

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

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

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

NO. OF COPIES RECEIVED		
DISTRIBUTION		
SANTA FE		
FILE		
U.S.G.S.		
LAND OFFICE		
TRANSPORTER	OIL	
	NAT	
OPERATOR		
PRODUCTION 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  
☐ Recombination  
☐ Change in Ownership  
 Change in Transporter of:  
☒ Oil  
☐ Casinghead Gas  
☐ Dry Gas  
☐ Condensate  
 Other (Please explain)

RECEIVED  
NOV 10 1986  
OIL CON. DIV.

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kirtland	Well No. 7	Pool Name, including Formation Cha Cha Gallup/Gallup	Kind of Lease State, Federal or Fee Fee	Lease No.
Location Unit Letter <u>D</u> : <u>910</u> Feet From The <u>NORTH</u> Line and <u>395</u> Feet From The <u>SE</u> West 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>D</u> Sec. <u>13</u> Twp. <u>29N</u> Rge. <u>15W</u>	Is gas actually connected? <input type="checkbox"/> 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 P. Ryder  
(Signature)  
Operations Manager

(Title)

11-4-86

(Date)

OIL CONSERVATION DIVISION  
NOV 10 1986  
APPROVED Frank J. Davis  
BY Supervisor District 3  
TITLE \_\_\_\_\_

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.