APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: Emergency STA E030092

1. Applicant							
1	Name:	PetroCom License Corporation	Phone Number:	504-736-9400			
1	DBA Name:		Fax Number:	504-734-6100			
5	Street:	5901 Earhart Expressway	E-Mail:	kwright@petrocom.com			
	City:	Harahan	State:	LA			
(Country:	USA	Zipcode:	70123 –			
l A	Attention:	Mr. Ken Wright					

2. Contact								
Name:	Russell H. Fox	Phone Number:	202-434-7483					
Company	: Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C.	Fax Number:	202-434-7400					
Street:	701 Pennsylvania Avenue, N.W.	E-Mail:	RFox@mintz.com					
City:	Washignton DC	State:	DC					
Country:	USA	Zipcode:	20004 –					
Attention	Russell H. Fox	Relationship:	Legal Counsel					
(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?								
V r	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 CGX – Fixed Satellite Transmit/Receive Earth Station								
5. Type Request								
• Use Prior to Grant • Change Station Location • Other								
6. Requested Use Prior Date 09/23/2005								

7. CityPort Fourchon	8. Latitude (dd mm ss.s h) 29 6 9.0 N							
9. State TX	10. Longitude (dd mm ss.s h) 90 11 25.0 W							
11. Please supply any need attachments.								
Attachment 1: STA RequestAttachment 2:	Attachment 3:							
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.)								
Emergency STA to provide communications in areas impacted by Hurricane Katrina. This STA was grant-stamped on September 23,2005								
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.								
14. Name of Person Signing Ken Wright	15. Title of Person Signing President COO							
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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