## STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION			
SANTA PE		1	
FILE			
U.B.O.4.			
LAND OFFICE			
TRANSPORTER	OIL		
	GAS		
OPERATOR			
PROBATION OFFICE			

## 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

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

## REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS  Greenwood Resources, Inc.				
				116 Inverness Dr. East Suite 303 Er
Reeson(s) for filing (Check proper box)  Other (Please explain)				
New Well Change in Transporter of:  Nov 101986.				
Recompletion Y Oil Dr	, 332			
Change in Ownership Casinghead Gas Ca	ondenage CNI DIV.			
If change of ownership give name and address of previous owner				
II. DESCRIPTION OF WELL AND LEASE				
Lease Name Well No. Pool Name, Including F	Fee			
	State, Federal or Fee			
Unit Letter I : 1940 Feet From The SOUTH Line and 810 Feet From The EAST				
Line of Section 3 Township 2910 Range 15W , NMPM, SAN JUAN County				
III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS				
Name of Authorized Transporter of Oil Or Condensate Address to which approved copy of this form is to be sent)				
Petro Source Corp. 8777 E. Via De Ventura #100 Scottsdale, AZ 85258  Name of Authorized Transporter of Casinghead Gas or Dry Gas Address (Give address to which approved copy of this form is to be sent)				
El Paso Natural Gas 1729 E. 21st ST. P.O. Box 990 Farmington, N.M. 87401				
If well produces oil or liquids, give location of tanks.  I 3 1990 15W				
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	OIL CONSERVATION DIVISION			
$\sim$ NUV to 1000				
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.	BYBY			
	TITLE			
	This form is to be filed in compliance with RULE 1104.			
(Signature)	If this is a request for allowable for a newly drilled or deepener well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.			
Operations Manager (Title)	All sections of this form must be filled out completely for sllow- able on new and recompleted wells.			
11-4-86 (Pate)	Fill out only Sections I. II. III, and VI for changes of owner.			
(Vale)	well name or number, or transporter, or other such change of condition.			