MONTHLY REPORT FOR INJECTION WELLS
(Due the 25th day of the month following Injection)

<table>
<thead>
<tr>
<th>Well name/location</th>
<th>Type/Status</th>
<th>Days</th>
<th>Amount Injected/Disposed (bbls/mcf)</th>
<th>Average Inj Pressure (PSI)</th>
<th>Max Inj Pressure (PSI)</th>
<th>Total Fluid/Gas Injected end of month.</th>
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</thead>
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</tbody>
</table>

Signature_____________________________ Title ______________________ Date _____________

I hereby certify that the foregoing is a complete (unless otherwise indicated) and correct report of operations, disposal of products, and well status for the lease or property for the month shown above.