

Meter Station No. _____

DRY GAS REPORT

FOR MONTH OF _____, YEAR: _____

25CFR 226 - LESSEE SHALL FURNISH CERTIFIED MONTHLY REPORTS BY THE 25 TH OF EACH MONTH COVERING ALL OPERATIONS, WHETHER THERE HAS BEEN PRODUCTION OR NOT.

U.S. DEPARTMENT OF THE INTERIOR
BUREAU OF INDIAN AFFAIRS
OSAGE AGENCY
813 Grandview, P.O. Box 1539
Pawhuska, Oklahoma, 74056
(918) 287-5740 FAX: (918) 287-5786

LESSEE ID NO.: _____

Lessee Name: _____ Current Phone No.: _____

Address: _____ City: _____ State: _____ Zip: _____

Gas purchaser: _____ Purpose: Domestic / Sales / Other (CIRCLE ONE)

Location of meter: _____ BTU adjustment: _____

LEASE DESCRIPTION

Osage Contract Number	¼	SEC	TWP	RGE	Royalty Rate	Type of Gas ¹	Royalty Amount	MCF	Unit price paid per MCF	Price paid per MMBTU	No. of wells produced	Date last produced MO/DY/YR

¹Use: CHG (CASINGHEAD); NG- NATURAL GAS (GAS WELL GAS); CBM (COALBED METHANE)
²CONSOLIDATED GAS LEASES - PRODUCTION FROM EACH QUARTER SECTION OF CONSOLIDATION MUST BE ACCOUNTED FOR SEPARATELY AND COLUMN IS TO BE TOTALED FOR EACH CONSOLIDATION.

I CERTIFY THAT THE FOREGOING REPORT IS TRUE AND CORRECT.

Signature and Title

Telephone Number

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