

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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U.S.G.	
LAND OFFICE	
TRANSPORTER	OIL
	GAS
OPERATOR	
PRODUCTION OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Form 08-01-83
Page 1

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AUG 11 1988
OIL CON. DIV.
DIST. 3

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Greenwood Holdings Inc.

Address
5600 S. Quebec St., Suite 150C, Englewood, CO 80111

Reason(s) for filing (Check proper box)
☐ New Well
☐ Reconnection
☐ Change in Ownership
☒ Change in Transporter oil
☐ Oil
☐ Condensate Gas
☐ Dry Gas
☐ Condensate
 Other (Please explain)

If change of ownership give name and address of previous owner

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kirtland	Well No. 8	Pool Name, Including Formation Cha Cha Gallup/Gallup	Kind of Lease State, Federal or Fee	Lease No.
Location Unit Letter <u>0</u> : <u>510</u> Feet From The <u>South</u> Line and <u>1920</u> Feet From The <u>East</u>				
Line of Section <u>11</u> Township <u>29N</u> Range <u>15W</u> N.M.P.M. San Juan County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil ☒ or Condensate ☐ Gary Energy	Address (Give address to which approved copy of this form is to be sent) P. O. Box 159 Bloomfield, NM 87413
Name of Authorized Transporter of Condensate Gas ☐ or Dry Gas ☐ None	Address (Give address to which approved copy of this form is to be sent)
If well produces oil or liquids, give location of tanks. Unit <u>0</u> Sec. <u>11</u> Twp. <u>29N</u> Rng. <u>15W</u>	Is gas currently condensed? 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.


Operations Manager
(Title)
8-08-88
(Date)

OIL CONSERVATION DIVISION

APPROVED AUG 11 1988, 19

BY Burt J. Shoup

TITLE SUPERVISION DISTRICT # 8

This form is to be filed in compliance with N.M.S. 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 N.M.S. 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 Form C-104 must be filed for each pool in multiply completed wells.