

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

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JAN 24 2007

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 42341

Pool: Kate Springs

County: Nye

Month of: December

2006

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		
12-2	544	02	8N	57E	950.15	1180.95	18.2	9108	190	0.2		31	POW
TOTALS					950.15	1180.95		9108	190				

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	554.5	950.15	-398.83	1579.78	Foreland	323.7	

GAS

MCF used on lease _____	190	Used for Gas Lift
MCF sold _____	0	0 _____ MCF used on lease.
MCF blown to air (difference) _____	0	0 _____ MCF used on _____ lease.
Gas Purchaser _____	N/A	0 _____ MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month _____	1,180.95
Tax at \$0.10 per barrel _____	\$118.10
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 _____	\$ 118.10

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: 16-Jan ,2006

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

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 42341

Pool: Kate Springs

County: Nye

Month of:

November

2006

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		
12-2	544	02	8N	57E	803.29	738.69	18.8	8460	161	0.2		30	POW
TOTALS					803.29	738.69		8460	161				

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	489.9	803.29	-540.45	1279.14	Foreland	554.5	

GAS

MCF used on lease _____	161	Used for Gas Lift	
MCF sold _____	0	0 _____ MCF used on lease.	
MCF blown to air (difference) _____	0	0 _____ MCF used on _____ lease.	
Gas Purchaser _____	N/A	0 _____ MCF used on _____ lease.	

SUMMARY

Barrels of oil produced and marketed during month _____	738.69
Tax at \$0.10 per barrel _____	\$73.87
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 _____ \$ 73.87

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: 13-Dec ,2006

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

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NOV 20 2006

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 42341 Pool: Kate Springs County: Nye Month of: October 2006

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		
12-2	544	02	8N	57E	797.00	823.30	19	8767	159	0.2		31	POW
TOTALS					797.00	823.30		8767	159				

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	516.2	797.00	-532.68	1355.98	Foreland	489.9	

GAS

MCF used on lease _____ 159
MCF sold _____ 0
MCF blown to air (difference) _____ 0
Gas Purchaser _____ N/A

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

SUMMARY

Barrels of oil produced and marketed during month _____ 823.30
Tax at \$0.10 per barrel _____ \$82.33
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 _____ \$ 82.33

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: 14-Nov ,2006

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

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OCT 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: NVN 42341

Pool: Kate Springs

County: Nye

Month of: September 2006

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		
12-2	544	02	8N	57E	804.79	878.79	18.6	8437	161	0.2		30	POW
TOTALS					804.79	878.79		8437	161				

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	590.2	804.79	-550.5	1429.29	Foreland	516.2	

GAS

MCF used on lease _____	161	Used for Gas Lift
MCF sold _____	0	0 MCF used on lease.
MCF blown to air (difference) _____	0	0 MCF used on _____ lease.
Gas Purchaser _____	N/A	0 MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month _____	878.79
Tax at \$0.10 per barrel _____	\$87.88
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 _____	\$ 87.88

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: 13-Oct ,2006

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

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SEP 19 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: NVN 42341

Pool: Kate Springs

County: Nye

Month of:

August

2006

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		
12-2	544	02	8N	57E	832.30	629.00	19.1	8801	166	0.2		31	POW
TOTALS					832.30	629.00		8801	166				

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	386.9	832.30	-560.84	1189.84	Foreland	590.2	

GAS

MCF used on lease _____	166	Used for Gas Lift
MCF sold _____	0	0 MCF used on lease.
MCF blown to air (difference) _____	0	0 MCF used on _____ lease.
Gas Purchaser _____	N/A	0 MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month _____	629.00
Tax at \$0.10 per barrel _____	\$62.90
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 _____ \$ 62.90

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: 13-Sep, 2006

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

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AUG 21 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: NVN 42341

Pool: Kate Springs

County: Nye

Month of:

July

2006

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		
12-2	544	02	8N	57E	1012.50	994.40	18.9	9089	203	0.2		31	POW
TOTALS					1012.50	994.40		9089	203				

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	368.8	1012.50	-351.36	1345.76	Foreland	386.9	

GAS

MCF used on lease _____ 203
MCF sold _____ 0
MCF blown to air (difference) _____ 0
Gas Purchaser _____ N/A

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

SUMMARY

Barrels of oil produced and marketed during month _____ 994.40
Tax at \$0.10 per barrel _____ \$99.44
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 _____ \$ 99.44

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: 15-Aug ,2006

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

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 42341

Pool: Kate Springs

County: Nye

Month of:

June

2006

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		
12-2	544	02	8N	57E	650.79	948.19	18.5	8655	130	0.2		30	POW
TOTALS					650.79	948.19		8655	130				

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	666.2	650.79	-627.81	1576.00	Foreland	368.8	

GAS

MCF used on lease _____	130	Used for Gas Lift
MCF sold _____	0	0 _____ MCF used on lease.
MCF blown to air (difference) _____	0	0 _____ MCF used on _____ lease.
Gas Purchaser _____	N/A	0 _____ MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month _____	948.19
Tax at \$0.10 per barrel _____	\$94.82
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 _____	\$ 94.82

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: 14-Jul ,2006

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

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JUN 22 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: NVN 42341 Pool: Kate Springs County: Nye Month of: May 2006

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		
12-2	544	02	8N	57E	1021.79	747.29	20	7950	204	0.2		31	POW
TOTALS					1021.79	747.29		7950	204				

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	391.7	1021.79	-367.59	1114.88	Foreland	666.2	

GAS

MCF used on lease _____	204	Used for Gas Lift
MCF sold _____	0	0 MCF used on lease.
MCF blown to air (difference) _____	0	0 MCF used on _____ lease.
Gas Purchaser _____	N/A	0 MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month _____	747.29
Tax at \$0.10 per barrel _____	\$74.73
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 _____	 \$ 74.73

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: 14-Jun, 2006

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

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MAY 22 2006

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 42341 Pool: Kate Springs County: Nye Month of: April 2006

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		
12-2	544	02	8N	57E	783.16	743.76	19.1	8447	157	0.2		30	POW
TOTALS					783.16	743.76		8447	157				

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	352.3	783.16	-543.86	1287.62	Foreland	391.7	

GAS

MCF used on lease _____	157	Used for Gas Lift
MCF sold _____	0	0 MCF used on lease.
MCF blown to air (difference) _____	0	0 MCF used on _____ lease.
Gas Purchaser _____	N/A	0 MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month _____	743.76
Tax at \$0.10 per barrel _____	\$74.38
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 _____	 \$ 74.38

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: 12-May, 2006

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

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APR 18 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: NVN 42341

Pool: Kate Springs

County: Nye

Month of:

March

2006

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		
12-2	544	02	8N	57E	742.54	786.74	19.6	8769	149	0.2		31	POW
TOTALS					742.54	786.74		8769	149				

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	396.5	742.54	-522.29	1309.03	Foreland	352.3	

GAS

MCF used on lease _____	149	Used for Gas Lift	
MCF sold _____	0	_____ MCF used on lease.	
MCF blown to air (difference) _____	0	_____ MCF used on _____ lease.	
Gas Purchaser _____	N/A	_____ MCF used on _____ lease.	

SUMMARY

Barrels of oil produced and marketed during month _____	786.74
Tax at \$0.10 per barrel _____	\$78.67
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 _____	\$ 78.67

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: 13-Apr ,2006

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

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MAR 29 2006

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 42341

Pool: Kate Springs

County: Nye

Month of:

February

2006

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		
12-2	544	02	8N	57E	1026.82	1002.02	19.9	7857	205	0.2		28	POW
TOTALS					1026.82	1002.02		7857	205				

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	371.7	1026.82	-359.59	1361.61	Foreland	396.5	

GAS

MCF used on lease _____	205	Used for Gas Lift
MCF sold _____	0	0 MCF used on lease.
MCF blown to air (difference) _____	0	0 MCF used on _____ lease.
Gas Purchaser _____	N/A	0 MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month _____	1,002.02
Tax at \$0.10 per barrel _____	\$100.20
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 _____	 \$ 100.20

Remarks:

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

Name: *Max Pourkashaf*
Max Pourkashaf

Position: Production Accounting

Telephone: (714) 939-7560

Date: 23-Mar ,2006

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

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MAR 02 2006

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 42341

Pool: Kate Springs

County: Nye

Month of:

January

2006

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		
12-2	544	02	8N	57E	953.16	1051.46	19.2	9000	191	0.2		31	POW
TOTALS					953.16	1051.46		9000	191				

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
			Bbils to Pipeline	Bbils to Truck or R.R.	Name of Transporter		
1	470	953.16	-460.76	1512.22	Foreland	371.7	/

GAS

MCF used on lease _____	191	Used for Gas Lift
MCF sold _____	0	0 MCF used on lease.
MCF blown to air (difference) _____	0	0 MCF used on _____ lease.
Gas Purchaser _____	N/A	0 MCF used on _____ lease.

SUMMARY

Barrels of oil produced and marketed during month _____	1,051.46
Tax at \$0.10 per barrel _____	\$105.15
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 _____	\$ 105.15

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: 27-Feb ,2006

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