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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
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
MAR 9 1984
OIL CON. DIV.
DIST. 3

I. **Operator**
GREENWOOD RESOURCES INC.

Address
315 Inverness Way South Englewood, Colorado 80112-5898

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	<input checked="" type="checkbox"/> Change in Transporter of:	<input type="checkbox"/> Other (Please explain)
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate

If change of ownership give name and address of previous owner _____

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kirtland	Well No. 9	Pool Name, including Formation Cha-Cha Gallup	Kind of Lease State, Federal or Fee	Fee	Lease
Location					
Unit Letter <u>K</u> : <u>2045</u> Feet From The <u>South</u> Line and <u>1970</u> Feet From The <u>West</u>					
Line of Section <u>12</u> Township <u>29 North</u> Range <u>15 West</u> , NMPM, <u>San Juan</u> Cou					

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> GIANT REFINING CO.	Address (Give address to which approved copy of this form is to be sent) P.O. Box 256, Farmington, NM 87499
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> INTRASTATE GATHERING CORP	Address (Give address to which approved copy of this form is to be sent) P.O. Box 32999, San Antonio, TX 78216
If well produces oil or liquids, give location of tanks. Unit <u>K</u> Sec. <u>12</u> Twp. <u>29</u> Rge. <u>15</u>	Is gas actually connected? YES When May 23, 1982

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.

Juan M. Griesheimer
(Signature)
production analyst
(Title)
Feb. 24, 1984
(Date)

OIL CONSERVATION DIVISION

APPROVED MAR 9 1984
BY Frank J. [Signature]
TITLE SUPERVISOR DISTRICT # 3

This form is to be filed in compliance with RULE 110a.
If this is a request for allowable for a newly drilled or deep well, this form must be accompanied by a tabulation of the deviator tests taken on the well in accordance with RULE 111.
All sections of this form must be filled out completely for all wells on new and recompleted wells.
Fill out only Sections I, II, III, and VI for changes of well name or number, or transporter, or other such change of condition.
Separate Forms C-104 must be filed for each pool in multi-completed wells.