APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: FOURCHON

Name:	Shell Communications, Inc.	Phone Number:	713-245-1303
DBA Name:		Fax Number:	713-245-1010
Street:	20329	E-Mail:	Lee.Gaspard@Shell.com
City:	Houston	State:	TX
Country:	USA	Zipcode:	77252 -0329
Attention:	Room 8W04		

2. Contact						
Name:	Mona Lee	Phone Number:	713.245.1303			
Company:	Shell Communications Inc.	Fax Number:	713.245.1010			
Street:	P. O. Box 20329	E-Mail:	Mona.Lee@Shell.com			
City:	Houston	State:	TX			
Country:	USA	Zipcode:	77252 -0329			
Attention:	Mona Lee	Relationship:	Other			
(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 IB2006001484						
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).						
O Governmental Entity O Noncommercial educational licensee						
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	r Date					
06/14/2006						
7. CityGulf of Mexico		8. Latitude				
		(dd mm ss.s	h) 29 7 22.75 N			

9. State TX	10. Longitude (dd mm ss.s h) 90 11 55.38 W					
11. Please supply any need attachments.						
Attachment 1: A Attachment 2: Exhibit	E18 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.)						
Gulf of Mexico Hurricane Disaster Recovery Communication Unit - 2.4M C-Band Fixed Satellite System - Transmission and reception of digital data in support of critical infrastructure operations.						
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 Mr. Don Happel	15. Title of Person Signing Telecommunications Manager					
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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