

E000001 SES-STA-20160121-00079 IB2016000221
EXXON COMMUNICATIONS COMPANY

Approved by OMB
3060-0678

APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATION Enter a description of this application to identify it on the main menu:
STA TO ADD PERMITTED LIST

1. Applicant

Name: EXXON COMMUNICATIONS COMPANY Phone Number: 832-624-0238
DBA Name: Fax Number: 262-313-9709
Street: P O BOX 4934 MARY.C.
WEICHEL@EXXONMOBIL.COM
City: HOUSTON State: TX
Country: USA Zipcode: 77210 -4934
Attention: Mary Carol Weichel



File # SES-STA-2016-0121-00079
Call Sign 200001 Grant Date 2-19-16
(or other identifier)
Term Dates From: 2-19-16 To: 7-20-16
Approved: *Mary C. Weichel*

Conditions: (1) NOV Interference, NOV Protected Basis
(2) operations with Salary 28 @ 89w only

2. Contact		
Name:	Mary Carol Weichel	Phone Number: 832-624-0238
Company:	EXXON COMMUNICATIONS COMPANY	Fax Number: 262-313-9709
Street:	1725 HUGHES LANDING BLVD.	E-Mail: MARY.C. WEICHEL@EXXONMOBIL.COM
City:	THE WOODLANDS	State: TX
Country:	USA	Zipcode: 77381 -
Attention:		Relationship: Same
<p>(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.)</p> <p>3. Reference File Number or Submission ID IB2016000167</p> <p>4a. Is a fee submitted with this application? <input checked="" type="radio"/> If Yes, complete and attach FCC Form 159. If No, indicate reason for fee exemption (see 47 C.F.R. Section 1.1114). <input type="radio"/> Governmental Entity <input type="radio"/> Noncommercial educational licensee <input type="radio"/> Other (please explain):</p> <p>4b. Fee Classification CGX - Fixed Satellite Transmit/Receive Earth Station</p> <p>5. Type Request</p> <p><input checked="" type="radio"/> Use Prior to Grant <input type="radio"/> Change Station Location <input type="radio"/> Other</p> <p>6. Requested Use Prior Date 01/21/2016</p>		

7. City	GULF OF MEXICO		
8. Latitude (dd mm ss.s h)	26 56	20.8	N
9. State	TX		
10. Longitude (dd mm ss.s h)	94 41	20.0	W
11. Please supply any need attachments.			
Attachment 1: STA JUSTIFICATION	Attachment 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.)			
<div style="border: 1px solid black; padding: 5px;"> <p>Due to a change in satellite capacity, Exxon requires near-term use of Permitted List satellites to accommodate the capacity adjustment and ensure there is no lapse in vital satellite communication services</p> </div>			
<p>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.</p> <p style="text-align: right;"> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>			
14. Name of Person Signing	Mary Carol Weichel		
15. Title of Person Signing	REGULATORY SPECIALIST		
<p>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).</p>			

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