



GL-713265-18  
01/03/2014  
NRC FORM 664  
02 - 2004  
10 CFR 31.5

**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 [intofcollects@nrc.gov](mailto:intofcollects@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-713265-18

**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: DANA MINING COMPANY LLC

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Department: MINE #8

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Address Line 1: 2020 LAZZELLE UNION RD

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Address Line 2:

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City: MAIDSVILLE

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State: WV

Zip Code: 26541 -       -

**For NRC Use Only**  
*(Do not write here)*

Category:

Packet Receipt Date (MMDDYYYY):

Accession Number:





GL-713265-18  
01/03/2014

**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).

Last Name: ROHRSEN

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First Name: RICHARD

Middle Initial: A

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Telephone: (304) 296-9701

Extension: 239

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Title: SURFACE MINING ENGINEER

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**Enter the mailing address where correspondence regarding your device(s) should be sent.  
This address should be specific to the use or storage location of your device(s).**

Department: DANA MINING COMPANY LLC

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Address Line 1: 308 DENTS RUN ROAD

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Address Line 2:

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City: MORGANTOWN

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State: WV

--	--

Zip Code: 26501 - 1170

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GL-713265-18

01/03/2014

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

Grid for Manufacturer Name (26 cells)

Initial Transferor Name

Grid for Initial Transferor Name (26 cells)

Initial Transferor License Number (if known)

Grid for Initial Transferor License Number (10 cells)

Device Model Number (Not Source Model)

Grid for Device Model Number (26 cells)

Device Serial Number

Grid for Device Serial Number (20 cells)

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

Manufacturer/Initial Transferor listed above  
 Other General Licensee  
 Other Source

Date Transferred:

(Received) MM DD YYYY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1.	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.	<input type="text"/>	<input type="text"/>	<input type="text"/>
7.	<input type="text"/>	<input type="text"/>	<input type="text"/>
8.	<input type="text"/>	<input type="text"/>	<input type="text"/>
9.	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.	<input type="text"/>	<input type="text"/>	<input type="text"/>





**SECTION 4 - NOT IN POSSESSION OF DEVICE**

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

**Part 1**

Transfer Date:

NRC Device Key:

(from Section 2 or 6)

MM DD YYYY

Location of the Device:

- 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) (complete Part 2)
- Returned to Manufacturer (complete Part 1 only)

**Part 2** License Number of Recipient (if transferred to a specific licensee):

Company Name:

Department:

Address Line 1:

Address Line 2:

City:

State:   Zip Code:       -

**Part 3** Enter the name of the individual responsible for this device:

Last Name:

First Name:

Middle Initial:

Telephone Number:         Extension:

Title:





GL-713265-18  
01/03/2014

**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>)

*[Handwritten Signature]*

*02/07/14*

**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.





GL-713265-18  
01/03/2014

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

**SECTION 6**

oPAGE 1 of 1

**NRC Device Key:**

Manufacturer License No:

Manufacturer Name:

Model Number:

Serial #:

Transfer Date:

iana Mining Company LLC  
08 Dents Run Road  
organtown, WV 26501

**CERTIFIED MAIL**



7011 0470 0001 0412 9034



UNITED STATES  
POSTAL SERVICE

1000



20555

U.S. POSTAGE  
PAID  
GRANVILLE, WV  
26534  
FEB 10, 14  
AMOUNT

\$6.21

00093811-06



**--- Certified Mail ---  
RETURN RECEIPT  
REQUESTED**

Director, Office of Federal and State Materials  
and Environmental Management Programs  
ATTN: GLTS  
U.S. Nuclear Regulatory Commission  
Washington DC 20555-0001

**--- Certified Mail ---  
RETURN RECEIPT  
REQUESTED**