

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:

Katrina-related STA Request

1. Applicant

Name:	BJ Services Company U.S.A.	Phone Number:	713-895-5617
DBA Name:		Fax Number:	713-895-5442
Street:	5500 Northwest Central Drive Houston, TX 77092 4442	E-Mail:	dselby@bjservices.com
City:	Houston	State:	TX
Country:	USA	Zipcode:	77210 -4442
Attention:	Dennis L Selby		

2. Contact

Name:	BJ Services Company U.S.A.	Phone Number:	713-895-5617
Company:		Fax Number:	713-895-5442
Street:	5500 Northwest Central Drive Houston, TX 77092 4442	E-Mail:	dselby@bjservices.com
City:	Houston	State:	TX
Country:	USA	Zipcode:	77210 -4442
Attention:	Dennis L Selby	Relationship:	

(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.)

3. Reference File Number or Submission ID

4a. Is a fee submitted with this application?

- 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 Noncommercial educational licensee
- Other (please explain):

4b. Fee Classification CGB – Mobile Satellite Earth Stations

5. Type Request

- Use Prior to Grant Change Station Location Other

6. Requested Use Prior Date
09/07/2005

7. City CONUS

8. Latitude
(dd mm ss.s h) 0 0 0.0

9. State	10. Longitude (dd mm ss.s h) 0 0 0.0
11. Please supply any need attachments. Attachment 1: Radiation Analysis Attachment 2: Antenna Pattern Attachment 3: Demonstration	
12. Description. (If the complete description does not appear in this box, please go to the end of the form to view it in its entirety.) <div style="border: 1px solid black; padding: 5px; margin: 10px 0;">STA request to provide mobile VSAT services in support of Katrina related requirements. License application will follow. Following technical details provided for VSAT Network that will utilize existing hub station identified in BJ Services license</div>	
13. 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. <input checked="" type="radio"/> Yes <input type="radio"/> No	
14. Name of Person Signing Dennis L. Selby	15. Title of Person Signing Asst Director MIS
WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND / OR IMPRISONMENT (U.S. Code, Title 18, Section 1001), AND/OR REVOCATION OF ANY STATION AUTHORIZATION (U.S. Code, Title 47, Section 312(a)(1)), AND/OR FORFEITURE (U.S. Code, Title 47, Section 503).	

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