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Callsign/Satellite ID:

APPLICATION FOR EARTH STATION AUTHORIZATIONS FCC Use Only FCR 312 MAIN FORM FOR OFFICIAL USE ONLY

APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu: Application for new C-band ESV License.

Name:	Petrobras America, Inc.	Phone Number:	713-808-2248
DBA Name:		Fax Number:	713-808-2007
Street:	10350 Richmond Ave.	E-Mail:	sdenman@petrobras-usa.com
	Suite 1400		
City:	Houston	State:	TX
Country:	USA	Zipcode:	77042 –
Attention:	Mr Samuel Denman		

9–16. Name of Contact Representative

Name: Raul Magallanes Phone Number: 281.317.1397

Company: The Law Office of Raul **Fax Number:** 281.271.8085

Magallanes, PLLC

Street: PO Box 1213 E-Mail: info@rmtelecomlaw.com

City: Houston State: TX

Country: USA Zipcode: 77549–

Attention: Raul Magallanes **Relationship:** Other

CLASSIFICATION OF FILING

17. Choose the button next to the	b.			
classification that applies to this filing for	b1. Application for License of New Station			
both questions a. and b. Choose only one	b2. Application for Registration of New Domestic Receive–Only Station			
for 17a and only one for 17b.				
	(N/A) b3. Amendment to a Pending Application (N/A) b4. Modification of License or Registration			
a.	(N/A) b5. Assignment of License or Registration			
(N/A) b6 Transfer of Control of License or Registration				
(N/A) a2. Space Station	(N/A) b7. Notification of Minor Modification			
	(N/A) b8. Application for License of New Receive-Only Station Using Non-U.S. Licensed			
	Satellite			
	(N/A) b9. Letter of Intent to Use Non–U.S. Licensed Satellite to Provide Service in the United			
	States h 10. Other (Please specify)			
	o b10. Other (Please specify)			
	▶ b11. Application for Earth Station to Access a Non–U.S.satellite Not Currently Authorized to			
	Provide the Proposed Service in the Proposed Frequencies in the United States.			
	(N/A) b13. Amendment to a Pending Database Entry Application			
	(N/A) b14. Modifiction of Database Entry			
17c. Is a fee submitted with this applicati	on?			
If Yes, complete and attach FCC Form	159. If No, indicate reason for fee exemption (see 47 C.F.R.Section 1.1114).			
Governmental Entity Noncomme	ercial educational licensee			
Other(please explain):				
17d.				
Fee Classification BAX – Fixed Satellite T	ransmit/Receive Earth			
Station				

18. If this filing is in reference to an	19. If this filing is an amendment to a pending application enter:				
existing station, enter: (a) Call sign of station:	(a) Date pending application was filed:	(b) File number of pending application:			
Not Applicable	Not Applicable	Not Applicable			

TYPE OF SERVICE

I I FE OF SERVICE	
20. NATURE OF SERVICE: This filing is for an authorization to provide	e or use the following type(s) of service(s): Select all that apply:
a. Fixed Satellite	
b. Mobile Satellite	
c. Radiodetermination Satellite	
d. Earth Exploration Satellite	
e. Direct to Home Fixed Satellite	
f. Digital Audio Radio Service	
g. Other (please specify) ESV	
21. STATUS: Choose the button next to the applicable status. Choose	22. If earth station applicant, check all that apply.
only one.	Using U.S. licensed satellites
Common Carrier Non–Common Carrier	Using Non–U.S. licensed satellites
23. If applicant is providing INTERNATIONAL COMMON CARRIER s	ervice, see instructions regarding Sec. 214 filings. Choose one. Are these
facilities:	
Connected to a Public Switched Network Not connected	to a Public Switched Network N/A

24. FREQUENCY BAND(S): Place an "X" in the box(es) next to all applicable frequency band(s).
a. C–Band (4/6 GHz) b. Ku–Band (12/14 GHz)
c.Other (Please specify upper and lower frequencies in MHz.)
Frequency Lower: Frequency Upper:
TYPE OF STATION
25. CLASS OF STATION: Choose the button next to the class of station that applies. Choose only one.
a. Fixed Earth Station
b. Temporary–Fixed Earth Station
c. 12/14 GHz VSAT Network
d. Mobile Earth Station
(N/A) e. Geostationary Space Station
(N/A) f. Non–Geostationary Space Station
g. Other (please specify)ESV
26. TYPE OF EARTH STATION FACILITY: Choose only one.
Transmit/Receive Transmit-Only Receive-Only N/A
PURPOSE OF MODIFICATION
27. The purpose of this proposed modification is to: (Place an 'X' in the box(es) next to all that apply.)
Not Applicable

ENVIRONMENTAL POLICY

28. Would a Commission grant of any proposal in this application or amendment have a significant environmental impact as defined by 47 CFR 1.1307? If YES, submit the statement as required by Sections 1.1308 and 1.1311 of the Commission's rules, 47 C.F.R. §§ 1.1308 and 1.1311, as an exhibit to this application. A Radiation Hazard Study must accompany all applications for new transmitting facilities, major modifications, or major amendments.	٥	Yes	No No	
ALIEN OWNERSHIP Earth station applicants not proposing to provide broadcast, common carrier, aerona aeronautical fixed radio station services are not required to respond to Items 30–34.	nutical er	route	or	
29. Is the applicant a foreign government or the representative of any foreign government?	O Yes	● N	o	
30. Is the applicant an alien or the representative of an alien?	• Yes	O N	o 🌘 N/A	`
31. Is the applicant a corporation organized under the laws of any foreign government?	O Yes	O N	o () N/A	`
32. Is the applicant a corporation of which more than one–fifth of the capital stock is owned of record or voted by aliens or their representatives or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	O Yes	O N	o 💿 N/A	`

33. Is the applicant a corporation directly or indirectly controlled by any other corporation of which more than one–fourth of the capital stock is owned of record or voted by aliens, their representatives, or by a foreign government or representative thereof or by any corporation organized under the laws of a foreign country?	O Yes O No	o o N/A
34. If any answer to questions 29, 30, 31, 32 and/or 33 is Yes, attach as an exhibit an identification of the aliens or foreign entities, their nationality, their relationship to the applicant, and the percentage of stock they own or vote.		
BASIC QUALIFICATIONS		
35. Does the Applicant request any waivers or exemptions from any of the Commission's Rules? If Yes, attach as an exhibit, copies of the requests for waivers or exceptions with supporting documents.	O Yes	No
36. Has the applicant or any party to this application or amendment had any FCC station authorization or license revoked or had any application for an initial, modification or renewal of FCC station authorization, license, or construction permit denied by the Commission? If Yes, attach as an exhibit, an explination of circumstances.	O Yes	⊚ No

37. Has the applicant, or any party to this application or amendment, or any party directly or indirectly controlling the applicant ever been convicted of a felony by any state or federal court? If Yes, attach as an exhibit, an explination of circumstances.	O Yes	⊚ No
38. Has any court finally adjudged the applicant, or any person directly or indirectly controlling the applicant, guilty of unlawfully monopolizing or attempting unlawfully to monopolize radio communication, directly or indirectly, through control of manufacture or sale of radio apparatus, exclusive traffic arrangement or any other means or unfair methods of competition? If Yes, attach as an exhibit, an explanation of circumstances	O Yes	⊚ No
39. Is the applicant, or any person directly or indirectly controlling the applicant, currently a party in any pending matter referred to in the preceding two items? If yes, attach as an exhinit, an explanation of the circumstances.	O Yes	⊘ No
40. If the applicant is a corporation and is applying for a space station license, attach as an exhibit the names, address, and citizenship of those stockholders owning a record and/or voting 10 percent or more of the Filer's voting stock and the percentages so held. In the case of fiduciary control, indicate the beneficiary(ies) or class of beneficiaries. Also list the names and addresses of the officers and directors of the Filer.		

41. By checking Yes, the undersigned certifies, that neither applicant nor any other party to the application is subject to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.	Yes	O No
42a. Does the applicant intend to use a non–U.S. licensed satellite to provide service in the United States? If Yes, answer 42b and attach an exhibit providing the information specified in 47 C.F.R. 25.137, as appropriate. If No, proceed to question 43.	Yes	O No
42b. What administration has licensed or is in the process of licensing the space station? If no license will be issued coordinated or is in the process of coordinating the space station? In the Permitted List	, what administ	ration has
43. Description. (Summarize the nature of the application and the services to be provided). (If th not appear in this box, please go to the end of the form to view it in its entirety.)	e complete desc	cription does
Application for new C-band ESV License.		
Report		

43a. Geographic Service Rule Certification By selecting A, the undersigned certifies that the applicant is not subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25.	● A
By selecting B, the undersigned certifies that the applicant is subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25 and will comply with such requirements.	O B
By selecting C, the undersigned certifies that the applicant is subject to the geographic service or geographic coverage requirements specified in 47 C.F.R. Part 25 and will not comply with such requirements because it is not feasible as a technical matter to do so, or that, while technically feasible, such services would require so many compromises in satellite design and operation as to make it economically unreasonable. A narrative description and technical analysis demonstrating this claim are attached.	o c

CERTIFICATION

The Applicant waives any claim to the use of any particular frequency or of the electromagnetic spectrum as against the regulatory power of the United States because of the previous use of the same, whether by license or otherwise, and requests an authorization in accordance with this application. The applicant certifies that grant of this application would not cause the applicant to be in violation of the spectrum aggregation limit in 47 CFR Part 20. All statements made in exhibits are a material part hereof and are incorporated herein as if set out in full in this application. The undersigned, individually and for the applicant, hereby certifies that all statements made in this application and in all attached exhibits are true, complete and correct to the best of his or her knowledge and belief, and are made in good faith.

O Individual			
 Unincorporated Association 			
Partnership			
Corporation			
Governmental Entity			
Other (please specify)			
45. Name of Person Signing Samuel Denman 47. Please supply any need attach		Person Signing North America	
Attachment 1:	Attachment 2:	Attachment 3:	

SATELLITE EARTH STATION AUTHORIZATIONS FCC Form 312 – Schedule B:(Technical and Operational Description) FOR OFFICIAL USE ONLY

Location of Earth Station Site

E1: Site Identifier: Oceans E5. Call Sign:

E2: Contact Name Samuel Denman E6. Phone 713.808.2248

Number:

E3. Street: Oceans E7. City: Oceans

E8. County: n/a

E4. State LA E9. Zip Code n/a

E10. Area of Operation: US Waterways, Gulf of Mexico, Atlantic Ocean, Pacific Ocean

E11. Latitude: 0 °0 '0.0 "N

E12. Longitude: 0 °0 '0.0 "W

E13. Lat/Lon Coordinates are: NAD-27 NAD-83 N/A

E14. Site Elevation (AMSL): 15.24 meters

E15. If the proposed antenna(s) operate in the Fixed Satellite Service (FSS) with geostationary satellites, do(es) the proposed antenna(s) comply with the antenna gain patterns specified in Section 25.209(a) and (b) as demonstrated by the manufacturer's qualification measurement? If NO, provide asPointing Error a technical analysis showing compliance with two–degree spacing policy.	O Yes	s • ¹	No	O N/A
E16. If the proposed antenna(s) do not operate in the Fixed Satellite Service (FSS), or if they operate in the Fixed Satellite Service (FSS) with non–geostationary satellites, do(es) the proposed antenna(s) comply with the antenna gain patterns specified in Section 25.209(a2) and (b) as demonstrated by the manufacturer's qualification measurements?	O Ye	s O ¹	No	● N/A
E17. Is the facility operated by remote control? If YES, provide the location and telephone number of the control point.	O Ye	es	•	No
E18. Is frequency coordination required? If YES, attach a frequency coordination report as	O Ye	es	•	No
E19. Is coordination with another country required? If YES, attach the name of the country(ies) and plot of coordination contours as	O Yo	es	•	No
E20. FAA Notification – (See 47 CFR Part 17 and 47 CFR part 25.113(c)) Where FAA notification is required, have you attached a copy of a completed FCC Form 854 and or the FAA's study regarding the potential hazard of the structure to aviation? FAILURE TO COMPLY WITH 47 CFR PARTS 17 AND 25 WILL RESULT IN THE RETURN OF THIS APPLICATION.	O Ye	es	•	No
POINTS OF COMMUNICATION				
Satellite Name:INTELSAT AOR 325.5 E.L. If you selected OTHER, please enter the following:				

E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:
Satellite Name:INTELSAT AOR 325.5 E.L. If you selected OTI	HER, please enter the following:
E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:
Satellite Name:SATMEX 6 SATMEX 6 113 W.L. If you selected	d OTHER, please enter the following:
E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:
Satellite Name: AMC-6 AMC-6 72 W.L. If you selected OTHEI	R, please enter the following:
E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:
Satellite Name: ALSAT ALL AUTHORIZED U.S. ALSAT If you	selected OTHER, please enter the following:
E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:
Satellite Name:SATMEX-5 SATMEX-5 116.8 W.L. If you sele	cted OTHER, please enter the following:
E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:
Satellite Name: ALSAT ALL AUTHORIZED U.S. ALSAT If you	selected OTHER, please enter the following:

E21. Common Name:	E22. ITU Name:
E23. Orbit Location:	E24. Country:

POINTS OF COMMUNICATION (Destination Points)

E25. Site Identifier:	
E26. Common Name:	E27. Country:

ANTENNA

Site ID	E28. Antenna Id	E29. Quantity	E30. Manufacturer	E31. Model	E32. Antenna Size <meters></meters>	E41/42. Antenna GainTransmint and/or Recieve (dBi atGHz)
Oceans	SLB Linear	1	SLB	Spacetrack C24LP	2.4	38.0 dBi at 4
						42.0 dBi at 6.175
	SLB Circul			Spacetrack C24CP		38.0 dBi at 4
						42.0 dBi at 6.175

E28. Antenna Id	Diameter	E35. Above Ground Level (meters)	(meters)	Height Above Ground	Input Power at antenna flange 	Maximum Antenna Height	E40. Total EIRP for al carriers (dBW)
SLB Linear	0.0/0.0	0.0	0.0	0.0	75.39	0.0	60.77
SLB Circul	0.0/0.0	0.0	0.0	0.0	75.39	0.0	60.77

FREQUENCY

E28. Antenna Id	E43/44. Frequency Bands (MHz)	E45. T/R Mode	E46. Antenna Polarization(H,V, L,R)	E47. Emission Designator	E48. Maximum EIRP per Carrier (dBW)	E49. Maximum ERIP Density per Carrier (dBW/4kHz)
SLB Linear	3700 4200	R	Horizontal and Vertical	1M36G7W	0.0	0.0
E50. Modulation entirety.) Digital	and Services (If the state of t	ne complete descripti	on does not appear in	this box, please go t	o the end of the form	to view it in its
SLB Linear	3700 4200	R	Horizontal and Vertical	5M46G7W	0.0	0.0
E50. Modulation entirety.)	and Services (If the	ne complete descripti	on does not appear in	this box, please go t	o the end of the form	to view it in its
SLB Linear	5925 6425	Т	Horizontal and Vertical	1M36G7W	53.8	28.5

E50. Modulati entirety.)	on and Service	ces (If the	he complete descript	tion does not appear	in this box, please g	to to the end of	the form to view it in its
Digital							
SLB Linear	5925	6425	Т	Horizontal and Vertical	5M46G7W	59.8	28.4
E50. Modulati entirety.) Digital	on and Servic	ees (If the	he complete descript	tion does not appear	in this box, please g	to to the end of	the form to view it in its
SLB Circul	3700	4200	R	Left and Right Circular	1M36G7W	0.0	0.0
E50. Modulati entirety.)	on and Service	ces (If the	he complete descript	tion does not appear	in this box, please g	to to the end of	the form to view it in its
SLB Circul	3700	4200	R	Left and Right Circular	5M46G7W	0.0	0.0

E50. Modula entirety.)	tion and Servi	ces (If the	ne complete d	escription does not appear	in this box, please	go to the end of t	he form to view it in its
Digital							
SLB Circul	5925	6425	Т	Left and Right Circular	1M36G7W	53.8	28.47
E50. Modula entirety.)	tion and Servi	ces (If the	ne complete d	escription does not appear	in this box, please	go to the end of t	he form to view it in its
Digital							
SLB Circul	5925	6425	Т	Left and Right Circular	5M46G7W	59.8	28.45
E50. Modula entirety.)	ation and Servi	ces (If the	ne complete d	escription does not appear	in this box, please	go to the end of t	he form to view it in its
Digital							

FREQUENCY COORDINATION

E28. Antenna Id	E51. Satellite Orbit Type	E52/53. Frequency Limits(MHz)	E54/55. Range of Satellite Arc E/W Limit	Station Azimuth Angle	Antenna Elevation Angle Eastern Limit	E58. Earth Station Azimuth Angle Western Limit	E59. Antenna Elevation Angle Western Limit	E60. Maximum EIRP Density toward the Horizon (dBW/4kHz)
SLB Linear	Geostationary	0 0	0.0/ 0.0	0.0	0.0	0.0	0.0	0.0
SLB Circul	Geostationary	0 0	0.0/ 0.0	0.0	0.0	0.0	0.0	0.0

REMOTE CONTROL POINT LOCATION

E61. Call Sign E960499 NOTE: Please enter the callsign of the contro callsign for which this application is being filed.	_	E65. Phone Number 7138082248		
E62. Street Address 7147 REYNOLDS DRIVE				
E63. City Sedalia	E67. County n/a		E64/68. State/Country CO/ USA	E66. Zip Code n/a

E61. Call Sign E030071 NOTE: Please enter the callsign of the controlling station, not the callsign for which this application is being filed.	E65. Phone Number (240) 420–8990
E62. Street Address 17633 TECHNOLOGY BLVD	

E63. City	E67. County	E64/68.	E66. Zip Code
Hagerstown	n/a	State/Country	21740
		MA/ USA	

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