

USNRC REGION II - MATERIALS LICENSING/INSPECTION BRANCHES (FAX 404-562-4955) (VERIFY 404-562-4732)

**NRG FORM 241 - U.S. NUCLEAR REGULATORY COMMISSION**  
(8-99) 10 CFR 150

**REPORT OF PROPOSED ACTIVITIES IN NON-AGREEMENT STATES**  
 (Please read the instructions on the cover sheet before completing this form.)

**APPROVED BY OMB NO. 3150-0013**  
 Estimated burden per response to comply with the mandatory information collection request: 16 minutes. This collection is required so that NRC may schedule inspections of the activities to ensure that they are conducted in accordance with requirements for protection of the public health and safety. Forward comments regarding burden estimates to the Information and Records Management Branch (1-6 F33), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, and to the Paperwork Reduction Project (3150-0013), Office of Management and Budget, Washington, DC 20503. NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

**EXPIRES: 6/30/00**

**1. NAME OF LICENSEE (Please print name of licensee to conduct the activities described below)**  
 Geosciences, Inc.

**2. TYPE OF REPORT**  
 INITIAL  
 REVISION  
 CLARIFICATION

**3. CONTROL NUMBER (Leave Blank - Number to be assigned by NRC)**

**4. ADDRESS OF LICENSEE (Mailing address or other location where activities may be located)**  
 3202 Gillionville Road  
 Albany, GA 31707  
 Taxpayer ID #58-1951558

**5. LICENSEE CONTACT**  
 Jerry E. Humphries (RSO)

**6. TELEPHONE NUMBER (Include Area Code)**  
 (912) 432-5805

**7. FACSIMILE NUMBER (Include Area Code)**  
 (912) 432-7018

**B. ACTIVITIES TO BE CONDUCTED IN NON-AGREEMENT STATES UNDER THE GENERAL LICENSE GIVEN IN 10 CFR 150.20**

<input type="checkbox"/> WELL LOGGING	<input type="checkbox"/> LEAK TESTING AND/OR CALIBRATIONS	<input type="checkbox"/> TELLERTHERAPY/RADIATOR SERVICE
<input checked="" type="checkbox"/> PORTABLE GAUGES	<input checked="" type="checkbox"/> OTHER (Specify): Soil Moisture/Density and Asphalt Density	
<input type="checkbox"/> RADIOGRAPHY	<input type="checkbox"/> TRANSPORTATION OR PROGRAM APPROVAL NO & REV NO	<input type="checkbox"/> REGISTERED AS USER OF RADIOGRAPHS (CERTIFICATES OF COMPLIANCE NOS)

**8. CLIENT NAME, ADDRESS, CITY/STATE, ZIP CODE**  
 Bell Constructors (Project Mailing)  
 P.O. Box 3066  
 Warner Robins, GA 31099

**9. WORK LOCATION ADDRESS (Street and Number or other location. Give as complete an address or directions as possible.)**  
 B-1 Bed Down Project  
 Warner Robins Air Force Base  
 Warner Robins, Georgia

**10. CLIENT TELEPHONE NUMBER (Include Area Code)**  
 (912) 923-0992

**11. WORK LOCATION TECHNICIAN AUTHORIZED TO PERFORM WORK (Print Name and Title)**  
 T. Croft, C. Mathis, C. Allen, K. Lawrence

**12. WORK LOCATION TELEPHONE NUMBER (Include Area Code)**  
 (912) 923-0992

**13. DATES SCHEDULED**  
 FROM: Sept 7, 1999 TO: Sept 10, 1999

**14. NUMBER OF WORK DAYS**  
 4

**15. LOCATION REFERENCE NUMBER**  
 000219

**16. LIST ADDITIONAL WORK SITES ON SEPARATE SHEET TO INCLUDE ALL INFORMATION CONTAINED IN ITEMS 8-15 ABOVE.**

**17. USE RADIOACTIVE MATERIAL WHICH WILL BE POSSESSED, USED, INSTALLED, SERVICED, OR TESTED IN NON-AGREEMENT STATES (Include description of type and quantity of radioactive material, sealed sources, or sources to be used.)**  
 Not Applicable

**18. AGREEMENT STATE SPECIFIC LICENSES WHICH AUTHORIZE THE UNDERSIGNED TO CONDUCT ACTIVITIES WHICH ARE THE SAME EXCEPT FOR LOCATION OF USE AS SPECIFIED IN ITEMS 8 ABOVE. (Only copies of the license forms must accompany the original NRC Form 241.)**

<b>LICENSE NUMBER</b> GA 1211-1	<b>STATE</b> Georgia	<b>EXPIRATION DATE</b> 7-31-2001	<b>TOTAL USAGE DAYS TO DATE</b>
------------------------------------	-------------------------	-------------------------------------	---------------------------------

**19. CERTIFICATION (MUST BE COMPLETED BY APPLICANT)**

I, THE UNDERSIGNED, HEREBY CERTIFY THAT:

- All information in this report is true and complete.
- I have read and understand the provision of the general license 10 CFR 150.20 reprinted on the cover sheet of this form set; and I understand that I am required to comply with these provisions as to all byproduct, source, or special nuclear material which I possess and use in non-agreement states or offshore waters under the general license for which this report is filed with the U.S. Nuclear Regulatory Commission.
- I understand that activities, including storage, conducted in non-agreement states under general license 10 CFR 150.20 are limited to a total of 180 days in calendar year.
- I understand that I may be inspected by NRC at the above listed work site locations and at the licensee home office address for activities performed in non-agreement states or offshore waters. I am also aware that I will be responsible for any fees associated with such inspections.
- I understand that conduct of any activities not described above, including conduct of activities on dates or locations different from those described above or without NRC authorization, may subject me to enforcement action, including civil or criminal penalties.

**CERTIFYING OFFICER - CEO or Management Representative (Print Name and Title)**  
 William Zino, LOB MANAGER

**SIGNATURE**  
 [Signature]

**DATE**  
 9/1/99

**WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.**

**FOR NRC USE ONLY**

**AUTHOR**  
 D.M. Heim, LA/DNMS

**SIGNATURE**  
 [Signature]

**DATE**  
 9/1/99

Received on 9/1/99 on II NE 5 cc R X