

State of Nevada
 Department of Minerals
 400 W. King Street, Suite 106
 Carson City, Nevada 89703
 Telephone (702) 687-5050

RECEIVED

JAN 23 2006

Division of Minerals

PRODUCER'S MONTHLY REPORT

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

Company: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: _____ Pool: Currant County: Nye Month of: December 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E | 0.00 | 0.00 | 0 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 75 | 0 0.00 | | 0 0.00 | | 75.00 | |

GAS

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

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

SUMMARY

| | |
|---|--------|
| Barrels of oil produced and marketed during month _____ | 0.00 |
| Tax at \$0.10 per barrel _____ | \$0.00 |
| MCF Gas produced and marketed during month _____ | 0.00 |
| Tax at \$0.10 per barrel _____ | \$0.00 |

Total tax monies remitted herewith to Department of Minerals _____ \$ _____

Remarks:

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

Name: *M. H. Pourkashaf*
Max Pourkashaf

Position: Production Accounting

Telephone: (714) 939-7560

Date: 20-Jan ,2006

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals with remittance. Last copy for your file.

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DEC 29 2005

PRODUCER'S MONTHLY REPORT

Division of Minerals

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

Company: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: _____ Pool: Currant County: Nye Month of: November 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E | 0.00 | 0.00 | 0 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbbs to Pipeline | Bbbs to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 75 | 0 0.00 | | 0 0.00 | | 75.00 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ -

Remarks:

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

Name: Max Pourkashet

Max Pourkashet

Position: Production Accounting

Telephone: (714) 939-7560

Date: 22-Oct, 2005

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals with remittance. Last copy for your file.

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NOV 21 2005

PRODUCER'S MONTHLY REPORT

Division of Minerals

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

Company: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: Pool: Currant County: Nye Month of: October 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E | 0.00 | 0.00 | 0 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 75 | 0 0.00 | | 0 0.00 | | 75.00 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ _____

Remarks:

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

Name: *Max Pourkashef*
Max Pourkashef

Position: Production Accounting

Telephone: (714) 939-7560

Date: 22-Oct, 2005

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals with remittance. Last copy for your file.

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OCT 26 2005

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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: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: _____ Pool: Curreant County: Nye Month of: September 2005

| 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 | | |
| Curreant # 1 | 241 | 26 | 10N | 57E | 0.00 | 0.00 | 0 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 75 | 0 0.00 | | 0 0.00 | | 75.00 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ _____

Remarks:

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

Name: *Max Pourkashef*
Max Pourkashef

Position: Production Accounting

Telephone: (714) 939-7560

Date: 20-Sep , 2005

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Division of Minerals

PRODUCER'S MONTHLY REPORT

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

Company: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: _____ Pool: Currant County: Nye Month of: August 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E | 0.00 | 0.00 | 0 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 75 | 0 0.00 | | 0 0.00 | | 75.00 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ _____

Remarks:

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

Name: Max Pourkashef
Max Pourkashef

Position: Production Accounting

Telephone: (714) 939-7560

Date: 25-Aug, 2005

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals with remittance. Last copy for your file.

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AUG 29 2005

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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: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: _____ Pool: Currant County: Nye Month of: JULY 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E * | 2.00 | 0.00 | 0 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 2.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbis to Pipeline | Bbis to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 73 | 0 2.00 | | 0 0.00 | | 75.00 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ -

Remarks:

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

Name: *Max Pourkashef*
Max Pourkashef

Position: Production Accounting

Telephone: (714) 939-7560

Date: 25-Jul, 2005

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals 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: MAKOIL, INC.

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: _____ Pool: Currant County: Nye Month of: JUNE 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E* | 0.00 | 0.00 | 0 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 73 | 0 0.00 | | 0 0.00 | | 73.00 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ _____

Remarks:

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

Name: Max Pourkashef
Max Pourkashef

Position: Production Accounting

Telephone: (714) 939-7560

Date: 25-Jul, 2005

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals with remittance.
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JUN 30 2005

Division of Minerals

PRODUCER'S MONTHLY REPORT

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

Company: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: Pool: Currant County: Nye Month of: MAY 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E* | 1.00 | 0.00 | 0 | 0 | 0 | | | 1 | DOWN MECH. |
| TOTALS | | | | | 1.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 72 | 0 1.00 | | 0 0.00 | | 73.00 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ _____

Remarks:

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

Name: *Max Pourkashef*
Max Pourkashef

Position: Production Accounting

Telephone: (714) 939-7560

Date: 23-Jun, 2005

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals with remittance.
Last copy for your file.

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MAY 31 2005

PRODUCER'S MONTHLY REPORT

Division of Minerals

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

Company: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: _____ Pool: Currant County: Nye Month of: April 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E | 0.00 | 0.00 | 29 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 72 | 0 0.00 | | 0 0.00 | | 72 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ _____

Remarks:

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

Name: Max Pourkashef


Position: Production Accounting

Telephone: (714) 939-7560

Date: 23-May, 2005

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals 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.

Division of Minerals

Company: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: Pool: Currant County: Nye Month of: March 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E | 0.00 | 0.00 | 29 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 72 | 0 0.00 | | 0 0.00 | | 72 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ _____

Remarks:

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Name: Max Pourkashef
Max Pourkashef

Position: Production Accounting

Telephone: (714) 939-7560

Date: 26-Apr, 2005

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Company: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: _____ Pool: Currant County: Nye Month of: February 2005

| 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 | | |
| Currant # 1 | 241 | 26 | 10N | 57E | 0.00 | 0.00 | 29 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 72 | 0 0.00 | | 0 0.00 | | 72 | |

GAS

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

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

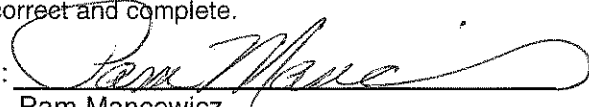
SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
 Tax at \$0.10 per barrel _____ \$0.00
 MCF Gas produced and marketed during month _____ 0.00
 Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ -

Remarks:

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

Name: 
 Pam Mancewicz

Position: Production Accounting

Telephone: (714) 939-7560

Date: 14-Mar, 2005

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals with remittance. Last copy for your file.

State of Nevada
 Department of Minerals
 400 W. King Street, Suite 106
 Carson City, Nevada 89703
 Telephone (702) 687-5050

RECEIVED

FEB 22 2005

Division of Minerals

PRODUCER'S MONTHLY REPORT

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

Company: **MAKOIL, INC.**

Address: 500 N. Rainbow Blvd., Suite 300
Las Vegas, NV 89107

Lease: _____ Pool: Curreant County: Nye Month of: January 2005

| 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 | | |
| Curreant # 1 | 241 | 26 | 10N | 57E | 0.00 | 0.00 | 29 | 0 | 0 | | | 0 | DOWN MECH. |
| TOTALS | | | | | 0.00 | 0.00 | | 0 | | | | | |

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 _____

(The following report is on a lease basis.)

| No. of Wells | Total amount of oil on lease at beginning of month | Actual oil Produced | Disposition of Oil | | | Total amount of oil on lease | Total amt. Lease Tank Capacity |
|--------------|--|---------------------|--------------------|-----------------------|---------------------|------------------------------|--------------------------------|
| | | | Bbls to Pipeline | Bbls to Truck or R.R. | Name of Transporter | | |
| 1 | DILUENT ADDED 72 | 0 0.00 | | 0 0.00 | | 72 | |

GAS

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

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

SUMMARY

Barrels of oil produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00
MCF Gas produced and marketed during month _____ 0.00
Tax at \$0.10 per barrel _____ \$0.00

Total tax monies remitted herewith to Department of Minerals _____ \$ _____

Remarks:

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

Name: _____


Pam Mancewicz

Position: Production Accounting

Telephone: (714) 939-7560

Date: 17-Feb, 2005

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals with remittance. Last copy for your file.