

STATE OF NEVADA  
 DEPARTMENT OF MINERALS  
 400 W. King Street, Suite 106  
 Carson City, Nevada 89710  
 Telephone (702) 687-5050

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PRODUCER'S MONTHLY REPORT

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

Company CENEX Address P. O. Box 21479 Billings, MT 59104  
 Lease NVN47646 Pool Sans Spring TOV County NYE Month of December, 19 93

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			
5-14	NV303	14	7N	56E	6767	7159	27.0	22737	0	N/A	3-29	31	Pumping	
2-14	NV673	14	7N	56E	0	0		0	0	N/A	8-4	0	Shut-In	
<b>TOTALS</b>					6767	7159		22737						

\*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..... X

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
2	881	6767	0	7159	Petro Source	489	4500

GAS

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

SUMMARY

Barrels oil produced and marketed during month..... 7159  
Tax at \$0.05 per barrel..... \$357.95  
MCF gas produced and marketed during month.....  
Tax at \$0.05 per 50,000 MCF..... \$  
Total tax monies remitted herewith to Department of Minerals..... \$357.95

Remarks:

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

Name..... *Judith Johnson* Judith Johnson  
Position..... Senior Production Analyst  
Telephone..... (406) 655-6302  
Date..... January 26, 1994

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 CENEX Address P. O. Box 21479 Billings, MT 59104  
 Lease NVN47646 Pool TOV County NYE Month of November, 1993

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			
5-14	NV303	14	7N	56E	7868	7743	26.7	21638	0	N/A	3-29	30	Pumping	
2-14	NV673	14	7N	56E	0	0		0	0	N/A	8-4	0	Shut-In	
<b>TOTALS</b>					7868	7743		21638						

\*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.....  X

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
2	756	7868	0	7743	Petro Source	881	4500

GAS

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

SUMMARY

Barrels oil produced and marketed during month..... 7743  
Tax at \$0.05 per barrel..... \$ 387.15  
MCF gas produced and marketed during month.....  
Tax at \$0.05 per 50,000 MCF..... \$  
Total tax monies remitted herewith to Department of Minerals..... \$ 387.15

Remarks:

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

Name Judith Johnson (BY Ken Fried) Judith Johnson  
Position..... Senior Production Analyst  
Telephone..... (406) 655-6302  
Date..... December 10, 1993

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.

Div. of Minerals

Company CENEX Address P. O. Box 21479 Billings, MT 59104  
 Lease NVN47646 Pool TOV County NYE Month of October, 1993

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			
-14	NV303	14	7N	56E	7945	8178	27.0	15147	0	N/A	3-29	31	Pumping	
-14	NV673	14	7N	56E	290	341	27.0	4120	0	N/A	8-4	9	Pumping	
<b>TOTALS</b>					8235	8519		19267						

\*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..... X

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
2	1040	8235	0	8519	Petro Source	756	4500

GAS

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

SUMMARY

Barrels oil produced and marketed during month..... 8519  
Tax at \$0.05 per barrel..... \$ 425.95  
MCF gas produced and marketed during month.....  
Tax at \$0.05 per 50,000 MCF..... \$.....  
Total tax monies remitted herewith to Department of Minerals..... \$ 425.95

Remarks:

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

Name Judith Johnson by ds Judith Johnson  
Position..... Senior Production Analyst  
Telephone..... (406) 655-6302  
Date..... 11-29, 19 93

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

NOV 02 1993

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

Company CENEX Address P. O. Box 21479 Billings, MT 59104  
Lease NVN47646 Pool TOV County NYE Month of September, 1993

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			
5-14	NV303	14	7N	56E	5,081	4,728	27.4	4,266	0	N/A	3-29	22	Pumping	
2-14	NV673	14	7N	56E	1,029	957	27.4	7,028	0	N/A	8-4	26	Pumping	
<b>TOTALS</b>					6,110	5,685		11,294						

\*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.....

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
2	615	6110	0	5685	Petro Source	1040	4500

GAS

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

SUMMARY

Barrels oil produced and marketed during month..... 5685  
Tax at \$0.05 per barrel..... \$ 284.25  
MCF gas produced and marketed during month.....  
Tax at \$0.05 per 50,000 MCF..... \$ .....  
Total tax monies remitted herewith to Department of Minerals..... \$ 284.25

Remarks:

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

Name Judith Johnson (BY KF) Judith Johnson  
Position..... Senior Production Analyst  
Telephone..... (406) 655-6302  
Date..... October 28, 19 93

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 CENEX Address P. O. Box 21479 Billings, MT 59104

Lease NVN47646 Pool TOV County NYE Month of August, 1993

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			
14	NV303	14	7N	56E	5853	5561	27.4	3391	0	N/A	3-29	29	Flowing	
14	NV673	14	7N	56E	270	257	27.4	830	0	N/A	8-4	2	Pumping	
<b>TOTALS</b>					6123	5818		4221						

\*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: X

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
2	310	6123	0	5818	Petro Source	615	4500

GAS

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

SUMMARY

Barrels oil produced and marketed during month..... 5818  
Tax at \$0.05 per barrel..... \$ 290.90  
MCF gas produced and marketed during month.....  
Tax at \$0.05 per 50,000 MCF..... \$  
Total tax monies remitted herewith to Department of Minerals..... \$ 290.90

Remarks:

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

Name..... *Judith Johnson* Judith Johnson  
Position..... Senior Production Analyst  
Telephone..... (406) 655-6302  
Date..... *September 30*, 19 93

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..... CENEX ..... Address..... P.O. Box 21479 Billings, MT 59104  
 Lease..... NVN47646 ..... Pool..... TOV ..... County..... NYE ..... Month of..... July ..... 1993

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		
5-14	NV303	14	7N	56E	3980	5527	27.4	2357	0	N/A	3-29	31	Flowing
<b>TOTALS</b>					3980	5527		2357					

\*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..... X .....

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
1	1857	3980	0	5527	Petro Source	310	4500

GAS

MCF used on lease.....  
MCF sold..... 0 .....  
MCF blown to air (difference).....  
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 oil produced and marketed during month..... 5527  
Tax at \$0.05 per barrel..... \$276.35  
MCF gas produced and marketed during month.....  
Tax at \$0.05 per 50,000 MCF..... \$  
Total tax monies remitted herewith to State Treasurer..... \$276.35

Remarks: Sales include oil from frac tank

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

Name..... *Judith Johnson* ..... Judith Johnson  
Position..... Senior Production Analyst  
Telephone..... (406) 656-4343 #302  
Date..... *August 19* ..... 19.93

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

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PRODUCER'S MONTHLY REPORT

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

Dept. of Minerals

Company..... CENEX ..... Address..... P.O. Box 21479 Billings, MT 59104  
 Lease..... NVN47646 ..... Pool..... TOV ..... County..... NYE ..... Month of..... June ..... 1993

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		
5-14	NV303	14	7N	56E	6729	8187	27.4	3154	0	N/A	3-29	30	Flowing
<b>TOTALS</b>					<b>6729</b>	<b>8187</b>		<b>3154</b>				<b>30</b>	

\*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..... X.....

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
1	3315	6729	0	8187	Petro Source	1857	4500

GAS

MCF used on lease..... 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 oil produced and marketed during month..... 8187  
Tax at \$0.05 per barrel..... \$ 409.35  
MCF gas produced and marketed during month.....  
Tax at \$0.05 per 50,000 MCF..... \$ .....  
Total tax monies remitted herewith to State Treasurer..... \$ 409.35

Remarks: Inventory includes approximately 1000 bbls. test oil produced into frac tanks during completion

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

Name..... *Judith Johnson* ..... Judith Johnson  
Position..... Senior Production Analyst  
Telephone..... (406)656-4343 #302  
Date..... July 23, 1993

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

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PRODUCER'S MONTHLY REPORT

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

Company CENEX Address P.O. Box 21479 Billings, MT 59104  
 Lease NVN47646 Pool TOV County NYE Month of May, 1993

LOCATION					OIL AND WATER (BBL.)				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			
5-14	NV303	14	7N	56E	9288	7828	27.6	2974	0	N/A	3-29	31	Flowing	
TOTALS					9288	7828		2974						

\*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.....  .....

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
1	1855	9288	0	7828	Petro Source	3315	4500

GAS

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

SUMMARY

Barrels oil produced and marketed during month.....	7828
Tax at \$0.05 per barrel.....	\$ 391.40
MCF gas produced and marketed during month.....	
Tax at \$0.05 per 50,000 MCF.....	\$
Total tax monies remitted herewith to State Treasurer.....	\$ 391.40

Remarks: Inventory includes approximately 1000 bbl. test oil produced into frac tanks during completion.

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

Name..... *Judith Johnson* ..... Judith Johnson

Position..... Senior Production Analyst

Telephone..... (406) 656-4343 #302

Date..... June 22, 1993

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



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PRODUCER'S MONTHLY REPORT

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

Company..... CENEX ..... Address..... P.O. Box 21479 Billings, MT 59104  
 Lease..... NV47646 ..... Pool..... TOV ..... County..... Nye ..... Month of..... April ..... 19 93

LOCATION					OIL AND WATER (BBL.)				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			
5-14	NV303	14	7N	56E	11044	12523	27.2	1197	0	N/A	3-29	30	Flowing	
<b>TOTALS</b>					11044	12523		1197						

\*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..... X ..... Draw off.....

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbls. to pipeline	Bbls. to truck or R.R.	Name of transporter		
1	3334	11044	0	12523	Petro Source	1855	4500

GAS

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

SUMMARY

Barrels oil produced and marketed during month..... 12523  
Tax at \$0.05 per barrel..... \$626.15  
MCF gas produced and marketed during month.....  
Tax at \$0.05 per 50,000 MCF..... \$  
Total tax monies remitted herewith to State Treasurer..... \$626.15

Remarks: Inventory includes approximately 1000 bbl test oil produced into frac tanks during completion

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

Name..... *Judith Johnson* Judith Johnson  
Position..... Senior Production Analyst  
Telephone..... (406) 656-4343  
Date..... May 26, 1993

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

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MARCH 1993

Dept. of Minerals

## PRODUCER'S MONTHLY REPORT

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

Company..... CENEX ..... Address..... P. O. Box 21479 Billings, MT 59104

Lease..... NV47646 ..... Pool..... TOV ..... County..... NYE ..... Month of..... March ..... 19 93

LOCATION					OIL AND WATER (BBL.)				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			
5-14	NV303	14	7N	56E	3334	0	28	0	0	N/A	3/29	3	Flowing	
					Produced oil includes approximately 1000 bbls. test oil produced into frac tanks during completion									
<b>TOTALS</b>					<b>3334</b>	<b>0</b>		<b>0</b>	<b>0</b>					

\*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..... X ..... Draw off.....

(Following report is on lease basis.)

No. Wells	Total amount oil on lease at beginning of month	Actual oil produced	DISPOSITION OF OIL			Total amount oil on lease	Total capacity lease tanks
			Bbis. to pipeline	Bbis. to truck or R.R.	Name of transporter		
1	0	3334	0	Truck	Petro-source	3334	4500

GAS

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

SUMMARY

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

Remarks:

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

Name..... *Judith Johnson* ..... Judith Johnson  
Position..... Senior Production Analyst  
Telephone..... (406) 656-4343 Ext. 302  
Date..... April 26 19 93

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