

GLTS



GL-726044-23
04/11/2018
NRC FORM 664
(01 - 2018)
10 CFR 31.5

SECTION 1
PAGE 1 of 2

U.S. NUCLEAR REGULATORY COMMISSION

GENERAL LICENSEE REGISTRATION

APPROVED BY OMB: NO. 3150-0198

OMB EXPIRATION DATE: 02/28/2019

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 Information Services Branch (T-2 F43), U. S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0198), 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-726044-23

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

Company Name: NOBLE ENERGY, INC.

[Grid for company name]

Department: GOM EHSR

[Grid for department]

Address Line 1: 1001 NOBLE ENERGY WAY

[Grid for address line 1]

Address Line 2: NEC 2 11TH FLOOR

[Grid for address line 2]

City: HOUSTON

[Grid for city]

State: TX [] []

Zip Code: 77070 - [] [] [] [] [] [] - [] [] [] []

For NRC Use Only <i>(Do not write here)</i>	Category: [] []
	Packet Receipt Date (MMDDYYYY): [] [] [] [] [] [] [] []
	Accession Number: [] [] [] [] [] [] [] [] [] [] [] []





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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: ~~FOREMAN~~

M O O R E

First Name: ~~SHAWN~~

Middle Initial:

T E R R Y

W

Business Telephone Number: ~~(281) 943-1532~~

Extension:

2 8 1 9 4 3 1 5 0 9

Title: MANAGER GOM EHSR

Enter the mailing address where correspondence regarding your device(s) should be sent. This address should be specific to the physical location where the devices are used and/or stored.

Department: EMILY COX

Address Line 1: 1001 NOBLE ENERGY WAY

Address Line 2: NEC 2 11TH FLOOR

City: HOUSTON

State: TX

Zip Code: 77070 -





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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 841190 (Internal Control Number)

Distributor/Distributed By: MULTI PHASE METERS, INC.

[Empty grid box]

Distributor License Number: L06458

[Empty grid box]

Manufacturer Name: MULTIPHASE METERS, INC.

[Empty grid box]

Device Model (Not Source Model): SS-MPM SERIES

[Empty grid box]

Device Serial Number: 4467-01-01

[Empty grid box]

Transfer Date: 04/05/2016

[Empty grid box for date]

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 [Empty grid]	300.000000000 [Empty grid]	mCi [Empty grid]
2	[Empty grid]	[Empty grid]	[Empty grid]
3	[Empty grid]	[Empty grid]	[Empty grid]
4	[Empty grid]	[Empty grid]	[Empty grid]
5	[Empty grid]	[Empty grid]	[Empty grid]
6	[Empty grid]	[Empty grid]	[Empty grid]





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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.

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NRC Device Key **841191** (Internal Control Number)

Distributor/Distributed By: MULTI PHASE METERS, INC.

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Distributor License Number: L06458

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Manufacturer Name: MULTIPHASE METERS, INC.

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Device Model (Not Source Model): SS-MPM SERIES

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Device Serial Number: 4467-01-02

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Transfer Date: 04/05/2016

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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)																								
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SECTION 5 - CERTIFICATION

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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>)

[Handwritten Signature]

5/3/2018

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: 832112

Manufacturer License No: L05867

Manufacturer Name: FRAMO ENGINEERING AS

Model Number: SUBSEA PHASE WA Serial #: 269

Transfer Date: 02/09/2012

Isotope: BA133

Activity: 10.000000000

Unit: MBq

NRC Device Key: 832113

Manufacturer License No: L05867

Manufacturer Name: FRAMO ENGINEERING AS

Model Number: SUBSEA PHASE WA Serial #: 270

Transfer Date: 04/24/2012

Isotope: BA133

Activity: 10.000000000

Unit: MBq