



GL-725737-17  
04/23/2013  
**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 task 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](mailto: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

## SECTION 1 - GENERAL LICENSEE INFORMATION

**Registration Number**

**GL-725737-17**

**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.

[illegible]

Department:

S	t	i	m	a	n	e
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Address Line 1: 525 WEST MAIN STREET

[illegible]

Address Line 2:

[illegible]

City: KIMBALL

[illegible]

State: WV

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Zip Code: 24853 -

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[illegible]

FSME70



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**SECTION 1 - GENERAL LICENSEE INFORMATION (Continued)**

**Enter the name, telephone number and title of the person who is the responsible individual for the device(s).**

[illegible][illegible]

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HSE Radiation & Explosives Manager

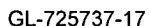
Department:

[illegible][illegible][illegible][illegible]

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## SECTION 2

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

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**NRC Device Key**                      **709182**                      **(Internal Control Number)**

Distributor/Distributed By: TN TECHNOLOGIES, INC.

[illegible]

Distributor License Number: L01105

[illegible]

Manufacturer Name: TN TECHNOLOGIES, INC.

[illegible]

Device Model (Not Source Model): 5190

[illegible]

Device Serial Number: B6899

[illegible]

Transfer Date (Receipt Date): 09/07/2001

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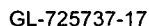
MM

DD

YYYY

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

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137	200.000000000	mCi
2			
3			
4			
5			
6			



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## SECTION 2 - DEVICES SUBJECT TO REGISTRATION

## SECTION 2

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

**NRC Device Key**                      **748916**                      **(Internal Control Number)**

Distributor/Distributed By: THERMO MEASURETECH

[illegible]

Distributor License Number: L03524

[illegible]

Manufacturer Name: THERMO MEASURETECH

[illegible]

Device Model (Not Source Model): 5190

[illegible]

Device Serial Number: B7048

[illegible]

Transfer Date (Receipt Date): 04/02/2004

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☐ 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	200.000000000	mCi
2			
3			
4			
5			
6			



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### SECTION 3

### SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

PAGE 1 of 1

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

Manufacturer Name

[illegible]

Initial Transferor Name

[illegible]

Initial Transferor License Number (if known)

[illegible]

Device Model Number (Not Source Model)

[illegible]

Device Serial Number

[illegible]

How acquired and date (e.g., from a distributor/manufacturer, other licensee, other source)?

- ☐ Manufacturer/Initial Transferor listed above

- ☐ Other General Licensee

Date Transferred:

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- ☐ Other Source

(Received)

MM

DD

Y Y Y Y

Isotope (e.g. AM241)

Activity (e.g. 100)

Unit (e.g. mCi)

[illegible]



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## SECTION 4

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**Provide information about devices listed in Section 2 or 6, but no longer in your possession.**

## Transfer Date:

(from Section 2 or 6)

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MM

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DD

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Y Y Y Y

☐ Whereabouts Unknown (complete Part 1 only)      ☐ Transferred to another general licensee (complete Parts 2 and 3)  
☐ Never Possessed the Device (complete Part 1 only)      ☐ Transferred to a Specific Licensee (Not the manufacturer)  
☐ Returned to Manufacturer (complete Part 1 only)      (complete Part 2)

[illegible][illegible][illegible][illegible][illegible][illegible]

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**Last Name:**

[illegible][illegible]

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[illegible]



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**SECTION 5 - CERTIFICATION**

**SECTION 5**  
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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>)

*Louis C. C...*

5-21-13

**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.





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**SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION**

**SECTION 6**

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**NRC Device Key:**

**Manufacturer License No:**

**Manufacturer Name:**

**Model Number:**

**Serial #:**

**Transfer Date:**