

COMMISSIONERS OF THE LAND OFFICE
STATE OF OKLAHOMA

**LESSEE'S MONTHLY REPORT OF PRODUCTION AND SALES OF GAS,
CASINGHEAD GAS AND LIQUID HYDROCARBONS MANUFACTURED THEREFROM**

1. For the Month of _____, 20____
2. Lessee _____
3. Description _____ Sec. _____ Twp. _____ Rge. _____ County _____
4. Lease No. _____
5. Lease Name _____
6. Gas is being marketed from _____ wells producing oil and gas and _____ wells producing only gas.
7. State's Royalty Interest Paid by _____

PROCESSED GAS

8. Volume of casinghead gas produced M.C.F. _____
9. Gasoline value due lease \$ _____
10. Butane and propane value due lease \$ _____
11. Residue gas volume sold _____ M.C.F.
12. Contract percent to lease _____ Price _____
13. Residue value due lease \$ _____
14. Total value of all processed gas sold \$ _____
15. Adjustments: (Explain in detail on reverse side) \$ _____
16. Adjusted value \$ _____
17. Royalty interest _____%. Total royalty due State \$ _____

DRY GAS

18. Total volume _____ M.C.F. @ _____ per M.C.F. Total Value \$ _____
19. Adjustments: (Explain in detail on reverse side) \$ _____
20. Adjusted Value \$ _____
21. Royalty Interest _____%. Total Royalty due State \$ _____

VERIFICATION

22. State of _____
County of _____

I, _____ being first duly sworn upon oath state: That I am _____ of _____, the lessee of the above described lease; That I have read all statements in this report and know the facts contained therein, and that the matters and statements represented and contained in the report are true and correct as recited.

Signature of Affiant

Address of Affiant

Subscribed and sworn to before me this _____ day of _____, 20____.

My Commission Expires: _____

Notary Number: _____

Notary Public

RETURN TO:
Commissioners of the Land Office
120 N. Robinson, Suite 1000W
Oklahoma City, OK 73102

(See instructions on reverse side)

CLO FEDERAL IDENTIFICATION NO. 73-1124122

CLO-109

1. Month: Calendar month covered by this report.
2. Lessee: Recorded owner of valid oil and gas mining lease from State of Oklahoma.
3. Description: State owned acreage covered by this report.
4. Lease No.: The identifying number under which payment of royalty is submitted to this office. (If none -- write NONE)
5. Name: The descriptive title applied to lease. (If none -- write NONE)
6. Show actual number of wells producing oil and gas and actual number of wells producing only gas.
7. Show who pays State's Royalty Interest.
8. Show actual volume of casinghead gas registered by meter at wellhead.
9. Gasoline value due lease: Value upon which State's royalty is paid.
10. Butane and propane value due lease: Value upon which State's royalty is paid.
11. Residue gas volume sold: Show actual volume of residue gas sold from this lease.
12. Contract percent to lease: Show percent of residue gas due this lease; Price: Show price per M.C.F. received residue gas sold.
13. Residue value due lease: Value upon which State's royalty is paid.
14. Total value of all Processed Gas Sold: The sum of the values due lease for gasoline, propane and butane and residue gas.
15. Adjustments: Explain in detail (below) any item shown as adjustment.
16. Adjusted Value: Total value of all processed gas sold plus or minus adjustments.
17. Royalty interest percent: Show State's decimal equivalent royalty interest. Royalty due State: State's share of adjusted value.
18. Dry Gas: Show total volume registered by meter at wellhead, actual price per M.C.F. for gas sold and total value.
19. Adjustments: Explain in detail (below) any item shown as adjustment.
20. Adjusted value: Value of dry gas sold plus or minus adjustments.
21. Royalty interest percent: Show State's decimal equivalent royalty interest. Royalty due State: State's share of adjusted value.
22. Verification on this report must be completed in full and notarized.
23. A copy of the purchaser's gas settlement sheet must accompany this report.
24. No State or Federal Tax is to be deducted from the gross value before the calculation of royalty due.

EXPLANATION:

(If additional space is required, attach separate sheet)