



PEABODY MIDWEST MINING, LLC

7100 Eagle Crest Boulevard
Evansville, Indiana 47715
812.434.8500

Certified Mail 7003 0500 0002 4291 3442

May 11, 2015

Director, Office of Federal and State Materials
and Environmental Management Programs
ATTN: GLTS
U.S. Nuclear Regulatory Commission
Washington DC 20555-001

**RE: General Licensee Registration
Peabody Midwest Mining LLC – Francisco Prep
License # GL-651075-19**

To whom it may concern:

Enclosed is a corrected General Licensee Registration for the above facility. If you have any questions, please contact me at mnichols@peabodyenergy.com or 812-434-8589.

Sincerely,

A handwritten signature in black ink, appearing to read "Melissa Nichols".

Melissa Nichols
Authorized Representative

Enclosure



GL-651075-19
 04/06/2015
 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
<small>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.</small>	

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-651075-19

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: PEABODY MIDWEST MINING, LLC

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Department: FRANCISCO PREP

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Address Line 1: COUNTY ROAD 725 EAST

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Address Line 2:

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City: FRANCISCO

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State: IN

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 Zip Code: 47649 -

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For NRC Use Only <i>(Do not write here)</i>	Category: <table border="1"><tr><td> </td><td> </td></tr></table>											
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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).

Last Name: PILCHER

P A N C A K E

First Name: DAN

Middle Initial: L

A L A N

Telephone: (814) 434-8500

Extension:

8 1 2 7 8 2 9 6 5 2

Title: CURRENT SAFETY OFFICER

R A D I A T I O N S A F E T Y O F F I C E R

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: PEABODY MIDWEST MINING, LLC

Address Line 1: 7100 EAGLE CREST BLVD

Address Line 2:

City: EVANSVILLE

State: IN

Zip Code: 47715 -





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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

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

PAGE 2 of 3

NRC Device Key 812982 (Internal Control Number)

Distributor/Distributed By: THERMO FISCHER SCIENTIFIC

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Distributor License Number: L03524

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Manufacturer Name: THERMO MEASURETECH

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Device Model (Not Source Model): 5201

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Device Serial Number: B5273

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Transfer Date (Receipt Date): 08/19/2009

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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	50.000000000	mCi																																						
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SECTION 4 - NOT IN POSSESSION OF DEVICE

**SECTION 4
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Provide information about devices listed in Section 2 or 6, but no longer in your possession.

Part 1

NRC Device Key:
(from Section 2 or 6)

Transfer Date:

MM DD YYYY

Location of the Device:

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

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:





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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>)


5-9-15

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: