

STATE OF NEVADA  
 DIVISION OF MINERAL RESOURCES  
 Capitol Complex—201 S. Fall Street  
 Carson City, Nevada 89710  
 Telephone (702) 885-4368

Original—Division—Prod.  
 Duplicate—Division—NBM & G  
 Triplicate—State Treasurer  
 Quadruplicate—File

**PRODUCER'S MONTHLY REPORT**

This report to be filed by the end of the month following the month herein reported.

Company Marathon Oil Company Address 539 S. Main St., Findlay, OH 45840  
 Lease Currant Pool Undesignated County Nye Month of December, 19 65  
Sheep Pass

LOCATION					OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
Well No.	Permit No.	Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod. †	Tot. gas Prod. MCF	Gas-oil ratio	Date of test		
1	241	26	10N	57E	0	0		0	0	0		0	Shut-IN

TOTALS:

\*Report distillate, condensate or other liquid hydrocarbons (other than oil) in this column preceded by an asterisk (\*).

†Method of determining water production: Shake out..... Estimate..... Draw off.....

(OVER)

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
1	0	0	0	0	NA	0	6

**GAS**

MCF used on lease.....0..... Used for Gas Lift  
MCF sold.....0..... MCF used on lease.  
MCF blown to air (difference).....0..... MCF used on.....lease.  
Gas Purchaser.....NA..... MCF used on.....lease.

**SUMMARY**

Barrels oil produced and marketed during month.....-0-  
Tax at \$<sup>0.05</sup> per barrel . . . . . \$ -0-  
MCF gas produced and marketed during month.....  
Tax at \$<sup>0.05</sup> per 50,000 MCF . . . . . \$ .....  
Total tax monies remitted herewith to State Treasurer . . . . . \$ -0-

Remarks:

**It is anticipated this well will be shut-in until March 1986.**

I hereby certify that the information given herewith is true, correct and complete.

Name.....**Daryl Knauss** *D. Knauss*  
Position.....**Manager, Excise Tax Dept.**  
Telephone.....**(419) 422-2121 Ext. 3887**  
Date.....**January 31**....., 19**86**

INSTRUCTIONS: Prepare in quadruplicate. First two copies to Division of Mineral Resources. Next copy to State Treasurer, Carson City, Nevada with remittance. Last copy for your file.

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This report to be filed by the end of the month following the month herein reported.

Company..... Address.....

Lease..... **Marathon Oil Company** ..... County..... **539 S. Main St., Findlay, OH. 45840**

Well No.	Permit No.	LOCATION			OIL AND WATER (BBLs.)				GAS			Status: Flowing, Pumping, Gas Lift, etc.	
		Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod.†	Tot. gas Prod. MCF	Gas-oil ratio	Date of test		No. days prod.
1	241	26	10N	57E	0	0		0	0	0	0	0	Shut-In

TOTALS

\* Report distillate, condensate or other liquid hydrocarbons (other than oil) in this column preceded by an asterisk (\*).

† Method of determining water production: Shake out..... Estimate..... Draw off.....

(OVER)

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
1	0	0	0	0	NA	0	6

**GAS**

MCF used on lease..... 0 ..... Used for Gas Lift  
MCF sold..... 0 ..... 0 MCF used on lease.  
MCF blown to air (difference)..... 0 ..... 0 MCF used on..... lease.  
Gas Purchaser..... NA ..... 0 MCF used on..... lease.

**SUMMARY**

Barrels oil produced and marketed during month..... 0  
Tax at ~~0.05~~ <sup>\$0.05</sup> per barrel . . . . . \$ 0.00  
MCF gas produced and marketed during month.....  
Tax at ~~0.05~~ <sup>\$0.05</sup> per 50,000 MCF . . . . . \$ 0.00  
Total tax monies remitted herewith to State Treasurer . . . . . \$ 0.00

Remarks: **It is anticipated this well will be shut-in until March 1986.**

I hereby certify that the information given herewith is true, correct and complete.

Name..... **Daryl Knauss** *D.Knauss*  
Position..... **Manager, Excise Tax Dept.**  
Telephone..... **(419) 422-2121 Ext. 3887**  
Date..... **December 31** ....., 19**85**

INSTRUCTIONS: Prepare in quadruplicate. First two copies to Division of Mineral Resources. Next copy to State Treasurer, Carson City, Nevada with remittance. Last copy for your file.

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**PRODUCER'S MONTHLY REPORT**

This report to be filed by the end of the month following the month herein reported.

Company Marathon Oil Company Address P.O. Box 2659, Casper, WY 82602  
Undesignated  
 Lease Currant Pool Sheep Pass County Nye Month of September, 1985

LOCATION					OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
Well No.	Permit No.	Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod.†	Tot. gas Prod. MCF.	Gas-oil ratio	Date of test		
1	241	26	10N	57E	0	0		0	0	0		0	Shut-In
TOTALS													

\* Report distillate, condensate or other liquid hydrocarbons (other than oil) in this column preceded by an asterisk (\*).

† Method of determining water production: Shake out..... Estimate..... Draw off.....

(OVER)

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### PRODUCER'S MONTHLY REPORT

This report to be filed by the end of the month following the month herein reported.

Company Marathon Oil Company Address P.O. Box 2659, Casper, WY 82602  
Undesignated  
 Lease Currant Pool Sheep Pass County Nye Month of August, 19 85

Well No.	Permit No.	LOCATION			OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
		Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod.†	Tot. gas Prod. MCF.	Gas-oil ratio	Date of test		
1	241	26	10N	57E	0	0		0	0	0		0	Shut-In
TOTALS													

\*Report distillate, condensate or other liquid hydrocarbons (other than oil) in this column preceded by an asterisk (\*).

†Method of determining water production: Shake out.....Estimate.....Draw off.....

(OVER)

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RECEIVED  
 AUG 22 1985

DEPT. OF METALS

**PRODUCER'S MONTHLY REPORT**

This report to be filed by the end of the month following the month herein reported.

Company Marathon Oil Company Address P.O. Box 2659, Casper, WY 82602  
Undesignated  
 Lease Currant Pool Sheep Pass County Nye Month of July, 19 85

Well No.	Permit No.	LOCATION			OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
		Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod.†	Tot. gas Prod. MCF	Gas-oil ratio	Date of test		
1	241	26	10N	57E	0	0		0	0	0		0	Shut-In
TOTALS													

\*Report distillate, condensate or other liquid hydrocarbons (other than oil) in this column preceded by an asterisk (\*).

†Method of determining water production: Shake out.....Estimate.....Draw off.....

(OVER)

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
			0	0	NA		

**GAS**

MCF used on lease..... 0

MCF sold..... 0

MCF blown to air (difference) 0

Gas Purchaser..... NA

Used for Gas Lift

..... 0 MCF used on lease.

..... 0 MCF used on..... lease.

..... 0 MCF used on..... lease.

**SUMMARY**

Barrels oil produced and marketed during month..... 0

Tax at ~~\$0.05~~ <sup>\$0.05</sup> per barrel ..... \$ 0.00

MCF gas produced and marketed during month.....

Tax at ~~\$0.005~~ <sup>\$0.05</sup> per 50,000 MCF ..... \$ 0.00

Total tax monies remitted herewith to State Treasurer ..... \$ 0.00

Remarks:

I hereby certify that the information given herewith is true, correct and complete.

Name..... Kenneth A. Schenck

Position..... Advanced Accountant

Telephone..... (307) 577-1555 Ext. 252

Date..... August 19....., 19.85

INSTRUCTIONS: Prepare in quadruplicate. First two copies to Division of Mineral Resources. Next copy to State Treasurer, Carson City, Nevada with remittance. Last copy for your file.



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**PRODUCER'S MONTHLY REPORT**

This report to be filed by the end of the month following the month herein reported.

Company Marathon Oil Company Address P.O. Box 2659, Casper, WY 82602  
Undesignated  
 Lease Currant Pool Sheep Pass County Nye Month of June, 19 85

LOCATION					OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
Well No.	Permit No.	Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod. †	Tot. gas Prod. MCF	Gas-oil ratio	Date of test		
1	241	26	10N	57E	0	0		0	0	0		0	Shut-In

TOTALS

\*Report distillate, condensate or other liquid hydrocarbons (other than oil) in this column preceded by an asterisk (\*).

†Method of determining water production: Shake out.....Estimate.....Draw off.....

(OVER)

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
			0	0	NA		

**GAS**

MCF used on lease..... 0 ..... Used for Gas Lift

MCF sold..... 0 ..... MCF used on lease.

MCF blown to air (difference) 0 ..... MCF used on..... lease.

Gas Purchaser..... NA ..... MCF used on..... lease.

**SUMMARY**

Barrels oil produced and marketed during month..... 0

Tax at ~~0.05~~ <sup>\$0.05</sup> per barrel . . . . . \$..... 0.00

MCF gas produced and marketed during month.....

Tax at ~~0.005~~ <sup>\$0.05</sup> per 50,000 MCF . . . . . \$..... 0.00

Total tax monies remitted herewith to State Treasurer . . . . . \$..... 0.00

Remarks:

I hereby certify that the information given herewith is true, correct and complete.

Name..... Kenneth A. Schenck .....

Position..... Advanced Accountant .....

Telephone..... (307) 577-1555 Ext. 252 .....

Date..... July 10 ....., 19 85 .....

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Company Marathon Oil Company Address P.O. Box 2659, Casper, WY 82602  
Undesignated  
 Lease Currant Pool Sheep Pass County Nye Month of May, 1985

LOCATION					OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
Well No.	Permit No.	Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod.†	Tot. gas Prod. MCF	Gas-oil ratio	Date of test		
1	241	26	10N	57E	0	0		0	0	0		0	Shut-In
TOTALS													

\*Report distillate, condensate or other liquid hydrocarbons (other than oil) in this column preceded by an asterisk (\*).

†Method of determining water production: Shake out.....Estimate.....Draw off.....

(OVER)

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
			0	0	NA		

**GAS**

MCF used on lease..... 0 ..... Used for Gas Lift

MCF sold..... 0 ..... 0 MCF used on lease.

MCF blown to air (difference) 0 ..... 0 MCF used on..... lease.

Gas Purchaser..... NA ..... 0 MCF used on..... lease.

**SUMMARY**

Barrels oil produced and marketed during month..... 0

    Tax at ~~0.05~~ per barrel ..... \$ 0.00

MCF gas produced and marketed during month.....

    Tax at ~~0.005~~ per 50,000 MCF ..... \$ 0.00

Total tax monies remitted herewith to State Treasurer ..... \$ 0.00

Remarks:

I hereby certify that the information given herewith is true, correct and complete.

Name..... Kenneth A. Schenck

Position..... Advanced Accountant

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Date..... July 10 ..... 19 85

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Company Marathon Oil Company Address P.O. Box 2659, Casper, WY 82602  
Undesignated  
 Lease Currant Pool Sheep Pass County Nye Month of April, 1985

LOCATION					OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
Well No.	Permit No.	Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod.†	Tot. gas Prod. MCF	Gas-oil ratio	Date of test		
1	241	26	10N	57E	0	0		0	0	0		0	Shut-In
TOTALS													

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†Method of determining water production: Shake out.....Estimate.....Draw off.....

(OVER)

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
			0	0	NA		

**GAS**

MCF used on lease.....0.....  
MCF sold.....0.....  
MCF blown to air (difference)0.....  
Gas Purchaser.....NA.....

Used for Gas Lift

.....0.....MCF used on lease.  
.....0.....MCF used on.....lease.  
.....0.....MCF used on.....lease.

**SUMMARY**

Barrels oil produced and marketed during month.....0.....  
Tax at ~~\$0.05~~ <sup>\$0.05</sup> per barrel ..... \$ 0.00

MCF gas produced and marketed during month.....  
Tax at ~~\$0.05~~ <sup>\$0.05</sup> per 50,000 MCF ..... \$ 0.00

Total tax monies remitted herewith to State Treasurer ..... \$ 0.00

Remarks:

I hereby certify that the information given herewith is true, correct and complete.

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Position..... Advanced Accountant.....  
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Company Marathon Oil Company Address P.O. Box 2659, Casper, WY 82602  
Undesignated  
 Lease Currant Pool Sheep Pass County Nye Month of March, 1985

LOCATION					OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
Well No.	Permit No.	Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod.†	Tot. gas Prod. MCF	Gas-oil ratio	Date of test		
1	241	26	10N	57E	0	0		0	0	0		0	Shut-In
TOTALS													

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(OVER)

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
			0	0	NA		

**GAS**

MCF used on lease..... 0 ..... Used for Gas Lift

MCF sold..... 0 ..... 0 MCF used on lease.

MCF blown to air (difference) 0 ..... 0 MCF used on..... lease.

Gas Purchaser..... NA ..... 0 MCF used on..... lease.

**SUMMARY**

Barrels oil produced and marketed during month..... 0

    Tax at ~~0.00~~<sup>0.05</sup> per barrel . . . . . \$..... 0.00

MCF gas produced and marketed during month.....

    Tax at ~~0.005~~<sup>0.05</sup> per 50,000 MCF . . . . . \$..... 0.00

Total tax monies remitted herewith to State Treasurer . . . . . \$..... 0.00

Remarks:

I hereby certify that the information given herewith is true, correct and complete.

Name..... Kenneth A. Schenck

Position..... Advanced Accountant

Telephone..... (307) 577-1555 Ext. 252

Date..... July 10, 19 85

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Company Marathon Oil Company Address P.O. Box 2659, Casper, WY 82602  
Undesignated  
 Lease Currant Pool Sheep Pass County Nye Month of February, 1985

LOCATION					OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
Well No.	Permit No.	Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod.†	Tot. gas Prod. MCF	Gas-oil ratio	Date of test		
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(OVER)

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No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
			0	0	NA		

**GAS**

MCF used on lease.....0.....  
MCF sold.....0.....  
MCF blown to air (difference) 0.....  
Gas Purchaser.....NA.....

Used for Gas Lift

.....0.....MCF used on lease.  
.....0.....MCF used on.....lease.  
.....0.....MCF used on.....lease.

**SUMMARY**

Barrels oil produced and marketed during month.....0.....  
Tax at ~~\$0.05~~ <sup>\$0.05</sup> per barrel . . . . . \$.....0.00

MCF gas produced and marketed during month.....  
Tax at ~~\$0.005~~ <sup>\$0.05</sup> per 50,000 MCF . . . . . \$.....0.00

Total tax monies remitted herewith to State Treasurer . . . . . \$.....0.00

Remarks:

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Name..... Kenneth A. Schenck .....

Position..... Advanced Accountant .....

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Company Marathon Oil Company Address P.O. Box 2659, Casper, WY 82602  
Undesignated  
 Lease Currant Pool Sheep Pass County Nye Month of January, 1985

LOCATION					OIL AND WATER (BBLs.)				GAS			No. days prod.	Status: Flowing, Pumping, Gas Lift, etc.
Well No.	Permit No.	Sec.	Twp.	Rge.	Net oil prod.*	Net oil sold*	Grav.	Water Prod. †	Tot. gas Prod. MCF	Gas-oil ratio	Date of test		
1	241	26	10N	57E	0	0		0	0	0		0	Shut-In
TOTALS													

\*Report distillate, condensate or other liquid hydrocarbons (other than oil) in this column preceded by an asterisk (\*).

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(OVER)

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbbs. to pipeline	Bbbs. to truck or R.R.	Name of transporter		
			0	0	NA		

**GAS**

MCF used on lease.....0.....  
MCF sold.....0.....  
MCF blown to air (difference)0.....  
Gas Purchaser.....NA.....

Used for Gas Lift  
.....0.....MCF used on lease.  
.....0.....MCF used on.....lease.  
.....0.....MCF used on.....lease.

**SUMMARY**

Barrels oil produced and marketed during month.....0.....  
Tax at ~~\$0.07~~ <sup>\$0.05</sup> per barrel . . . . . \$.....0.00

MCF gas produced and marketed during month.....  
Tax at ~~\$0.005~~ <sup>\$0.005</sup> per 50,000 MCF . . . . . \$.....0.00

Total tax monies remitted herewith to State Treasurer . . . . . \$.....0.00

Remarks:

I hereby certify that the information given herewith is true, correct and complete.

Name..... Kenneth A. Schenck .....

Position..... Advanced Accountant .....

Telephone..... (307) 577-1555 Ext. 252 .....

Date..... July 10 ....., 19 85 .....

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