



## WOLF RUN MINING COMPANY

Wolf Run Mining Company  
245 Enoxy Blvd.  
Tallmansville, WV 26237  
(304) 471-3300

April 29, 2016

Director, Office of Nuclear Material Safety  
And Safeguards  
U.S. Nuclear Regulatory Commission  
Washington, DC 20555-0001

GLTS

To Whom It May Concern:

Wolf Run Mining Company's Sawmill Run Preparation Plant, Permit ID. GL-723624-17, wishes to submit our annual General License Information for 2016. Our payment fees, (\$400.00), is scheduled to be mailed out early next week.

Should you have any questions concerning this matter please call me at (304) 471-3300, Ext. 3301.

Sincerely,

A handwritten signature in cursive script, appearing to read "Joe Myers".

Joe Myers  
Manager of Engineering



GL-723624-20  
04/06/2016  
**NRC FORM 664**  
07 - 2015  
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: 04/30/2016**

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 FOIA, Privacy, and Information Collections Branch (T-5 F53), U. S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to [Infocollects.Resource@nrc.gov](mailto:Infocollects.Resource@nrc.gov), and to the Desk Officer, Office of Information and Regulatory Affairs, NEQB-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-723624-20**

**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: WOLF RUN MINING

[illegible]

Department: SAWMILL RUN PREPARATION PLANT

[illegible]

Address Line 1: 245 ENOXY BLVD

[illegible]

**Address Line 2:**

[illegible]

City: TALLMANSVILLE

[illegible]

State: WV

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Zip Code: 26237 -

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

**Category:**

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Packet Receipt Date (MMDDYYYY)

[illegible]

**Accession Number:**

[illegible]



SECTION 1  
PAGE 2 of 2

**Enter the name, telephone number and title of the person who is the responsible individual for the device(s).**

[illegible][illegible]

9

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[illegible]

**This address should be specific to the use or storage location of your device(s).**

[illegible][illegible][illegible][illegible]

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## SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

## SECTION 2

PAGE 1 of 4

**NRC Device Key**                      **793622**                      **(Internal Control Number)**

Distributor/Distributed By: THERMO FISCHER SCIENTIFIC

[illegible]

Distributor License Number: L03524

[illegible]

Manufacturer Name: THERMO MEASURETECH

[illegible]

Device Model (Not Source Model): 5201

[illegible]

Device Serial Number: B5134

[illegible]

Transfer Date (Receipt Date): 12/10/2008

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MM

DD

YY YY

☐ Not in possession of device (Also complete Section 4.)

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137	100.000000000	mCi
2			
3			
4			
5			
6			



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## SECTION 2

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[illegible][illegible][illegible][illegible][illegible]

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MM DD YY YY

	Isotope (e.g. AM241)	Activity (e.g. 100)	Unit (e.g. mCi)
1	CS137 <div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	100.000000000 <div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	mCi <div> <div></div> <div></div> <div></div> </div>
2	<div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
3	<div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>
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6	<div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> <div></div> </div>	<div> <div></div> <div></div> <div></div> </div>



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## SECTION 2

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Distributor/Distributed By: THERMO FISCHER SCIENTIFIC

[illegible]

Distributor License Number: L03524

[illegible]

Manufacturer Name: THERMO MEASURETECH

[illegible]

Device Model (Not Source Model): 5201

[illegible]

Device Serial Number: B5136

[illegible]

Transfer Date (Receipt Date): 12/10/2008

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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)
1	CS137	100.000000000	mCi
2			
3			
4			
5		/	
6			



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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 818752 (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): 5201A

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Device Serial Number: B53

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Transfer Date (Receipt Date): 11/07/2011

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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 <table><tr><td></td><td></td><td></td><td></td><td></td></tr></table>						50.000000000 <table><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>													mCi <table><tr><td></td><td></td><td></td></tr></table>			
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**Provide information about other devices you have that are subject to registration. Do not report specifically licensed devices.**

[illegible][illegible][illegible][illegible][illegible]

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(Received)

M·M

DD

Y Y Y Y

Unit (e.g. mCi)

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[illegible]

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[illegible]

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[illegible]

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

## Transfer Date:

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Y Y Y Y

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

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

[illegible]

Company Name:

[illegible]

Department:

[illegible]

Address Line 1:

[illegible]

Address Line 2:

[illegible]

City:

[illegible]

State:

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Zip Code:

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### Part 3

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

Last Name:

[illegible]

First Name:

[illegible]

Middle Initial:

1

Telephone Number:

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Extension:

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Title:

[illegible]



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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>)

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:**