

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

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

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JAN 19 1984
OIL CON. DIV.
DIST. 3
Form C-104
Revised 10-01-78
Format 08-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I. Operator
Greenwood Resources Inc.

Address
315 Inverness Way South, Englewood, CO 80112-5898

Reason(s) for filing (Check proper box)

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

If change of ownership give name and address of previous owner: Caribou Four Corners, Inc. P.O. Box 2105, Farmington, NM 87401

II. DESCRIPTION OF WELL AND LEASE

Lease Name Kirtland	Well No. 4	Pool Name, including Formation NW Cha Cha Gallup	Kind of Lease State, Federal or Fee	Fee	Lease No.
Location					
Unit Letter <u>E</u> : <u>595</u> Feet From The <u>West</u> Line and <u>1450</u> Feet From The <u>North</u>					
Line of Section <u>18</u> Township <u>29N</u> Range <u>14W</u> , NMPM, <u>San Juan</u> 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"/> Inland Corporation	Address (Give address to which approved copy of this form is to be sent) P.O. Box 1528, Farmington, NM 87401
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> Intrastate Gathering Corporation	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.	Is gas actually connected?
Unit <u>E</u> Sec. <u>18</u> Twp. <u>29N</u> Rge. <u>14W</u>	Yes <u>May 23, 1982</u>

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.

Paul E. Pouchen
(Signature)
MANAGER of ENGINEERING
(Title)
1/13/84
(Date)

OIL CONSERVATION DIVISION

APPROVED JAN 19, 1984
BY Original Signed by FRANK T. CHAVEZ
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 allow able 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.