

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

RECEIVED

FEB 03 2003

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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: December ,2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	993.57	1073.37	26	20473	0			31	POW
TOTALS					993.57	1073.37		20473					

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	319.3	993.57	1073.37		IMTN, Crysen Petro Source	239.5	

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 _____ 1,073.37
Tax at \$0.10 per barrel _____ \$107.34
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 _____ \$ 107.34

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: 23-Jan, 2003

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

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Company: **MAKOIL, INC.**

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

Lease: _____ Pool: Grant Canyon County: Nye Month of: December ,2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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*
Pam Mancewicz

Position: Production Accounting

Telephone: (714) 939-7560

Date: 23-Jan, 2003

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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: NVN 53719

Pool: Grant Canyon

County: Nye

Month of: December, 2002

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			
9	642	21	7N	57E	6028.64	5938.54	26	16702	0			31	POW	
TOTALS					6028.64	5938.54		16702						

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	397	6028.64	5938.54		IMTN, Crysen Petro Source	487.1	

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 _____ 5,938.54
Tax at \$0.10 per barrel _____ \$593.85
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 _____ \$ 593.85

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: 23-Jan, 2003

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DEC 26 2002

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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: November ,2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	984.33	967.63	26	19613	0			30	POW
TOTALS					984.33	967.63		19613					

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	302.6	984.33	967.63		IMTN, Crysen Petro Source	319.3	

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 _____ 967.63
Tax at \$0.10 per barrel _____ \$96.76
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 _____ \$ 96.76

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: 19-Dec, 2002

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

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Company: MAKOIL, INC.

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

Lease: _____ Pool: Grant Canyon County: Nye Month of: November ,2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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.

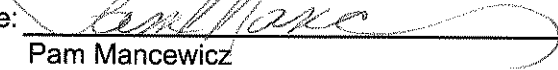
SUMMARY

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: 19-Dec, 2002

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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: NVN 53719

Pool: Grant Canyon

County: Nye

Month of: November, 2002

Location					Oil and Water (BBL.S.)				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		
9	642	21	7N	57E	5887.51	5866.91	26	16126	0			30	POW
TOTALS					5887.51	5866.91		16126					

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	376.4	5887.51	5866.91		IMTN, Crysen Petro Source	397	

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 _____ 5,866.91
Tax at \$0.10 per barrel _____ \$586.69
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 _____ \$ 586.69

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: 19-Dec, 2002

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DEC 02 2002

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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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: October ,2002

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		
3	375	16	7N	57E	0.00	0.00		0				0	TA
22-21	705	21	7N	57E	991.22	1067.12	26	19909	0			31	POW
TOTALS					991.22	1067.12		19909					

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	378.5	991.22	1067.12		IMTN, Crysen Petro Source	302.6	

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 _____ 1,067.12
Tax at \$0.10 per barrel _____ \$106.71
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 _____ \$ 106.71

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: 20-Nov, 2002

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

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Company: MAKOIL, INC.

Address: 500 N. Rainbow Blvd., Suite 300
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Lease: _____ Pool: Grant Canyon County: Nye Month of: October ,2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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.

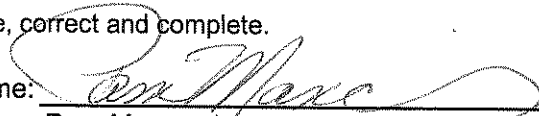
SUMMARY

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: 20-Nov , 2002

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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: NVN 53719

Pool: Grant Canyon County: Nye

Month of: October ,2002

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		
9	642	21	7N	57E	6111.41	6128.11	26	16818	0			31	POW
TOTALS					6111.41	6128.11		16818					

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	393.1	6111.41	6128.11		IMTN, Crysen Petro Source	376.4	

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 _____ 6,128.11
Tax at \$0.10 per barrel _____ \$612.81
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 _____ \$ 612.81

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: 20-Nov, 2002

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

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OCT 31 2002

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PRODUCER'S MONTHLY REPORT

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Company: **MAKOIL, INC.**

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

Lease: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: September ,2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	984.96	839.46	26	19355	0			30	POW
TOTALS					984.96	839.46		19355					

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	233	984.96	839.46		IMTN, Crysen Petro Source	378.5	

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 _____ 839.46
Tax at \$0.10 per barrel _____ \$83.95
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 _____ \$ 83.95

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: 21-Oct, 2002

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

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OCT 31 2002

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PRODUCER'S MONTHLY REPORT

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Company: MAKOIL, INC.

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

Lease: _____ Pool: Grant Canyon County: Nye Month of: September, 2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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.

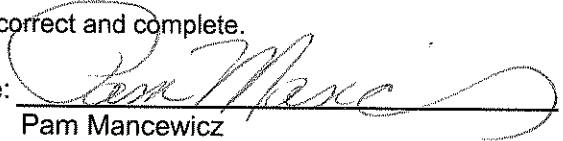
SUMMARY

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

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: 21-Oct, 2002

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

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OCT 31 2002

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: NVN 53719

Pool: Grant Canyon County: Nye

Month of: September, 2002

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		
9	642	21	7N	57E	5942.49	5916.69	26	16043	0			30	POW
TOTALS					5942.49	5916.69		16043					

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	367.3	5942.49	5916.69		IMTN, Crysen Petro Source	393.1	

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 _____ 5,916.69
Tax at \$0.10 per barrel _____ \$591.67
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 _____ \$ 591.67

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: 21-Oct, 2002

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

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 Department of Minerals
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SEP 30 2002

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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: August ,2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	1017.02	1093.02	26	19894	0			31	POW
TOTALS					1017.02	1093.02		19894					

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	309	1017.02	1093.02		IMTN, Crysen Petro Source	233	

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 _____ 1,093.02
Tax at \$0.10 per barrel _____ \$109.30
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 _____ \$ 109.30

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: 23-Sep, 2002

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

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SEP 30 2002

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: Grant Canyon County: Nye Month of: August, 2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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*
Pam Mancewicz

Position: Production Accounting

Telephone: (714) 939-7560

Date: 23-Sep, 2002

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

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SEP 30 2002

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: NVN 53719

Pool: Grant Canyon County: Nye

Month of: August, 2002

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		
9	642	21	7N	57E	6185.66	6201.16	26	16656	0			31	POW
TOTALS					6185.66	6201.16		16656					

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	382.8	6185.66	6201.16		IMTN, Crysen Petro Source	367.3	

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 _____ 6,201.16
Tax at \$0.10 per barrel _____ \$620.12
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 _____ \$ 620.12

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: 23-Sep, 2002

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

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AUG 28 2002

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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: July ,2002

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		
3	375	16	7N	57E	0.00	0.00		0				0	TA
22-21	705	21	7N	57E	1028.04	1013.84	26	20062	0			31	POW
TOTALS					1028.04	1013.84		20062					

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	294.8	1028.04	1013.84		IMTN, Crysen Petro Source	309	

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 _____ 1,013.84
Tax at \$0.10 per barrel _____ \$101.38
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 _____ \$ 101.38

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: 20-Aug, 2002

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

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AUG 28 2002

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: Grant Canyon County: Nye Month of: July ,2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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.

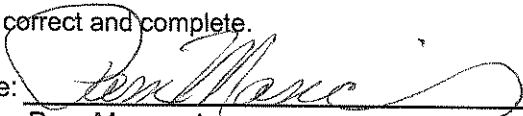
SUMMARY

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: 20-Aug , 2002

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

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AUG 28 2002

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: NVN 53719 Pool: Grant Canyon County: Nye Month of: July ,2002

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		
9	642	21	7N	57E	6217.40	6221.30	26	16799	0			31	POW
TOTALS					6217.40	6221.30		16799					

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	386.7	6217.40	6221.30		IMTN, Crysen Petro Source	382.8	

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 _____ 6,221.30
Tax at \$0.10 per barrel _____ \$622.13
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 _____ \$ 622.13

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: 20-Aug, 2002

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

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 Department of Minerals
 400 W. King Street, Suite 106
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JUL 29 2002

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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: June ,2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	1002.87	926.87	26	18783	0			30	POW
TOTALS					1002.87	926.87		18783					

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	218.8	1002.87	926.87		IMTN, Crysen Petro Source	294.8	

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 _____ 926.87
Tax at \$0.10 per barrel _____ \$92.69
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 _____ \$ 92.69

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: 22-Jul, 2002

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

JUL 29 2002

PRODUCER'S MONTHLY REPORT

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: Grant Canyon County: Nye Month of: June ,2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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
Pam Mancewicz

Position: Production Accounting

Telephone: (714) 939-7560

Date: 22-Jul , 2002

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

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JUL 29 2002

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: NVN 53719

Pool: Grant Canyon County: Nye

Month of: June 2002

Location					Oil and Water (BBL.S.)				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		
9	642	21	7N	57E	6059.73	6108.63	26	16693	0			30	POW
TOTALS					6059.73	6108.63		16693					

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	435.6	6059.73	6108.63		IMTN, Crysen Petro Source	386.7	

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 _____ 6,108.63
Tax at \$0.10 per barrel _____ \$610.86
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 _____ \$ 610.86

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: 22-Jul, 2002

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

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JUN 27 2002

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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: May ,2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	1028.90	1045.70	26	19816	0			31	POW
TOTALS					1028.90	1045.70		19816					

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	235.6	1028.90	1045.70		IMTN, Crysen Petro Source	218.8	

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 _____ 1,045.70
Tax at \$0.10 per barrel _____ \$104.57
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 _____ \$ 104.57

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: 21-Jun, 2002

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

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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: Grant Canyon County: Nye Month of: May ,2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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: 21-Jun, 2002

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

JUN 27 2002

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: NVN 53719

Pool: Grant Canyon

County: Nye

Month of:

May

,2002

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		
9	642	21	7N	57E	6320.21	6284.21	26	17484	0			31	POW
TOTALS					6320.21	6284.21		17484					

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	399.6	6320.21	6284.21		IMTN, Crysen Petro Source	435.6	

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 _____ 6,284.21
Tax at \$0.10 per barrel _____ \$628.42
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 _____ \$ 628.42

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: 21-Jun , 2002

**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

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MAY 28 2002

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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: April ,2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	1003.55	977.75	26	19362	0			30	POW
TOTALS					1003.55	977.75		19362					

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	209.8	1003.55	977.75		IMTN, Crysen Petro Source	235.6	

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 _____ 977.75
Tax at \$0.10 per barrel _____ \$97.78
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 _____ \$ 97.78

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: 21-May, 2002

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

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MAY 28 2002

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: Grant Canyon County: Nye Month of: April ,2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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: 21-May, 2002

INSTRUCTIONS: Prepare in quadruplicate. First three copies to Department of Minerals with remittance.
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MAY 28 2002

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: NVN 53719

Pool: Grant Canyon County: Nye

Month of: April, 2002

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		
9	642	21	7N	57E	6141.66	6175.06	26	16805	0			30	POW
TOTALS					6141.66	6175.06		16805					

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	433	6141.66	6175.06		IMTN, Crysen Petro Source	399.6	

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.

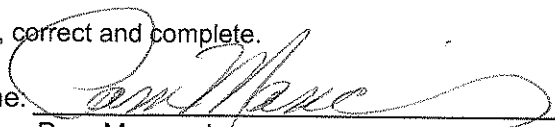
SUMMARY

Barrels of oil produced and marketed during month _____ 6,175.06
Tax at \$0.10 per barrel _____ \$617.51
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 _____ \$ 617.51

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: 21-May, 2002

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

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APR 29 2002

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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: March ,2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	1049.63	1057.43	26	19887	0			31	POW
TOTALS					1049.63	1057.43		19887					

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	217.6	1049.63	1057.43		IMTN, Crysden Petro Source	209.8	

GAS

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

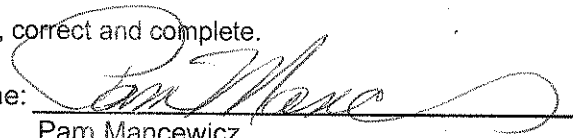
Used for Gas Lift
_____ MCF used on lease.
_____ MCF used on _____ lease.
_____ MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month _____	1,057.43
Tax at \$0.10 per barrel _____	\$105.74
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 _____	\$ 105.74

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: 24-Apr , 2002

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

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APR 29 2002

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: Grant Canyon County: Nye Month of: March ,2002

Location					Oil and Water (BBL.S.)				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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

GAS

MCF used on lease 0 Used for Gas Lift
 MCF sold _____ MCF used on lease.
 MCF blown to air (difference) _____ MCF used on _____ lease.
 Gas Purchaser _____ 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: 24-Apr , 2002

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
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APR 29 2002

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: NVN 53719 Pool: Grant Canyon County: Nye Month of: March ,2002

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		
9	642	21	7N	57E	6411.17	6377.77	26	17158	0			31	POW
TOTALS					6411.17	6377.77		17158					

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	399.6	6411.17	6377.77		IMTN, Crysen Petro Source	433	

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.

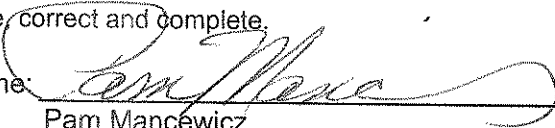
SUMMARY

Barrels of oil produced and marketed during month _____	6,377.77
Tax at \$0.10 per barrel _____	<u>\$637.78</u>
MCF Gas produced and marketed during month _____	0.00
Tax at \$0.10 per barrel _____	<u>\$0.00</u>

Total tax monies remitted herewith to Department of Minerals _____ \$ 637.78

Remarks:

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

Name: 
Pam Mancéwicz

Position: Production Accounting

Telephone: (714) 939-7560

Date: 24-Apr, 2002

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

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MAR 27 2002

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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: February ,2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	954.81	1030.71	26	17983	0			28	POW
TOTALS					954.81	1030.71		17983					

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	Bbbs to Pipeline	Disposition of Oil Bbbs to Truck or R.R.	Name of Transporter	Total amount of oil on lease	Total amt. Lease Tank Capacity
1	293.5	954.81	1030.71		IMTN, Crysen Petro Source	217.6	

GAS

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

SUMMARY

Barrels of oil produced and marketed during month _____	1,030.71
Tax at \$0.10 per barrel _____	\$103.07
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 _____	\$ 103.07

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:

20-Mar , 2002

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
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MAR 27 2002

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: Grant Canyon County: Nye Month of: February, 2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	Bbbs to Pipeline	Disposition of Oil Bbbs to Truck or R.R.	Name of Transporter	Total amount of oil on lease	Total amt. Lease Tank Capacity
1	0	0		0		0	

GAS

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

20-Mar , 2002

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

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 Telephone (702) 687-5050

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MAR 27 2002

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: NVN 53719

Pool: Grant Canyon County: Nye

Month of: February, 2002

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		
9	642	21	7N	57E	5829.74	5846.44	26	15466	0			28	POW
TOTALS					5829.74	5846.44		15466					

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	Bbbs to Pipeline	Disposition of Oil Bbbs to Truck or R.R.	Name of Transporter IMTN, Crysen Petro Source	Total amount of oil on lease	Total amt. Lease Tank Capacity
1	416.3	5829.74	5846.44			399.6	

GAS

MCF used on lease	<u>0</u>	Used for Gas Lift
MCF sold	_____	_____ MCF used on lease.
MCF blown to air (difference)	_____	_____ MCF used on _____ lease.
Gas Purchaser	_____	_____ MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month	_____	5,846.44
Tax at \$0.10 per barrel	_____	\$584.64
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	_____	\$ 584.64

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:

20-Mar , 2002

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

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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: GRANT CANYON UNIT Pool: Grant Canyon County: Nye Month of: January, 2002

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		
3	375	16	7N	57E	0.00	0.00		0	0			0	TA
22-21	705	21	7N	57E	1057.69	1002.39	26	19965	0			31	POW
TOTALS					1057.69	1002.39		19965					

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	238.2	1057.69	1002.39		IMTN, Crysen Petro Source	293.5	

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 _____	1,002.39
Tax at \$0.10 per barrel _____	\$100.24
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 _____ \$ 100.24

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: 20-Feb, 2002

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 27 2002

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: Grant Canyon County: Nye Month of: January, 2002

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		
7	625	21	4N	57E	0.00	0.00		0	0			0	TA
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	0	0		0		0	

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.

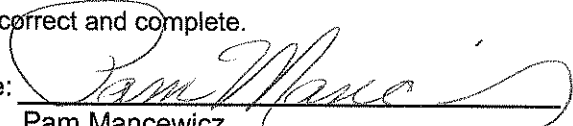
SUMMARY

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: 20-Feb , 2002

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PRODUCER'S MONTHLY REPORT

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: NVN 53719

Pool: Grant Canyon County: Nye

Month of: January, 2002

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		
9	642	21	7N	57E	6489.92	6477.02	26	17152	0			31	POW
TOTALS					6489.92	6477.02		17152					

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	403.4	6489.92	6477.02		IMTN, Crysen Petro Source	416.3	

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 _____ 6,477.02
Tax at \$0.10 per barrel _____ \$647.70
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 _____ \$ 647.70

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: 20-Feb, 2002

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