UNITED STATES SUBMIT IN TRIPLICATE* OEPARTMENT OF THE INTERIOR (Other instructions on re-	Form approved. Budget Bureau No. 42-R1424. 5. LEASE DESIGNATION AND SERIAL NO.
GEOLOGICAL SURVEY	14-20-603-1449
SUNDRY NOTICES AND REPORTS ON WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  Use "APPLICATION FOR PERMIT—" for such proposals.)	Ka Gee Tah
OIL GAS WELL OTHER	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
Hixon Development Company	Ka Gee Tah
3. ADDRESS OF OPERATOR	9. WELL NO.
P. O. Box 2810, Farmington, New Mexico	1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)	10. FIELD AND POOL, OR WILDCAT
At surface	NIPP - PC  11. SEC., T., B., M., OR BLK. AND
1550' FNL, 1850' FWL Section 10-25N-12W	SURVEY OR ABEA
	10-25N-12W NMPM
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
6225' GL	San Juan New Mexico
16. Check Appropriate Box To Indicate Nature of Notice, Report, or C	Other Data
	ENT REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT  MULTIPLE COMPLETE  FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL CHANGE PLANS (Other) Completi	on X
(Other) (Note: Report results Completion or Recomple	of multiple completion on Well etion Report and Log form.)
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical nent to this work.) *	including estimated date of starting any l depths for all markers and zones perti-
Perforated Pictured Cliffs interval 1124'-28', 1116'-22' with 2-JSI	PF. Well kicked
off immediately after perforated. Run 1 1/4" tubing. Shut well is	
off immediately after perforated. Run 1 1/4" tubing. Shut well i	
	n for testing.
	n for testing.
	n for testing.

DATE August 3, 1977

DATE \_

TITLE \_

18. I hereby certify that the Yoregoing is true and correct

(This space for Federal or State office use)