

WILKINSON) BARKER) KNAUER) LLP

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JEFFREY COHEN
202 383-3369
jcohen@wbklaw.com

December 22, 2000

By Federal Express and Electronic Submission

Mr. Joe Dichoso
Federal Communications Commission
Equipment Authorization Division
7435 Oakland Mills Road
Columbia, MD 21046

Re: *Schlumberger Resource Management Services, Inc.*
Response to Request for Further Information
FCC ID: F9C-CMM1102
Reference No: 16846

Dear Mr. Dichoso:

We are writing in response to your request for further information concerning an application to transfer the FCC Identification number of device F9C-CMM1102. On behalf of Schlumberger Resource Management Services, Inc. ("Applicant"), in August, 2000, we submitted applications to change all of the FCC Identification numbers held by CellNet Data Systems, Inc. ("CellNet"), grantee code H6N, to Applicant's grantee code, F9C. The purpose of these applications was to notify the Commission that Applicant purchased the assets of CellNet, including the equipment authorizations. Pursuant to the direction of Richard Fabina, Chief, Equipment Authorization Branch, the submissions consisted of a separate Form 731 for each of the devices and a single Form 159, which included payment for a single fee intended to cover all of the FCC Identification number transfers.

On October 30, 2000, we received e-mail correspondence from you requesting further information regarding F9C-CMM1102. Specifically, you requested that we provide all items required by section 2.933 of the Commission's rules, external photographs of the device and all antennas, and an exhibit indicating compliance with RF safety requirements. After further discussion with Mr. Fabina, we now provide additional information pursuant to section 2.933, we also enclose a copy of an external photograph of the device, a sketch of the new label, a copy of

the Form 731 previously filed electronically with an exhibit describing the transaction, a copy of the Form 159 filed on behalf of Applicant and submitted for all of the equipment authorizations related to the transaction, and a copy of your e-mail requesting further information. We are also submitting all of the above materials and a copy of this letter electronically.

Regarding section 2.933(b)(5), referencing the photographs required by section 2.1033(b)(7), we are providing the photographs of the exterior appearance of the device. The device is a Part 15 utility meter and does not include any external antennas. We also provided a sketch of the new label to be used in future production. The positioning of this new label on the device will not change from the positioning of the old label.

With respect to your request for exhibit indicating compliance with RF safety requirements, section 1.1307(b)(1), of the Commission's rules, which is referenced by section 15.247(b)(4), categorically excludes Applicant from the requirement to conduct a routine environmental evaluation for RF exposure for the subject device. The Part 15 device is not listed in subsection 1.1307(b)(1) Table 1 or in subsection 1.1307(b)(2), and therefore falls into the excluded category. Accordingly, the Commission's rules do not require the submission of an RF evaluation.

Should you have any questions regarding this matter, please contact Zachary Zehner at (202) 383-3424 to expedite resolving any outstanding issues regarding the pending application.

Sincerely,
WILKINSON BARKER KNAUER, LLP



By: Jeffrey S. Cohen
Zachary A. Zehner*

Enclosures

* Practice limited to matters and proceedings before federal courts and agencies.

Exhibit

The following exhibit represents the “attached statement” and information required by section 2.933(b) of the Commission’s rules for an application for an equipment authorization where no change in design, circuitry, or construction is involved:

1) Original Identification Used Prior to Change in Identification (section 2.933(b)(1)):

H6N-CMM1102.

2) The Date of the Original Equipment Authorization (section 2.933(b)(2)):

March 30, 1999. See attachment for copies of original equipment authorizations.

3) How the Equipment Bearing Modified Identification Differs from Original Equipment (section 2.933(b)(3)):

The equipment bearing the modified identification does not differ from the original equipment.

4) Whether the Original Test Results Continue to be Representative of and Applicable to the Equipment Bearing Changed Identification (section 2.933(b)(4)):

The original test results continue to be representative of and applicable to the equipment bearing the changed identification.

5) The Photographs Showing Exterior of Appearance of Equipment (section 2.933(b)(5)):

See attachment.



Federal Communications Commission

The Form 731 Application You Just Entered Has Been Submitted Successfully to the Laboratory Division. Please Record The Following Information For Future Reference:

If any information has been entered incorrectly on the 731 or 159 form, please contact btaube@fcc.gov for correction rather than submitting a second 731 or 159.

Form 731 Confirmation Number:	EA98833
FCC ID:	F9CCMM1102
Date of Submission:	Sep 21 2000 5:16PM
Press this button to begin document submission process.	Press this button to go directly to FCC Remittance Form (Form 159).
Proceed to Exhibits Form	Proceed to Fee Form (159)

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Mail your comments or suggestions (To: btaube@fcc.gov)
FCC - Federal Communications Commission - FCC_731

FEDERAL COMMUNICATIONS COMMISSION - FCC FORM 731 APPLICATION FOR EQUIPMENT AUTHORIZATION		Approved by: 3060 - 0057 Expires 9/30
You will be presented with the FCC FORM 159, Fee Remittance Advice after submitting your application and obtaining FCC Form 159, must currently be submitted in paper form along with payment to the address indicated in the FCC Fee is not currently available.		
Item 1. Applicant's complete, legal business name: Schlumberger Resource Management Services Inc.		
Item 2. Applicant's mailing address Line 1: 1600 Alabama Highway 229 Line 2: P.O.Box: City: Tallassee State: AL Country(if foreign address): Zip/Postal Code: 36078		
Item 3. FCC ID: Grantee code: f9c * Equipment Product Code (14 characters maximum): cmm1102		
Item 4. Person at the applicant's address to receive grant or for contact: First Name: Jim Last Name: Brennan Title: E-mail: Mail Telep Fax N		
Item 5. Instead of Applicant, FCC is authorized to mail original Grant to: Firm Name: Address Line 1: P.O.Box: Address Line 2: City: Country(if foreign address): Zip/Postal Code: Person at above address to receive Grant: First Name: Last Name: Title: Mail Stop:		
Item 6. Technical Contact: Firm Name: Telephone: Ext: Fax No First Name: Middle Initial: Last Name: Address Line 1: P.O.Box: Address Line 2: City: Country(if foreign address): Zip/Postal Code: E-mail:		
Item 7. Non-Technical Contact: Firm Name: Telephone: Ext: Fax No Wilkinson Barker Knauer, LLP 202-783-4141 202-78: First Name: Jeffrey Middle Initial: S Last Name: Cohen		

Address Line 1: 2300 N Street, NW, Suite 700 Address Line 2: Country(if foreign address): E-mail: jcohen@wbklaw.com	P.O.Box: City: Washington Zip/Postal Code: 20037-1128
--	--

Item 8. * Does this application include a request for confidentiality for any portion(s) of the data contained in this application pursuant to 47 CFR § 0.459 of the Commission Rules? If "Yes" see instructions.	☐ Yes ☒
Item 9. * Does the applicant request that the Commission defer grant of this application pursuant 47 CFR § 0.457(d)(1)(ii)? (See instructions) If so, specify date when grant may be issued (MM/DD/YYYY format): _____	☐ Yes ☒

Item 10. Equipment Code: DSS -Part 15 Spread Spectrum Transmitter	☒	* Description of Product as it is Marketed: Utility Company Data Collection Transceiver
* Equipment will be operated under FCC Rule Part(s): 15		

Item 11. * Application is for:

☐ Original Equipment (See instructions)
☒ Change in identification of presently authorized equipment: Original FCC ID: h6ncmm1102 Grant Date: _____
☐ Class II permissive change or modification of presently authorized equipment (See instructions)

Frequency range in MHz		Rated RF power output in watts	Frequency tolerance	Em (See 47 C
917.58	917.58	.0724	_____ ☒	
			_____ ☒	
			_____ ☒	
			_____ ☒	
			_____ ☒	
			_____ ☒	
			_____ ☒	
			_____ ☒	
			_____ ☒	
			_____ ☒	
			_____ ☒	
			_____ ☒	

Item 13. Is the equipment in this application: * (a) a composite device subject to an additional equipment authorization? * (b) part of a system that operates with, or is marketed with, another device that requires an equipment authorization? <i>If either of the above questions is answered "Yes" complete section 13(c).</i>	☐ Yes ☒ ☐ Yes ☒
(c) The related application: ☐ has been filed at same time as this application under the FCC ID listed to the right ☐ has been granted under the FCC ID listed to the right ☐ is in the process of being filed under the FCC ID listed to the right ☐ is pending with the FCC under the FCC ID listed to the right	

Item 14. Name of test firm and contact person on file with the FCC, if different from applicant or contact person:

Firm Name: _____ ☒

First Name: _____ Last Name: _____
 Telephone: _____ Ext: _____ Fax No: _____ E-mail: _____

Read each certification carefully before answering and signing this

WILLFUL FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND IN SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTITUTION PE 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).

Item 15. SECTION 5301 (ANTI-DRUG ABUSE) CERTIFICATION:

The applicant must certify that neither the applicant nor any party to the application is subject to a denial of Federal ber 5301 of the Anti-Drug Abuse Act of 1988, 21 U.S.C. § 862 because of a conviction for possession or distribution of a contr definition of a "party" for these purposes.

Does the applicant or authorized agent so certify? ☒ Yes ☐ No

Item 16. APPLICANT/AGENT CERTIFICATION:

I certify that I am authorized to sign this application. All of the statements herein and the exhibits attached hereto, are tr IN accepting a Grant of Equipment Authorization issued by the FCC as a result of the representations made in this appli equipment with the exact FCC ID specified in this application, (2) compliance statement labeling pursuant to the applical applicable technical rules. If the applicant is not the actual manufacturer of the equipment, appropriate arrangements ha production units of this equipment will continue to comply with the FCC's technical requirements.

Authorizing an agent to sign this application, is done solely at the applicant's discretion; however, the applicant remains

If an agent has signed this application on behalf of the applicant, a written letter of authorization which includes informa section 5301 (Anti-Drug Abuse) Certification statement has been provided by the applicant. It is understood that the lett request, and that the FCC reserves the right to contact the applicant directly at any time.

*** Signature of Authorized Person Filing:**

Ben Lyon

Title of auth
Vice President

Complete items below if an agent signs the application

Firm Name: _____ Telephone: _____ Ext: _____ Fax No: _____
 First Name: _____ Middle Initial: _____ Last Name: _____
 Address Line 1: _____ P.O.Box: _____
 Address Line 2: _____
 City: _____ State: _____ Country(if foreign address): Zip/Pc _____
 E-mail: _____

NOTE: An asterisk '*' preceding a field indicates it must be completed before this applic:

Continue Clear

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Mail your comments or suggestions (To: btaube@fcc.gov)
 FCC - Federal Communications Commission - FCC_731

STAMP AND RETURN

READ INSTRUCTIONS CAREFULLY BEFORE PROCEEDING (1) LOCKBOX #358315		FEDERAL COMMUNICATIONS COMMISSION REMITTANCE ADVICE PAGE NO. _____ OF _____ AUG 3 1 15 PM '00 FCC/MELLON		APPROVED BY OMB 3060-058 USE FCC USE ONLY	
SECTION A - Payer Information					
(2) PAYER NAME (if paying by credit card, enter name exactly as it appears on your card) Wilkinson Barker Knauer, LLP				(3) TOTAL AMOUNT PAID (dollars and cents) \$940.00	
(4) STREET ADDRESS LINE NO. 1 2300 N Street, N.W., Suite 700					
(5) STREET ADDRESS LINE NO. 2					
(6) CITY Washington				(7) STATE DC	(8) ZIP CODE 20037-1128
(9) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 202-783-4141				(10) COUNTRY CODE (IF NOT IN U.S.A.)	
If payer name and the applicant name are different, complete Section B. If more than one applicant, use continuation sheets (Form 159-C).					
SECTION B - Applicant Information					
(11) APPLICANT NAME (if paying by credit card, enter name exactly as it appears on your card) Schlumberger Resource Management Service					
(12) STREET ADDRESS LINE NO. 1 1600 Alabama Highway 229					
(13) STREET ADDRESS LINE NO. 2					
(14) CITY Tallahassee				(15) STATE AL	(16) ZIP CODE 36078
(17) DAYTIME TELEPHONE NUMBER (INCLUDING AREA CODE) 334-283-6555				(18) COUNTRY CODE (IF NOT IN U.S.A.)	
SECTION C - Payment Information					
(19A) FCC Call Sign/Other ID	(20A) Payment Type Code(PTC) EGC	(21A) Quantity 1	(22A) Fee Due for (PTC) in Block 20A \$940.00		
(23A) FCC CODE 1 F9C26112495		(24A) FCC CODE 2 13EA98587			
(19B) FCC Call Sign/Other ID	(20B) Payment Type Code(PTC)	(21B) Quantity	(22B) Fee Due for (PTC) in Block 20B		
(23B) FCC CODE 1		(24B) FCC CODE 2			
(19C) FCC Call Sign/Other ID	(20C) Payment Type Code(PTC)	(21C) Quantity	(22C) Fee Due for (PTC) in Block 20C		
(23C) FCC CODE 1		(24C) FCC CODE 2			
(19D) FCC Call Sign/Other ID	(20D) Payment Type Code(PTC)	(21D) Quantity	(22D) Fee Due for (PTC) in Block 20D		
(23D) FCC CODE 1		(24D) FCC CODE 2			
SECTION D - Taxpayer Information (Required)					
(25) PAYER TIN 0521264167		(26) Complete this block only if applicant name in B-11 is different from payer name in A-2 APPLICANT TIN 0 510204865			
SECTION E - Certification					
(27) CERTIFICATION STATEMENT I, Jeffrey S. Cohen, certify under penalty of perjury that the foregoing and supporting information (PRINT NAME) are true and correct to the best of my knowledge, information, and belief. SIGNATURE <i>Jeffrey S. Cohen</i>					
SECTION F - Credit Card Payment Information					

Wilkinson Barker Knauer, LLP
2300 N Street N.W., Suite 700
Washington, D.C. 20037-1128

16-3 00012
540

58726

Date 08/29/00

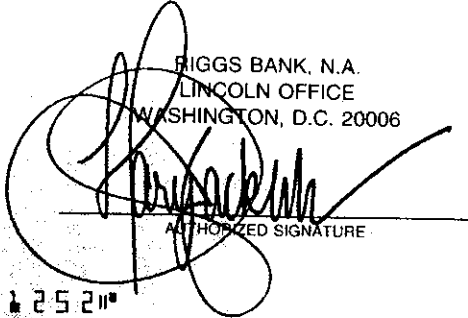
\$940.00

PAY Nine Hundred Forty and 00/100 Dollars

TO THE
ORDER
OF

FEDERAL COMMUNICATIONS COMMISSION

RIGGS BANK, N.A.
LINCOLN OFFICE
WASHINGTON, D.C. 20006


AUTHORIZED SIGNATURE

⑈058726⑈ ⑆054000030⑆ 08451252⑈

**FEDERAL COMMUNICATIONS
COMMISSION**
WASHINGTON, D.C. 20554

COPY

COPY

**GRANT OF EQUIPMENT
AUTHORIZATION**
Certification

CellNet Data Systems
125 Shoreway Road

Date of Grant: 03/30/1999

San Carlos, CA 94070

Application Dated: 02/03/1999

Attention: Forrest Fulton

NOT TRANSFERABLE

EQUIPMENT AUTHORIZATION is hereby issued to the named GRANTEE, and is VALID ONLY for the equipment identified hereon for use under the Commission's Rules and Regulations listed below.

FCC IDENTIFIER
Name of Grantee

H6NCMM1102
CellNet Data Systems

Equipment Class: Part 15 Spread Spectrum
Transmitter

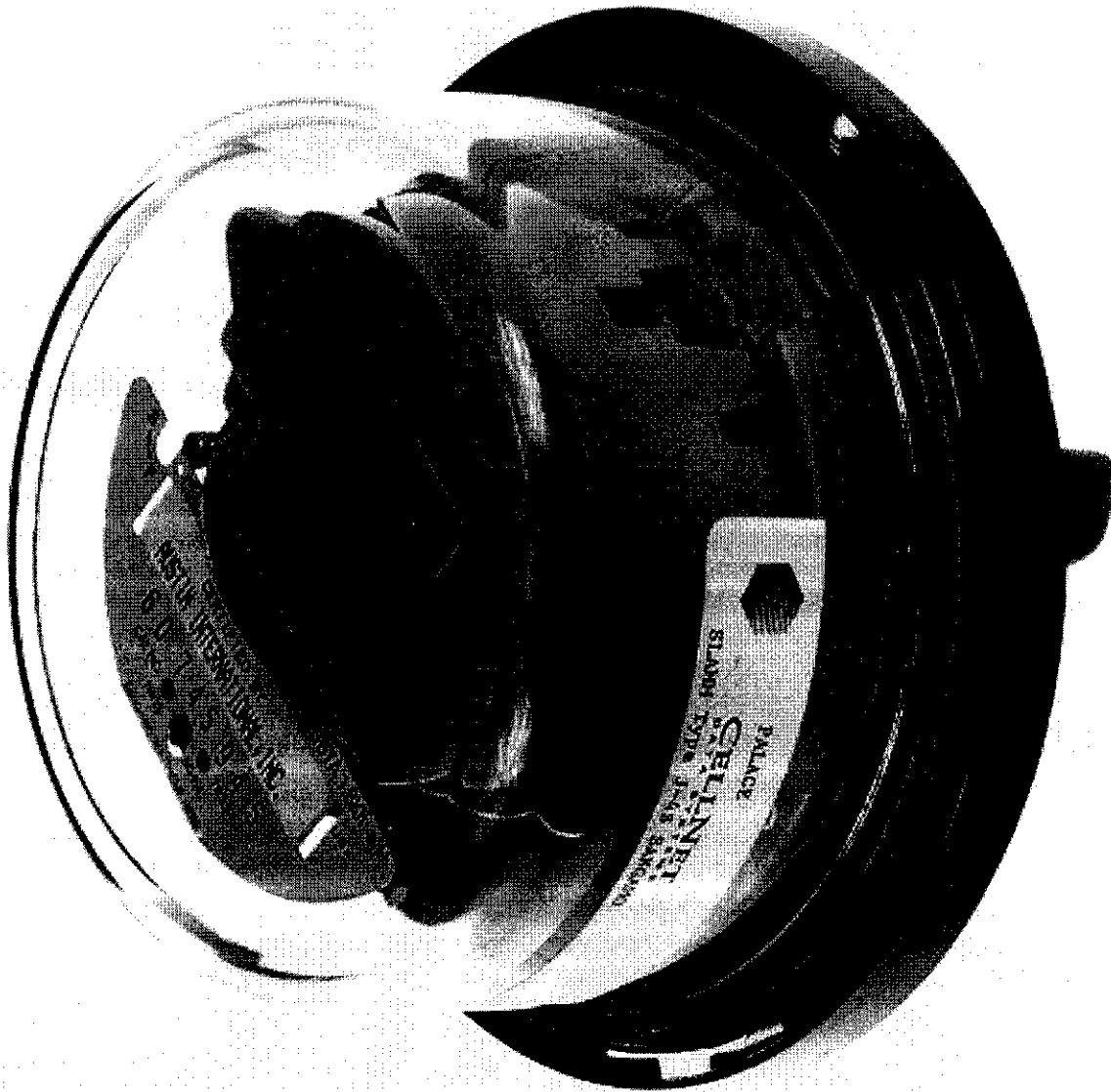
Notes:

<u>Grant Notes</u>	<u>FCC Rule Parts</u>	<u>Frequency Range (MHZ)</u>	<u>Output Watts</u>	<u>Frequency Tolerance</u>	<u>Emission Designator</u>
37	15	917.58 - 917.58	0.0724		

37: This device has shown compliance with new rules adopted under Docket 87-389 and is not affected by Section 15.37, transition rule.

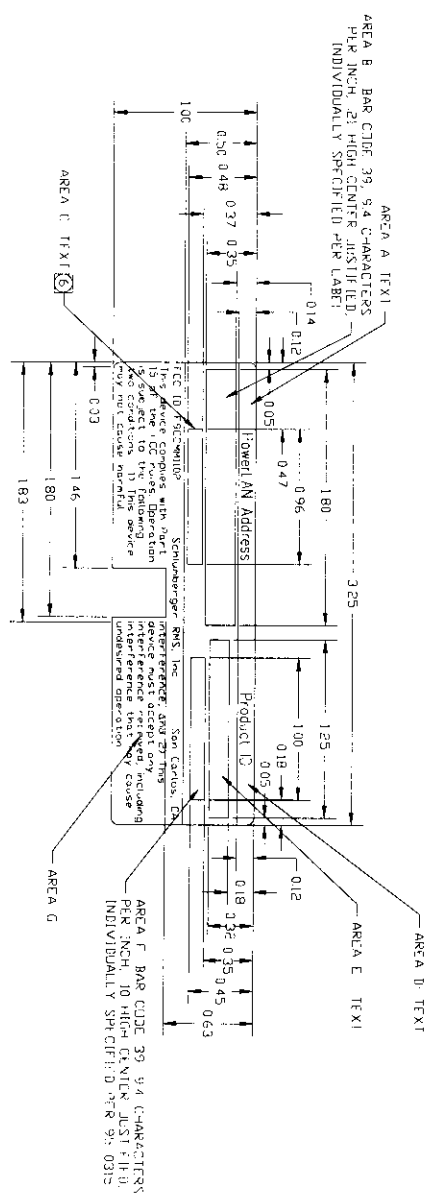
Mail To:

EA93151



Cellnet Data Systems
FCC ID: H6NCMM1102
External View

REVZCNT	INITIAL	RELEAS	DATE	APPRO
01			02/99	
07		REMOVED FROM # 28411	06/99	
A		RELEAS TO UNCLASSIFIED PER # 120	06/99	
B		REMOVED FROM COPY	12/00	



- [illegible]

UNLESS OTHERWISE SPECIFIED CONTRACT NO.	
DIMENSIONS ARE IN INCHES	
TOLERANCES ARE:	
FRACTIONS	DIMENSIONS AND FITS
XX ± .005	MINOR VIEWS
XX ± .010	DATE
CHECKED	TW 9/58

NOTE

NOTE

SCALE: 1:1000

[illegible]

From: oetech@fccsun07w.fcc.gov
Sent: Monday, October 30, 2000 4:30 PM
To: jcohen@wbklaw.com

To: Jeffrey Cohen, Wilkinson Barker Knauer, LLP
From: Joe Dichoso
jdichoso@fcc.gov
FCC Application Processing Branch

Re: FCC ID F9CCMM1102
Applicant: Schlumberger Resource
Management Services Inc.
Correspondence Reference Number: 16846
731 Confirmation Number: EA98833

- 1) Please provide all items required by Section 2.933.
- 2) Provide external photo's of the device and all antennas.
- 3) Indicate compliance with the new RF safety requirements, place the exhibit in the RF exposure info folder of the electronic filing.

The items indicated above must be submitted before processing can continue on the above referenced application. Failure to provide the requested information within 60 days of the original e-mail date may result in application dismissal pursuant to Section 2.917 (c) and forfeiture of the filing fee pursuant to section 1.1108.

DO NOT reply to this e-mail by using the Reply button. In order for your response to be processed expeditiously, you must upload your response via the Internet at www.fcc.gov, Electronic Filing, OET Equipment Authorization Electronic Filing. If the response is submitted through Add Attachments, in order to expedite processing, a message which informs the processing staff that a new exhibit has been submitted must also be submitted via Submit Correspondence. Also, please note that partial responses increase processing time and should not be submitted.