APPLICATION FOR EARTH STATION SPECIAL TEMPORARY AUTHORITY

APPLICANT INFORMATIONEnter a description of this application to identify it on the main menu: MP 252 BUD/TAHOE

1. Applicant

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	
application. Please en 3. Reference File Nui			ne file number or the IB Submission ID of the related	
	and attach FCC Form 159. If No, i	ndicate reason for fee exemption	on (see 47 C.F.R.Section 1.1114).	
Governmental En	tity Noncommercial education	nal licensee		
Other(please expl	ain):			
4b. Fee Classification	CGX – Fixed Satellite Transmit/F	Receive Earth Station		
5. Type Request				
Use Prior to Grant Change Station Location Other				
6. Requested Use Prio 06/14/2006	or Date			
7. CityGulf of Mexico		8. Latitude (dd mm ss.s h)		

9. State TX	10. Longitude (dd mm ss.s h) 87 53 5.4 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 bo	ox, 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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