

LICENSE STATUS CHANGE CONTROL

(For Terminated, Expired & Retired Licenses)

License No. SMB-1541 Docket No. 040-08980
 Licensee: Heritage Minerals, Inc. Expiration Date: 06/30/13
 Address: Route 70, Mile Marker 41 Mail Control No. 136715
Lakehurst, Manchester, NJ
 Licensee Contact: Anthony Thompson Date of Contact: March 4, 2005
 Title of Contact: Attorney Telephone No. 202-496-0780

Basis for termination or retirement:
SRM-SECY-06-017, SECY-06-017, and associated documents
(dose assessment, environmental assessment, con firmatory surveys)

Verification:

- | | | | | |
|--|-----|-------------------------------------|----|--------------------------|
| (1) Form 314 or Equivalent | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| (2) L/N <u>SUA-1358</u> has received material and is authorized for it | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| (3) Close-out survey by licensee required | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| (4) Close-out survey by NRC required | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| (5) NRC Close-out survey performed and approved by Branch Chief | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |

Action to be taken:

- | | | | | |
|---|-----|-------------------------------------|----|-------------------------------------|
| (1) Retire/Terminate license | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| (2) Change to Status "4" in LTS | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| (3) Remove from the Materials Docket room after _____ | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
| (4) L/N _____ replaced/supersedes L/N _____ | Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |

License Reviewer Approval & Date: Patricia Adde / RA / 9/19/06

Branch Chief Approval & Date: Marie Miller 9/19/06

LAT Initials & Date entered into LTS: MAP 9/19/2006

✓ Box if Status "4" Verified

cc: Expired License No. _____
 New License No. _____

S.Villar, RI