UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SCHEDULE 13G

Under the Securities Exchange Act of 1934 (Amendment No._____)*

RANGE RESOURCES CORP (Name of Issuer)

Common Stock (Title of Class of Securities)

> 75281A109 (CUSIP Number)

Check the following box if a fee is being paid with this statement ___. (A fee is not required only if the filing person: (1) has a previous statement on file reporting beneficial ownership of more than five percent of the class of securities described in Item 1; and (2) has filed no amendment subsequent thereto reporting beneficial ownership of five percent or less of such class.) (See Rule 13d-7).

*The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be filed for the purpose of Section 18 of the Securities Exchange Act of 1934 (Act) or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

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1. NAME OF REPORTING PERSON S.S. or I.R.S. IDENTIFICATION NO. OF ABOVE PERSON Ohio PERS 31-6159380

2. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a)___ NA (b)___ NA

SEC USE ONLY

4. CITIZENSHIP OR PLACE OF ORGANIZATION

US 277 EA

277 EAST TOWN STREET COLUMBUS, OH 43215

NUMBER OF SHARES BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH:

5. SOLE VOTING POWER
0

6. SHARED VOTING POWER

- 7. SOLE DISPOSITIVE POWER $_{0}$
- 8. SHARED DISPOSITIVE POWER NA
- 9. AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON $_{\rm O}$
- 10. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

NA

- PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 11. TYPE OF REPORTING PERSON* Ttem 1. (a) Name of Issuer RANGE RESOURCES CORP Address of Issuer's Principal Executive Offices 500 THROCKMORTON ST., FORT WORTH, TX 76102 Item 2. (a) Name of Person Filing Christy Ruoff Address of Principal Business Office or, if none, Residence (b) 277 East Town Street, Columbus, OH 43215 (c) Citizenship US (d) Title of Class of Securities COMMON STOCK (e) CUSIP Number 75281A109 Item 3. If this statement is filed pursuant to Rule 13d-1(b), or 13d-2(b), check whether the person filing is a: __Broker or Dealer registered under Section 15 of the Act Bank as defined in section 3(a)(6) of the Act (b) (c) _Insurance Company as defined in section 3(a)(19) of the Act __Investment Company registered under section 8 of the (d) Investment Company Act __Investment Adviser registered under section 203 of the Investment Advisers Act of 1940 X Employee Benefit Plan, Pension Fund which is subject to (f) the provisions of the Employee Retirement Income Security Act of 1974 or Endowment Fund; see 240.13d-1(b)(ii)(F) _Parent Holding Company, in accordance with 240.13d-(g) 1(b)(ii)(G) (Note: See Item 7) __Group, in accordance with 240.13d-1(b)(1)(ii)(H)(h) Item 4. Ownership If the percent of the class owned, as of December 31 of the year covered by the statement, or as of the last day of any month described in Rule 13d-1(b)(2), if applicable, exceeds five percent, provide the following information as of that date and identify those shares which there is a right to acquire. Amount Beneficially Owned (a) 0 (b) Percent of Class Number of shares as to which such person has: 0 (i) sole power to vote or to direct the vote 0
 - (i) sole power to vote or to direct the vote 0
 (ii) shared power to vote or to direct the vote NO
 (iii) sole power to dispose or to direct the disposition of 0
 (iv) shared power to dispose or to direct the disposition of NO

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

	Date
	Signature

Name/Title