

El Paso Corporation
d/b/a ANR Pipeline Company

4. Describe the status of the surveillance program (i.e., surveys, wipe tests, quality control) at the present time and the expected status at the time that control is to be transferred.

A. Description of the status of all surveillance program:

See attached response

B. Surveillance Items & Records: calibrations, leak tests, surveys, inventories, and accountability requirements will be current at the time of transfer

Yes [] No (explain)

5. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to the transferee or to NRC, as appropriate. These records include documentation of surveys of ambient radiation levels and fixed and/or removable contamination, including methods and sensitivity.

Records transferred to:
 New licensee [] NRC for license termination [] Not applicable

6. Confirm that the transferee will abide by all constraints, conditions, requirements and commitments of the transferor or that the transferee will submit a complete description of the proposed licensed program.

[] Description of proposed licensed program attached

OR

TransCanada will abide by all constraints, conditions, requirements and commitments of El Paso Corporation d/b/a ANR Pipeline Company

Stephen J. Devisi/BSO
Signature/Title
Transferee

David J. Callahan
Signature/Title
Transferor

6/26/07
date

6/27/07
date

OR

[] Not applicable (name change only)

Certifying Officer - Signature

Date

Certifying Officer - Typed name and title

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LFMS USE)

INFORMATION FROM LTS

Program Code: 03120
Status Code: 0
Fee Category: 3P
Exp. Date: 20110831
Fee Comments:
Decom Fin Assur Reqd: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: EL PASO CORPORATION
Received Date: 20070703
Docket No: 3035786
Control No.: 471446
License No.: 42-32335-01
Action Type: Termination

2. FEE ATTACHED

Amount: _____
Check No.: _____

3. COMMENTS

Signed *William Guadalupe*
Date 05-28

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /_/)

1. Fee Category and Amount: _____

2. Correct Fee Paid. Application may be processed for:

Amendment _____
Renewal _____
License _____

3. OTHER

Signed _____
Date _____