



Akilah C. Calhoun
Training Team Lead

Phillips 66
2331 CityWest Blvd.
HQ-N872-05
Houston, TX 77042
phone 832.765.1686
fax 832.765.0127

December 15, 2017

Director, Office of Nuclear Material Safety and Safeguards
ATTN: GLTS
U.S Nuclear Regulatory Commission
Washington, DC 20555-0001

Dear Sir or Madam:

Please cancel General License Registration Number for GL-704462-21, Phillips 66 Pipeline is no longer in possession of the devices. Enclosed is a completed NRC Form 664 and a copy of the acknowledgment letter from QSA Global who now has possession of the devices.

Feel free to contact me if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Akilah C. Calhoun", followed by a long horizontal line.

Akilah C. Calhoun, R.S.O.
akilah.calhoun@p66.com
(832) 765-1686

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

NRC FORM 664
(02-2016)
10 CFR 31.5SECTION 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 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, 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 - 7 0 4 4 6 2 - 2 1

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:

P H I L L I P S 6 6 P I P E L I N E

Department:

Address Line 1:

2 1 1 6 I D L E W O O D R O A D

Address Line 2:

City:

J E F F E R S O N C I T Y

State:

M O

Zip Code:

6 5 1 0 9 -

For NRC Use Only
(Do not write here)

Category:

Packet Receipt Date (MMDDYYYY)

Accession Number

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

SECTION 1
PAGE 2 of 2

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:

G I P S O N

First Name:

D E R I C K

Middle Initial:

D

Telephone:

5 7 3 - 6 3 6 - 4 4 2 5

Extension:

1 3

Title:

A R E A S U P E R V I S O R

Enter the mailing address where correspondence regarding your device(s) should be sent.

Department:

Address Line 1:

2 1 1 6 I D L E W O O D R O A D

Address Line 2:

City:

J E F F E R S O N C I T Y

State:

M O

Zip Code:

6 5 1 0 9 -

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

SECTION 2

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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 497023 (Internal Control Number)

Distributor/Distributed By:

T N T E C H N O L O G I E S , I N C .

Distributor License Number:

L 0 1 1 0 5

Manufacturer Name:

T N T E C H N O L O G I E S , I N C

Device Model (Not Source Model):

5 1 9 0

Device Serial Number:

7 2 4

☒ Not in possession of device (Also complete Section 4)

Transfer Date: MM/DD/YYYY

1 2 1 4 2 0 1 7
MM DD YYYY

Isotope (e.g., AM241)

Activity (e.g., 100)

Unit (e.g., mCi)

1.	C S 1 3 7	2 0 0	m C i
2.			
3.			
4.			
5.			
6.			

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

SECTION 2

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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 700404

(Internal Control Number)

Distributor/Distributed By:

T N T E C H N O L O G I E S , I N C .

Distributor License Number:

L 0 1 1 0 5

Manufacturer Name:

T N T E C H N O L O G I E S , I N C

Device Model (Not Source Model):

5 2 0 1

Device Serial Number:

B 5 8 1

☒ Not in possession of device (Also complete Section 4)

Transfer Date: MM/DD/YYYY

1 2 1 5 2 0 1 7
MM DD YYYY

Isotope (e.g., AM241)

Activity (e.g., 100)

Unit (e.g., mCi)

1.

C S 1 3 7

1 0 0

m C i

2.

3.

4.

5.

6.

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

SECTION 2

PAGE 3 OF 4

SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 700405

(Internal Control Number)

Distributor/Distributed By:

T N T E C H N O L O G I E S , I N C .

Distributor License Number:

L 0 1 1 0 5

Manufacturer Name:

T N T E C H N O L O G I E S , I N C

Device Model (Not Source Model):

5 2 0 1

Device Serial Number:

B 5 8 2

☒ Not in possession of device (Also complete Section 4)

Transfer Date: MM/DD/YYYY

1 2 1 5 2 0 1 7

MM

DD

YYYY

Isotope (e.g., AM241)

Activity (e.g., 100)

Unit (e.g., mCi)

1.

C S 1 3 7

1 0 0

m C i

2.

3.

4.

5.

6.

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

SECTION 2

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SECTION 2 - DEVICES SUBJECT TO REGISTRATION

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

NRC Device Key 812630

(Internal Control Number)

Distributor/Distributed By:

T N T E C H N O L O G I E S , I N C .

Distributor License Number:

L 0 1 1 0 5

Manufacturer Name:

T N T E C H N O L O G I E S , I N C

Device Model (Not Source Model):

5 1 9 0

Device Serial Number:

B 7 6 1

☒ Not in possession of device (Also complete Section 4)

Transfer Date: MM/DD/YYYY

1 2 1 5 2 0 1 7
MM DD YYYY

Isotope (e.g., AM241)

Activity (e.g., 100)

Unit (e.g., mCi)

1.	C S 1 3 7	2 0 0	m C i
2.			
3.			
4.			
5.			
6.			

Date _____

SECTION 3 - ADDITIONAL DEVICES SUBJECT TO REGISTRATION

Provide information about other devices you have that are subject to registration. Do not report specifically licensed devices.

Manufacturer Name

[illegible]

Initial Transferor Name

[illegible]

Initial Transferor License Number (if known)

[illegible]

Device Model Number (Not Source Model)

[illegible]

Device Serial Number

[illegible]

How acquired and date (e.g., from a distributor/manufacturer, other licensee, other source)?

- ☐ Manufacturer/Initial Transferor listed above
- ☐ Other General License
- ☐ Other Source

Date
Transferred:

--	--

MM

--	--

DD

--	--	--	--

YYYY

Isotope (e.g., AM241)

Activity (e.g., 100)

Unit (e.g., mCi)

1.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
2.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
3.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
4.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
5.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
6.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
7.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
8.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
9.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>
10.	<div></div>	<div></div>	<div></div>	<div></div>	<div></div>



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SECTION 4

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SECTION 4 - NOT IN POSSESSION OF DEVICE

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

Part 1

NRC Device Key 497023
(from Section 2 or 6)

Transfer Date

1 2

MM

1 4

DD

2 0 1 7

YYYY

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

Part 2

License Number of Recipient (if transferred to a specific licensee)

L A - 5 9 3 4 - L 0 1

Company Name:

Q S A G L O B A L

Department:

Address Line 1:

6 7 6 5 L A N G L E Y D R I V E

Address Line 2:

City:

B A T O N R O U G E

State: L A

Zip Code: 7 0 8 0 9 -

Part 3 Enter the name of the individual responsible for this device.

Last Name:

First Name:

Middle Initial:

Telephone Number:

- -

Extension

Title

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

SECTION 4 - NOT IN POSSESSION OF DEVICE

SECTION 4

PAGE 1 OF 4

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

Part 1

NRC Device Key 700404

(from Section 2 or 6)

Transfer Date

1 2

MM

1 4

DD

2 0 1 7

YYYY

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

Part 2

License Number of Recipient (if transferred to a specific licensee)

L A - 5 9 3 4 - L 0 1

Company Name:

Q S A G L O B A L

Department:

Address Line 1:

6 7 6 5 L A N G L E Y D R I V E

Address Line 2:

City:

B A T O N R O U G E

State: L A

Zip Code:

7 0 8 0 9 -

Part 3 Enter the name of the individual responsible for this device.

Last Name:

First Name:

Middle Initial:

Telephone Number:

- -

Extension

Title

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

SECTION 4

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SECTION 4 - NOT IN POSSESSION OF DEVICE

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

Part 1

NRC Device Key 700405
(from Section 2 or 6)

Transfer Date

1 2 1 4 2 0 1 7
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)

L A - 5 9 3 4 - L 0 1

Company Name:

Q S A G L O B A L

Department:

Address Line 1:

6 7 6 5 L A N G L E Y D R I V E

Address Line 2:

City:

B A T O N R O U G E

State: L A

Zip Code: 7 0 8 0 9 -

Part 3 Enter the name of the individual responsible for this device.

Last Name:

First Name:

Middle Initial:

Telephone Number:

- -

Extension

Title

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

SECTION 4 - NOT IN POSSESSION OF DEVICE

SECTION 4

PAGE 4 OF 4

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

Part 1

NRC Device Key 812630
(from Section 2 or 6)

Transfer Date

1 2 1 4 2 0 1 7
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)

L A - 5 9 3 4 - L 0 1

Company Name:

Q S A G L O B A L

Department:

Address Line 1:

6 7 6 5 L A N G L E Y D R I V E

Address Line 2:

City:

B A T O N R O U G E

State: L A

Zip Code: 7 0 8 0 9 -

Part 3 Enter the name of the individual responsible for this device.

Last Name:

First Name:

Middle Initial:

Telephone Number:

Extension

Title

GL - 7 0 4 4 6 2 - 2 1

Date 12/15/2017

SECTION 5
PAGE 1 of 1

SECTION 5 - CERTIFICATION

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 web site at www.nrc.gov/reading-rm/doc-collections/cfr/)



SIGNATURE - RESPONSIBLE INDIVIDUAL (Listed in Section 1)

12/15/2017

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.

GL - -

Date

SECTION 6

PAGE 1 OF 1

SECTION 6 - DEVICES NOT SUBJECT TO REGISTRATION

NRC Device Key: **Manufacturer License No.:**

Manufacturer Name:

Model Number: **Serial No.:** **Transfer Date:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

NRC Device Key: **Manufacturer License No.:**

Manufacturer Name:

Model Number: **Serial No.:** **Transfer Date:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

NRC Device Key: **Manufacturer License No.:**

Manufacturer Name:

Model Number: **Serial No.:** **Transfer Date:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**

Isotope: **Activity:** **Unit:**



QSA GLOBAL

6765 Langley Drive
Baton Rouge, Louisiana 70809

Date: December 14, 2017

Akilah Calhoun
Phillips 66 Pipeline LLC
2116 Idlewood Drive
Jefferson City, MO 65109

MRA # 34528

This is to advise that the Radioactive Material as detailed below has been received by QSA Global, Inc as of 12-14-17 and we have taken possession of these sources.

Manufacturer	Model	S/N	Isotope	Activity
TN Technologies	5190	B761	Cs-137	200 mci
TN Technologies	5190	724	Cs-137	200 mci
TN Technologies	5201	B581	Cs-137	100 mci
TN Technologies	5201	B582	Cs-137	100 mci

Please retain this record for your files. Should you require further assistance, please contact us at QSA Global, Inc.

Regards,

Rusty Barrett
Technical Service Manager