NRC FORM 241 (7-1999)	U.S. NUCLEAR REGU	LATORY O	OMMISS	request: 15 m	on per respo Inutes. This	nee to con notificati	on is required so that NRC may	
REPORT OF PROPOSED ACTIVITIES IN				schedule inspe ecoordance w safety. Send	Estinated burden per response to comply with this mandatory collection request: 15 minutes. This notification is required so that NRC may solvedule inspection of the solvilles to ensure that they are conducted in accordance with requirements for protection of the public health and safety. Send comments regarding burden estimate to the Records Management Spanch (T-6 E5), U.S. Nuclear Regulatory Commission, Washington, DC 20655-0001, or by internet e-mail to bis 1@mrc.gov, and to the Deak Officer, Office of Information and Regulatory Affairs, NEOS-10202, (3150-0013), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a purrently valid OMS control number, the			
NON-AGREEMENT STATES, AREAS OF EXCLUSIVE				/E Washington, I and to the Dec	Washington, DC 20695-0001, or by internet e-mail to bis1@nre.gov, and to the Desk Officer, Office of information and Regulatory Affairs, NECS 10212, VSAB-0013), Office of Management and Budget.			
FEDERAL JURISDICTION, OR OFFSHORE WATERS				Washington, Collection does	C 20503. not display	a ourrent	is used to impose an information by valid OMS control number, the	
(Please read the instructions before completing this form)				respond to, the	NRC may not conduct or sponsor, and a person is not required to respond to, the information collection. 2. TYPE OF REPORT			
1. NAME OF LICENSEE Person or first proposing to conduct the activities described below) Elevation VS MWW 15 INC.				☐ INITIAL ☐ REVISION ☐ CLARIFICATION				
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located) 3.155 North woods Paul way NW			Mark	MUTY KNOTH LSO				
Norchoss 4a 30030				5. TELEPHONE (Include Area 7-70-30	5. TELEPHONE NUMBER (molude Area Code) 7-70-380-9-725 7-70-4-10-6338			
7.						CFR 15		
WELL LOGGING	LEAK TESTING	AND/OR C	AUBRATI	ONS T	LETHERA	PY/IRRA	DIATOR SERVICE	
PORTABLE GAUGE	S OTHER (Specify) *	YEV	CNYME II	MIH	eval	100	
RADIOGRAPHY	REGISTERED AS USER OF	PACKAGING	(CERTIFICAT	TES OF COMPLIANCE N	MBERS)			
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