

GL-725890-19

04/07/2015

NRC FORM 664

GL-725890-19

02 - 2004 10 CFR 31.5

GENERAL LICENSEE REGISTRATION

APPROVED BY OMB: NO. 3150-0198

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 FOLA/Privacy Services Branch (T-5 F52), U. S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollect@mrc.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 resoond 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

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: BP GULF OF MEXICO

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Add	ress	Line	2 :	LAT:	28° 3	34' 5	0.818	38"L(DNG	: -88°											
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SECTION 1

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EXPIRES: 03/31/2010

U.S. NUCLEAR REGULATORY COMMISSION





SECTION 1

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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:	MUF	RRAY	,															
First Name	: VAL	ERIE									Ν	liddle	e Initi	ial:				
]								
Telephone:	(281	1) 366	5-63	52							E	ixten	sion:					
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Title:	CIH	- MAI	NAG	ER														
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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

SECTION 2

sary.	PAGE 1 of 1

NRC Device Key	820326	(Internal Control Number)
Distributor/Distributed By:	ROXAR, IN	NC.
Distributor License Number:	42-27765-0	01
Manufacturer Name: ROXAR,		
Device Model (Not Source Mo	del): RFM S	SH-7950
Device Serial Number: 2001-0	578	
	00/45/2002	
Transfer Date (Receipt Date):		Not in possession of device (Also
		└── complete Section 4.)
		····,
MM DD Y	/ YY	
		· · · · · · · · · · · · · · · · · · ·
MM DD YY Isotope (e.g. AM241) 1 CS137	A	Activity (e.g. 100) Unit (e.g. mCi) 30.00000000 mCi
Isotope (e.g. AM241)	A	Activity (e.g. 100) Unit (e.g. mCi)
Isotope (e.g. AM241)	A	Activity (e.g. 100) Unit (e.g. mCi)
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Isotope (e.g. AM241) 1 CS137	A	Activity (e.g. 100) Unit (e.g. mCi)
Isotope (e.g. AM241) 1 CS137 2 2	A	Activity (e.g. 100) Unit (e.g. mCi)
Isotope (e.g. AM241) 1 CS137 2 2	A	Activity (e.g. 100) Unit (e.g. mCi)
Isotope (e.g. AM241) 1 CS137 2 3	A	Activity (e.g. 100) Unit (e.g. mCi)
Isotope (e.g. AM241) 1 CS137 2 3	Æ	Activity (e.g. 100) Unit (e.g. mCi)
Isotope (e.g. AM241) 1 CS137 2 3 4	Æ	Activity (e.g. 100) Unit (e.g. mCi)
Isotope (e.g. AM241) 1 CS137 2 3 4	Æ	Activity (e.g. 100) Unit (e.g. mCi)







SECTION 3

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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.

Man	Manufacturer Name																									
Initia	al Tra	Insfe	ror N	lame	•											-	-				<u> </u>					
																					Τ					
Initia	al Tra	Insfe	ror L	icens	se Ni	umbe	er (if	kno	wn)	ı			1	•	L	I	8	r	1	1		<u> </u>	1	1	.	LJ
				[
Dev	ice N	lode	l Nur	nber	(Not	Sou	rce N	lode	el)							_										
Dev	ce S	erial	Num	nber																						
Ном	acqu	uired	land	date	e (e o	1	01	Man	ufact	urer/	Initia	l Tra	nsfei	or lis	ted a	above	e									
from	a di r lice	strib	utor/i	manu	Ifacti	urer,	00	Othe	r Ge	nera	l Lice	ensee	e	Date	e Tra	Insfe	rred:									
oune		11300	5, UI			<i>.</i>);	00	Othe	r So	urce				(Re	ceive	ed)			MM		DD)		ΥY	ΥY	
	i	Isoto	ope (e.g. A	\M24	1)				Activ	vity (e	e.g. 1	00)									_		Unit	(e.g.	mCi)
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2.	[-]				
3.	[]				
4.	[]								l]				
] [[[L]]				
5.	l]	1			
6.																						ļ				
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8.		-															,]				
9.	[-]				·
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GL-725890-19 04/07/2015 Provide information about devices listed in Section 2 or 6, but no longer in your possession.	SECTION 4 PAGE 1 of 1
Part 1 Transfer Date: NRC Device Key: Image: Compare the device for th	
 Whereabouts Unknown (complete Part 1 only) Never Possessed the Device (complete Part 1 only) Returned to Manufacturer (complete Part 1 only) Transferred to a Specific Licensee (I (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:	dle 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:

ttp://www.nfc.gov/reading-rm/doc-gollections/cfit)

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.





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: