayer Oil Co

MAILING ADDRESS

CITY STATE ZIP CODE

TRUCK #	DRIVER	TRUCK #	DRIVER
524	Trump's		
415	Tim		
521	Daniel		
614/791	George		

WELL DATA

CASING SIZE	TOTAL DEPTH
CASING WEIGHT	PLUG DEPTH
TUBING SIZE	PACKER DEPTH
TUBING WEIGHT	OPEN HOLE
PERFS & FORMATION	
790-500	

TYPE OF TREATMENT

Acid gel/fracture

CHEMICALS

<i>100 lbs 20% HCl</i>	<i>750 lbs 20% HCl</i>
<i>100 lbs 20% HCl</i>	<i>750 lbs 20% HCl</i>
<i>300 lbs 10% HCl</i>	<i>2250 lbs 10% HCl</i>
<i>100 lbs 20% HCl</i>	

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

REMARKS: *got a bit of gel - breakdown good stage*

AUTHORIZATION _____ TITLE _____ DATE _____

Terms and Conditions are printed on reverse side.

SERVICE COMPANY: C.O.W.S.
 TICKET NO: 53993
 CUSTOMER NAME: Legend Oil and Gas
 WELL NAME: South Gillespie #6
 WELL LOCATION:

DATE RECORDED: 09/13/2012
 JOB NO:
 UNIT DESCRIPTION:
 UNIT NOTES:
 FILE NAME: LegendOilandGas_12_09_13_#2.csv

