



ROUTE 1, BOX 218  
GEORGETOWN, DELAWARE 19947  
PHONE: 856-7396/7397

May 10, 1985

DOCKET NO. 030-19991  
LICENSE NO. 07-20620-01

United States Nuclear Regulatory Commission  
Region 1  
631 Park Avenue  
King of Prussia, PA 19406

Attention: Francis M. Costello, for  
John D. Kinneman, Chief  
Nuclear Materials Safety Section A  
Division of Radiation Safety and  
Safeguards

Dear Mr. Costello:

I am replying to your letter of April 25, 1985 stating  
that our Troxler machine had not been tested for leakage  
within six months.

To insure that this will not happen again, I have marked  
two calendars with the dates the testing must be done.

At this time we are in compliance with our license.  
Enclosed is a copy of our last leak test analysis.

I trust you will find the action taken satisfactory.

Sincerely yours,

ROBERT L. STICKELS

RLS/dm  
Copy: File

8506210410 850607  
REQ1 LIC30  
07-20620-01 PDR

MAY 17 1985

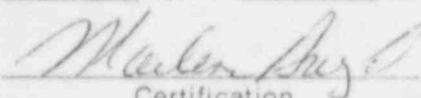
# Leak Test Analysis

## NOTES

ORIGINAL

1. Follow procedures as defined in your leak test kit instructions.
2. Fill out this form and the bag label with required information where applicable. Seal the filter paper in the plastic bag. Place the plastic bag and this form in the pre-addressed envelope.
3. Removable activity will be reported in  $\mu\text{Ci}$ . A value of "0" indicates less than .00005  $\mu\text{Ci}$ .
4. Federal and state regulations require that sealed sources be removed from service and reports filed if removable activity is greater than .005  $\mu\text{Ci}$ .
5. Due to the potential hazard, Troxler recommends that an additional wipe be made if removable activity exceeds .0005  $\mu\text{Ci}$ .
6. You will be notified by telephone collect if the test yields greater than .001  $\mu\text{Ci}$  removable activity.

Radionuclide: CS-137 / Am-Be  
 Source Serial: 40-7516/46-1427  
 Inst. Model: 3411B  
 Inst. Serial: 10041  
 Date of Wipe: 2/20/85  
 Individual's Name: S. L. L.  
 Telephone: 817-497-4490

Removable Activity	
Beta Gamma	Alpha
<u>0</u> $\mu\text{Ci}$	<u>0</u> $\mu\text{Ci}$
 Certification	
Date: <u>2-22-85</u>	

PLEASE TYPE OR PRINT LEGIBLY -  
 THIS IS YOUR RETURN ADDRESS LABEL

- 49 CONSTRUCTION
- RD 1, Box 218
- GEORGETOWN, DE 19947