

6
GL-718617-1
01/10/2013
NRC FORM 664
02 - 2004
10 CFR 31.5

SECTION 1
PAGE 1 of 2

U.S. NUCLEAR REGULATORY COMMISSION

GENERAL LICENSEE REGISTRATION

APPROVED BY OMB: NO. 3150-0198

EXPIRES: 03/31/2010

Estimated burden per response to comply with this mandatory collection request: 20 minutes. NRC will use this information to track general licensees and their devices to ensure a higher level of device accountability. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U. S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0000), 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.

Complete all six sections of this registration form. If any of the preprinted information is incorrect, provide the changes in the applicable boxes. USE CAPITAL LETTERS.

General License
Registration Number

SECTION 1 - GENERAL LICENSEE INFORMATION

6
Enter the company name and the street address/physical location of use for your device(s). For portable devices, specify the primary storage location. Do not use a P.O. Box address.

Company Name: NABORS COMPLETION AND PRODUCTION SERVICES CO.

Department:

Address Line 1: 614 EXPRESSWAY COURT

Address Line 2:

City: GAYLORD

State: MI

Zip Code: 49734 -

For NRC Use Only
(Do not write here)

Category:

Packet Receipt Date (MMDDYYYY):

Accession Number:

TSME10

Last Name: CESSNA

[illegible]

Middle Initial:

[illegible]

10

Extension:

--	--	--	--

--	--	--	--	--

HSE Radiation 3 Explosives Manager

Department:

S a f e t y

[illegible][illegible][illegible]

--	--

--	--

-

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

Our records indicate that you have these devices. Please update the information as necessary.

NRC Device Key 709187 (Internal Control Number)

Distributor/Distributed By: ~~TN TECHNOLOGIES, INC.~~

Thermo Fisher Scientific

Distributor License Number: ~~L01105~~

603524

Manufacturer Name: ~~TN TECHNOLOGIES, INC.~~

Thermo Fisher Scientific

Device Model (Not Source Model): 5190

Device Serial Number: B6975

Transfer Date (Receipt Date): 12/12/2002

☐ Not in possession of device
(Also complete Section 4.)

MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137	100.00000000	mCi
2			
3			
4			
5			
6			

GL-718617-16

01/10/2013

SECTION 3

SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

PAGE 3 of 3

Provide information about other devices you have that are subject to registration. Do not report specifically licensed devices.

Manufacturer Name

T h e r m o F i s h e r S c i e n t i f i c

Initial Transferor Name

T h e r m o F i s h e r S c i e n t i f i c

Initial Transferor License Number (if known)

6 0 3 5 2 4

Device Model Number (Not Source Model)

5 1 9 0

Device Serial Number

B 7 0 9 1

How acquired and date (e.g.,
from a distributor/manufacture,
other licensee, other source)?☒ Manufacturer/Initial Transferor listed above☐ Other General Licensee☐ Other SourceDate Transferred:
(Received)1 2 0 1 2 0 0 4
MM DD YYYY

Isotope (e.g. AM241)

Activity (e.g. 100)

Unit (e.g. mCi)

1.	C 5 1 3 7	2 0 0	m C i
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

GL-718817-17
01/10/2013

SECTION 5 - CERTIFICATION

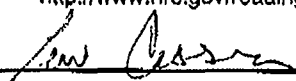
SECTION 5
PAGE 1 of 1

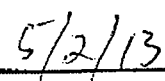
I hereby certify that:

- A. All information contained in this registration is true and complete to the best of my knowledge and belief.
- B. A physical inventory of the devices subject to registration has been completed, and the device information on this form has been checked against the device labeling.
- C. I am aware of the requirements of the general license, provided in 10 CFR 31.5.

(Copies of applicable regulations may be viewed at the NRC website at:

<http://www.nrc.gov/reading-rm/doc-collections/cfr>)

_____

_____

SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1) DATE

WARNING: FALSE STATEMENTS MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL ASPECTS. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY WRONG STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER IN ITS JURISDICTION.