



P. O. Box 577~506 W. Smith
Wayne City, IL 62895
24 Hour Answering Service

March 28, 2013

Radioactive Material License:
IL-02277-01

Geoffrey Warren
Division Of Nuclear Material Safety
U.S. Nuclear Regulatory Commission, Region III
2443 Warrenville Road, Suite 210
Lisle, IL 60532

Subject: Corrective Actions for Indiana Reciprocity

Dear Mr. Warren:

I am writing in regards to the corrective actions GeoLog Well Services, Inc. is taking for not filing for reciprocity (Indiana) with the U.S. Nuclear Regulatory Commission since our company's inception in 2005.

GeoLog Well Services, Inc. has immediately applied for reciprocity (Indiana) with the U.S. Nuclear Regulatory Commission. All paperwork and fees have been mailed as of March 25, 2013. (see attached Form 241, copy of our Illinois Radioactive Material License and copy of the pay stub of check #9145 for the amount of \$2,300.00)

RECEIVED APR 01 2013

GeoLog Well Services, Inc. is paying immediately, all past years reciprocity fees for the years 2005 - \$1,500.00, 2006 - \$1,800.00, 2007 - \$1,900.00, 2008 - \$1,500.00, 2009 - \$1,400.00, 2010 - \$1,800.00, 2011 - \$1,900.00 and 2012 - \$2,300.00 for a grand total of \$14,100.00. (see copy of check #9158 for \$14,100.00)

We understand the rules and regulations of reciprocity (Indiana) with the U.S. Nuclear Regulatory Commission and plan on diligently following them now and in the future. GeoLog Well Services, Inc. strives to be compliant with all rules and regulations and wishes to have a good working relationship with the U.S. Nuclear Regulatory Commission.

If you have any questions or need additional information, please feel free to call me anytime.

Sincerely,

A handwritten signature in black ink, appearing to read 'Greg K. Pottorff', written in a cursive style.

Gregory K. Pottorff
President / RSO
GeoLog Well Services, Inc.
618-895-2140 (Office)
618-895-3200 (Fax)
618-315-1540 (Cell.)

**REPORT OF PROPOSED ACTIVITIES IN
NON-AGREEMENT STATES, AREAS OF EXCLUSIVE
FEDERAL JURISDICTION, OR OFFSHORE WATERS**
(Please read the instructions before completing this form)

Estimated burden per response to comply with this mandatory collection request: 30 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 Information Services Branch (T-5 F53), U. S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0013), 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.

1. NAME OF LICENSEE (Person or firm proposing to conduct the activities described below)

GEOLOG WELL SERVICES, INC.

2. TYPE OF REPORT



INITIAL



CHANGE

3. ADDRESS OF LICENSEE (Mailing address or other location where licensee may be located)

P.O. BOX 577
506 W. SMITH STREET
WAYNE CITY, IL 62895

4. LICENSEE CONTACT AND TITLE

GREGORY K. POTTORFF - PRESIDENT / RSO

5. Office Number

(618) 895-2140

5a. Work Cell Number

(618) 315-1540

6. FACSIMILE NUMBER

(618) 895-3200

7. EMAIL ADDRESS

geolog@mvn.net

8. ACTIVITIES TO BE CONDUCTED UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20



WELL LOGGING



LEAK TESTING AND/OR CALIBRATIONS



TYPE OF SERVICE



PORTABLE GAUGES



OTHER (Specify)



RADIOGRAPHY



REGISTERED AS USER OF PACKAGING (CERTIFICATES OF COMPLIANCE NUMBERS)

9. CLIENT NAME, ADDRESS, CITY/COUNTY, STATE, ZIP CODE

10. ACTUAL PHYSICAL ADDRESS OF WORK LOCATION

(Street and Number or other location. Provide GPS coordinates if known.)

11. CLIENT TELEPHONE NUMBER

Office

Work Cell

12. WORK LOCATION TELEPHONE NUMBER

Office

Work Cell

13. DATES SCHEDULED

14. NUMBER OF
WORK DAYS

15. ADD

16. DELETE

17. LOCATION
REFERENCE NUMBER

FROM

TO

WEEKENDS



YES



NO

LIST ADDITIONAL WORK SITES ON SEPARATE SHEET(S) TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 10-17 ABOVE.

18. LIST RADIOACTIVE MATERIAL, WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED
(Include description of type and quantity of radioactive material, sealed sources, or devices to be used.)

Device Type/Sealed Sources

Model No.

19. AGREEMENT STATE SPECIFIC LICENSE WHICH AUTHORIZES THE UNDERSIGNED TO CONDUCT
ACTIVITIES WHICH ARE THE SAME, EXCEPT FOR LOCATION OF USE, AS SPECIFIED IN ITEM 10. ABOVE.
(One copy of the specific license must accompany the initial NRC Form 241.)

LICENSE NUMBER

IL-02277-01

STATE

IL

EXPIRATION DATE

JULY 31, 2015

20. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)

I, THE UNDERSIGNED, HEREBY CERTIFY THAT:

- All information in this report is true and complete.
- I have read and understand the provision of the general license 10 CFR 150.20 reprinted on the instructions of this form; and I 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.
- 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.
- 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.
- 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.

APPROVED BY (Printed Name and Title)

GREGORY K. POTTORFF - PRESIDENT / RSO

SIGNATURE

DATE

MARCH 25, 2013

TOTAL USAGE - DAYS TO DATE

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

APPROVED BY (Typed/Printed Name and Title)

SIGNATURE

DATE

TOTAL USAGE - DAYS TO DATE



NON-PUBLIC



SENSITIVE SECURITY RELATED, MD 3.4 Non-Public a.3

ADAMS ML#