



WESTEX COMPANY

PO BOX 5587, OXNARD CA 93031
☐ (805) 485-2205 * TELEFAX: (805) 485-9323

DEC 20 1999

FAX COVER

ATTENTION TO: RECIPROCITY: NANCY HODGES/ BILLY GRUSZYNSKI

COMPANY: US NRC REGION IV, DNMS/NMLB

FAX NUMBER: (817) 860-8263

FROM: Ruth Lupo

REFERENCE: RADIOGRAPHY TO BE PERFORMED OFF SHORE

DESCRIPTION: RADIOGRAPHY ON: Torch's Platform HIDALGO

NEAREST CITY/TOWN: SANTA MARIA CALIFORNIA

BEGINNING: 12-19 to 12-21-99

SOURCE & CAMERA: IR 192 TechOps 660 Series

TECH: John Hoffman -

ASST: Stephen Wilkie

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION

M. C. Hernandez

Signature M. C. Hernandez

Title: Radiation Specialist

Date: 12/20/99

DATE: 12-19-99

PAGE 1 OF 1

If there are any problems receiving this transmission, please call number shown above

NE05

POR STPRG



UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION IV
611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TEXAS 76011-8064

DEC 20 1999

MEMORANDUM Shirley Crutchfield
TO: License Fee & Accounts Receivable Branch (T9 E10)

FROM: Christi Hernandez
 Nuclear Materials Licensing Branch, Region IV *mat.*

SUBJECT: FEE TRANSMITTAL

A. Region IV

1. NRC FORM 241 ATTACHED

Applicant/Licensee:
NRC Form 241 Dated:
Agreement State License:
Program Code(s):

2. REVISION ATTACHED

Licensee:
Agreement State License:

3. CLARIFICATION ATTACHED

Licensee: *Westex Company*
Agreement State License: *CA 532456*

4. FEE ATTACHED

Amount: \$ Check: #

5. COMMENTS

B. LICENSE FEE & ACCOUNTS RECEIVABLE BRANCH

1. Fee Category and Amount: _____
2. Correct Fee Paid. Submittal may be processed for:
 General License _____
 Revision _____

Signed _____ Date _____