

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	GAS	
OPERATOR		
PROBATION OFFICE		

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator  
Greenwood Resources, Inc.

Address  
116 Inverness Dr. East Englewood, CO 80112

Reason(s) for filing (Check proper box)  
 New Well  
 Recompletion  
 Change in Ownership  
 Change in Transporter of:  
 Oil  
 Casinghead Gas  
 Dry Gas  
 Condensate  
 Other (Please explain)

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NOV 10 1986

If change of ownership give name and address of previous owner \_\_\_\_\_

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kirtland	Well No. 2	Pool Name, including Formation Cha Cha Gallup/Gallup	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>B</u> : <u>260</u> Feet From The <u>North</u> Line and <u>2100</u> Feet From The <u>EAST</u> Line of Section <u>13</u> Township <u>29N</u> Range <u>15W</u> , NMPM, San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Petro Source Corporation-8777 E	Address (Give address to which approved copy of this form is to be sent) Via De Ventura #100 Scottsdale, AZ 85258			
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/> El Paso Natural Gas 1729 E. 21st ST.	Address (Give address to which approved copy of this form is to be sent) PO Box 990 Farmington, N.M. 87401			
If well produces oil or liquids, give location of tanks. Unit <u>B</u> Sec. <u>13</u> Twp. <u>29N</u> Rgs. <u>15W</u>	Is gas actually connected?	When		

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

James T. Pugh  
(Signature)  
Operations Manager

(Title)

11-4-86

(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_ NOV 10 1986  
BY \_\_\_\_\_  
TITLE \_\_\_\_\_ SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 1104.

If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.

All sections of this form must be filled out completely for allowable on new and recompleted wells.

Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.

Separate Forms C-104 must be filed for each pool in multiply completed wells.