

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT

NAME OF COMPANY	
CHIEF OFFICE	
SANTA FE	
FILE	
MAILING ADDRESS	
LAW OFFICES	
TRANSPORTER	OIL
	GAS
OPERATOR	
REGULATOR OFFICE	

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-104
Revised 10-01-78
Revised 05-01-83
Page 1

REQUEST FOR ALLOWABLE
AND
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

RECEIVED
AUG 11 1988
OIL CON. DIV.
DIST. 3

I.

Owner	Greenwood Holdings Inc.	
Address	5600 S. Quebec St., Suite 150C, Englewood, CO 80111	
Reason(s) for filing (Check proper box)		
<input type="checkbox"/> New Well	<input checked="" type="checkbox"/> Change in Transporter	Other (Please explain)
<input type="checkbox"/> Resumption	<input type="checkbox"/> Dry Gas	
<input type="checkbox"/> Change in Operator	<input type="checkbox"/> Compressed Gas	<input type="checkbox"/> Condensate

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

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Post Name, Including Perforation	Type of Lease	Fee	Lease No.
Kirtland	7	Cha Cha Gallup/Gallup	State, Federal or Fed.	Fee	
Location	Unit Letter <u>D</u> : 910 Feet From The <u>North</u> Line and <u>395</u> Feet From The <u>West</u>				
Line of Section	13	Township	29N	Range	15W, NMPL, San Juan County

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Compressed Gas <input type="checkbox"/>	Address (Give address so which approved copy of this form is to be sent)
Gary Energy	P. O. Box 159 Bloomfield, NM 87413
Name of Authorized Transporter of Compressed Gas <input type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address so which approved copy of this form is to be sent)
None	
If well produces oil or liquids, give location of tanks.	Units Sec. Twp. Range
	D 13 29N 15W
	Is gas currently compressed? Where

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 J. Reh
 (Signature)
 Operations Manager
 (Title)
 8-08-88
 (Date)

OIL CONSERVATION DIVISION

APPROVED AUG 11 1988, 19_____

BY Burt J. Day

TITLE SUPERVISION 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 translation of the deviation tests taken on the well in accordance with RULE 1111.

All sections of this form must be filled out completely for allowing 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 well in multiply connected wells.