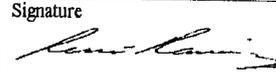
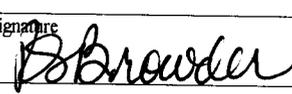
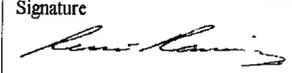
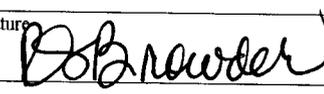
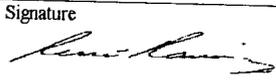
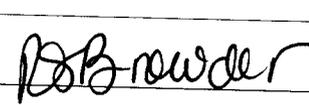


NRC FORM 241 COMMISSION (7-1999)	U.S. NUCLEAR REGULATORY REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES, AREAS OF EXCLUSIVE FEDERAL JURISDICTION, OR OFFSHORE WATERS	APPROVED BY OMB: NO. 3150-0013 EXPIRES 07/31/2002 Estimated burden per response to comply with this mandatory collection request: 15 minutes. This notification is required so that NRC may schedule inspection of the activities 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 Branch (T-6 E6). U.S. Nuclear Regulatory Commission, Washington DC 20555-0001, or by internet e-mail to bjs@nrc.gov , and to the Desk Officer, Office of Management and Budget, Washington DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.		
(Please read the instructions before completing this form)				
1. NAME OF LICENSEE (Person of Firm proposing to conduct the activities described below) ARIAS & KEZAR INC		2. TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> REVISION <input checked="" type="checkbox"/> CLARIFICATION		
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located) 10821 Gulfdale San Antonio, Texas 78216		4. LICENSEE CONTACT AND TITLE Rene Ramirez, Construction Service Manager		
		5. TELEPHONE NUMBER (210) 308-5884	6. FACSIMILE NUMBER (210) 308-5886	
7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20				
<input type="checkbox"/> WELL LOGGING <input type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS <input type="checkbox"/> TELETHERAPY/IRRADIATOR SERVICE				
<input checked="" type="checkbox"/> PORTABLE GAUGES <input type="checkbox"/> OTHER (Specify)				
<input type="checkbox"/> RADIOGRAPHY REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)				
8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE Garco 901 Mason San Antonio, Texas 78208		9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION FY-03 Student Dormitory - Lackland Annex Lackland Air Force Base, Texas		
		10. CLIENT TELEPHONE NUMBER 210- 224-0722	11. WORK LOCATION TELEPHONE NUMBER 210-	
12. DATES SCHEDULED FROM TO 10/17/03 10/17/03		13. NUMBER OF WORKED DAYS 1	14. ADD 15. DELETE 16. LOCATION REFERENCE NUMBER NUMBER TO BE ASSIGNED BY NRC 000104	
LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE				
17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED USED, INSTALLED, SERVICED, OR TESTED Cs137/Am-241; Be 8-mCi/40-mCi				
18. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LACATION OF USE, AS SPECIFIED AIN ITEM 9 ABOVE (Four copies of the specific license must accompany the initial NRC Form 241.)		LICENSE NUMBER LO4964	STATE Tx	
		EXPIRATION DATE April 30, 2006		
19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)				
I, THE UNDERSIGNED, HEREBY CERTIFY THAT:				
a. All information in this report is true and complete				
b. I have read and understand the provision of the general license 10 CFR 150.20 reprinted on the instructions of this form; and understand that I am required to comply with these provisions as to all byproduct, source, or special nuclear material which I possess and use in non-Agreement States or offshore waters under the general license for which this report is filed with the U.S. Nuclear Regulatory Commission.				
c. I understand that activities, including storage, conducted in non-Agreement States under general license 10 CFR 150.20 are limited to a total of 180 days in calendar year. With the exception of work conducted in off-shore waters, which is authorized for an unlimited period of time in the calendar year.				
d. I understand that I may be inspected by NRC at the above listed work site locations and at the Licensee home office address for activities performed in non-Agreement States or offshore waters.				
e. I understand that conduct of any activities not described above, including conduct of activities on dates or locations different from those described above or without NRC authorization, may subject me to enforcement action including civil or criminal penalties.				
CERTIFYING OFFICER - RSO OR Management Representative (Name and Title) Rene Ramirez, Construction Service Manager		Signature 	Date 10/17/03	
WARNING: False statements in this certificate may be subject to civil and/or criminal penalties. NRC regulations require that submissions to the NRC be complete and accurate in all material respects. 18 U.S.C. Section 1001 makes it a criminal offense to make a willfully false statement or representation to any department or agency of the United States as to any matter within its jurisdiction.				
FOR NRC USE ONLY	Reviewing Official Rachel S. Browder Health Physicist	Signature 	Date 10/20/03	
		Total Usage - Days to Date 79		

NRC FORM 241 COMMISSION (7-1999)	U.S. NUCLEAR REGULATORY REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES, AREAS OF EXCLUSIVE FEDERAL JURISDICTION, OR OFFSHORE WATERS	APPROVED BY OMB: NO. 3150-0013 EXPIRES 07/31/2002 Estimated burden per response to comply with this mandatory collection request: 15 minutes. This notification is required so that NRC may schedule inspection of the activities 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 Branch (T-6 E6), U.S. Nuclear Regulatory Commission, Washington DC 20555-0001, or by internet e-mail to bjs@nrc.gov , and to the Desk Officer, Office of Management and Budget, Washington DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.		
(Please read the instructions before completing this form)				
1. NAME OF LICENSEE (Person of Firm proposing to conduct the activities described below) ARIAS & KEZAR INC		2. TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> REVISION <input checked="" type="checkbox"/> CLARIFICATION		
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located) 10821 Gulfdale San Antonio, Texas 78216		4. LICENSEE CONTACT AND TITLE Rene Ramirez, Construction Service Manager		
		5. TELEPHONE NUMBER (210) 308-5884	6. FACSIMILE NUMBER (210) 308-5886	
7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20				
<input type="checkbox"/> WELL LOGGING <input type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS <input type="checkbox"/> TELETHERAPY/IRRADIATOR SERVICE				
<input checked="" type="checkbox"/> PORTABLE GAUGES <input type="checkbox"/> OTHER (Specify)				
<input type="checkbox"/> RADIOGRAPHY REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)				
8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE Mapco, Inc. 427 West Cevallos San Antonio, Texas 78204		9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION Ft. Sam Houston Coliseum Road Ft. Sam Houston Texas		
		10. CLIENT TELEPHONE NUMBER 210- 224-0722	11. WORK LOCATION TELEPHONE NUMBER 210-	
12. DATES SCHEDULED FROM 10/16/03 TO 10/16/03		13. NUMBER OF WORKED DAYS 1	14. ADD 15. DELETE	
		16. LOCATION REFERENCE NUMBER NUMBER TO BE ASSIGNED BY NRC 000344		
LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE				
17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED USED, INSTALLED, SERVICED, OR TESTED Cs137/Am-241; Be 8-mCi/40-mCi				
18. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE, AS SPECIFIED AIN ITEM 9 ABOVE (Four copies of the specific license must accompany the initial NRC Form 241.)		LICENSE NUMBER LO4964	STATE Tx	
		EXPIRATION DATE April 30, 2006		
19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)				
I, THE UNDERSIGNED, HEREBY CERTIFY THAT:				
a. All information in this report is true and complete				
b. I have read and understand the provision of the general license 10 CFR 150.20 reprinted on the instructions of this form; and understand that I am required to comply with these provisions as to all byproduct, source, or special nuclear material which I possess and use in non-Agreement States or offshore waters under the general license for which this report is filed with the U.S. Nuclear Regulatory Commission.				
c. I understand that activities, including storage, conducted in non-Agreement States under general license 10 CFR 150.20 are limited to a total of 180 days in calendar year. With the exception of work conducted in off-shore waters, which is authorized for an unlimited period of time in the calendar year.				
d. I understand that I may be inspected by NRC at the above listed work site locations and at the Licensee home office address for activities performed in non-Agreement States or offshore waters.				
e. I understand that conduct of any activities not described above, including conduct of activities on dates or locations different from those described above or without NRC authorization, may subject me to enforcement action including civil or criminal penalties.				
CERTIFYING OFFICER – RSO OR Management Representative (Name and Title) Rene Ramirez, Construction Service Manager		Signature 	Date 10/16/03	
WARNING: False statements in this certificate may be subject to civil and/or criminal penalties. NRC regulations require that submissions to the NRC be complete and accurate in all material respects. 18 U.S.C. Section 1001 makes it a criminal offense to make a willfully false statement or representation to any department or agency of the United States as to any matter within its jurisdiction.				
FOR NRC USE ONLY	Reviewing Official Rachel S. Browder Health Physicist	Signature 	Date 10/20/03	
			Total Usage – Days to Date 78	

NRC FORM 241 COMMISSION (7-1999)	U.S. NUCLEAR REGULATORY REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES, AREAS OF EXCLUSIVE FEDERAL JURISDICTION, OR OFFSHORE WATERS	APPROVED BY OMB: NO. 3150-0013 EXPIRES 07/31/2002 Estimated burden per response to comply with this mandatory collection request: 15 minutes. This notification is required so that NRC may schedule inspection of the activities 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 Branch (T-6 E6), U.S. Nuclear Regulatory Commission, Washington DC 20555-0001, or by internet e-mail to bjis@nrc.gov , and to the Desk Officer, Office of Management and Budget, Washington DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.
(Please read the instructions before completing this form)		
1. NAME OF LICENSEE (Person of Firm proposing to conduct the activities described below) ARIAS & KEZAR INC		2. TYPE OF REPORT <input type="checkbox"/> INITIAL <input type="checkbox"/> REVISION <input checked="" type="checkbox"/> CLARIFICATION
3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located) 10821 Gulfdale San Antonio, Texas 78216		4. LICENSEE CONTACT AND TITLE Rene Ramirez, Construction Service Manager
		5. TELEPHONE NUMBER (210) 308-5884
		6. FACSIMILE NUMBER (210) 308-5886
7. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20 <input type="checkbox"/> WELL LOGGING <input type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS <input type="checkbox"/> TELETHERAPY/IRRADIATOR SERVICE <input checked="" type="checkbox"/> PORTABLE GAUGES <input type="checkbox"/> OTHER (Specify) <input type="checkbox"/> RADIOGRAPHY REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)		
8. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE Garco 901 Mason San Antonio, Texas 78208		9. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION FY-03 Student Dormitory - Lackland Annex Lackland Air Force Base, Texas
		10. CLIENT TELEPHONE NUMBER 210- 224-0722
		11. WORK LOCATION TELEPHONE NUMBER 210-
12. DATES SCHEDULED FROM 10/15/03 TO 10/15/03	13. NUMBER OF WORKED DAYS 1	14. ADD 15. DELETE 16. LOCATION REFERENCE NUMBER NUMBER TO BE ASSIGNED BY NRC 000104
LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 9-16 ABOVE		
17. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED USED, INSTALLED, SERVICED, OR TESTED Cs137/Am-241; Be 8-mCi/40-mCi		
18. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE, AS SPECIFIED AIN ITEM 9 ABOVE (Four copies of the specific license must accompany the initial NRC Form 241.)		LICENSE NUMBER LO4964
		STATE Tx
		EXPIRATION DATE April 30, 2006
19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT) I, THE UNDERSIGNED, HEREBY CERTIFY THAT: a. All information in this report is true and complete b. I have read and understand the provision of the general license 10 CFR 150.20 reprinted on the instructions of this form; and understand that I am required to comply with these provisions as to all byproduct, source, or special nuclear material which I possess and use in non-Agreement States or offshore waters under the general license for which this report is filed with the U.S. Nuclear Regulatory Commission. c. I understand that activities, including storage, conducted in non-Agreement States under general license 10 CFR 150.20 are limited to a total of 180 days in calendar year. With the exception of work conducted in off-shore waters, which is authorized for an unlimited period of time in the calendar year. d. I understand that I may be inspected by NRC at the above listed work site locations and at the Licensee home office address for activities performed in non-Agreement States or offshore waters. e. I understand that conduct of any activities not described above, including conduct of activities on dates or locations different from those described above or without NRC authorization, may subject me to enforcement action including civil or criminal penalties.		
CERTIFYING OFFICER - RSO OR Management Representative (Name and Title) Rene Ramirez, Construction Service Manager		Signature 
		Date 10/15/03
WARNING: False statements in this certificate may be subject to civil and/or criminal penalties. NRC regulations require that submissions to the NRC be complete and accurate in all material respects. 18 U.S.C. Section 1001 makes it a criminal offense to make a willfully false statement or representation to any department or agency of the United States as to any matter within its jurisdiction.		
FOR NRC USE ONLY	Reviewing Official Rachel S. Browder Health Physicist	Signature 
		Date 10/16/03
		Total Usage - Days to Date 77