

9-20-04

FORM PTO-1619A  
Expires 06/30/99  
OMB 0651-0027

09-22-2004



102840804

OVER SHEET

**PATENTS ONLY**

U.S. Department of Commerce  
Patent and Trademark Office  
PATENT

2004 SEP 20 AM 9:53

OPR/FINANCE

TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).

**Submission Type**

New

Resubmission (Non-Recordation)  
Document ID#

Correction of PTO Error  
Reel #  Frame #

Corrective Document  
Reel #  Frame #

**Conveyance Type**

Assignment  Security Agreement

License  Change of Name

Merger  Other

**U.S. Government**  
(For Use ONLY by U.S. Government Agencies)

Departmental File  Secret File

**Conveying Party(ies)**

Mark if additional names of conveying parties attached

Name (line 1)  Execution Date Month  Day  Year

Name (line 2)

**Second Party**

Name (line 1)

Name (line 2)

**Receiving Party**

Mark if additional names of receiving parties attached

Name (line 1)   If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)

Name (line 2)

Address (line 1)

Address (line 2)

Address (line 3)     
City State/Country Zip Code

**Domestic Representative Name and Address**

Enter for the first Receiving Party only.

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

FOR OFFICE USE ONLY

Public burden reporting for this collection of information is estimated to average approximately 30 minutes per Cover Sheet to be recorded, including time for reviewing the document and gathering the data needed to complete the Cover Sheet. Send comments regarding this burden estimate to the U.S. Patent and Trademark Office, Chief Information Officer, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0651-0027), Washington, D.C. 20503. See OMB

Mail documents to be recorded with required cover sheet(s) information to:  
Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

REEL: 015791 FRAME: 0475

**Correspondent Name and Address**

Area Code and Telephone Number

Name

Address (line 1)

Address (line 2)

Address (line 3)

Address (line 4)

**Pages** Enter the total number of pages of the attached conveyance document including any attachments. #

**Application Number(s) or Patent Number(s)**  Mark if additional numbers attached

Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).

**Patent Application Number(s)**

**Patent Number(s)**

<input type="text" value="10/883,254"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If this document is being filed together with a new Patent Application, enter the date the patent application was  Month Day Year

**Patent Cooperation Treaty (PCT)**

Enter PCT application number only if a U.S. Application Number has not been assigned.

PCT <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>
PCT <input type="text"/>	PCT <input type="text"/>	PCT <input type="text"/>

**Number of Properties** Enter the total number of properties involved. #

**Fee Amount** Fee Amount for Properties Listed (37 CFR 3.41): \$

Method of Payment: Enclosed  Deposit Account

Deposit Account

(Enter for payment by deposit account or if additional fees can be charged to the Deposit Account Number: #

Authorization to charge additional fees: Yes  No

**Statement and Signature**

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.

BRIAN J. LALLY



SEP 16 2004

Name of Person Signing

Signature

Date

**CONFIRMATORY LICENSE**

Application for: EXFILTRMETER APPARATUS AND METHOD FOR MEASURING  
UNSATURATED HYDROLOGIC PROPERTIES IN SOIL

Inventor(s): Joel M. Hubbell, James B. Sisson, Annette L. Schafer

Serial No.: 10/883,254

Filing Date (U.S.): 06/30/2004

DOE Contract No.: DE-AC07-99ID13727

Contractor: Bechtel BWXT Idaho, LLC

The invention identified above is a "Subject Invention" under the above-numbered contract. A copy of the provisions of the above-numbered contract governing patent rights in the Subject Invention at the time the invention was made has been submitted to the U.S. Department of Energy.

The Contractor hereby confirms that under the provisions of the above-numbered contract governing patent rights, it has granted to the Government a nonexclusive, nontransferable, irrevocable, paid-up license to practice or to have practiced for or on behalf of the United States the Subject Invention throughout the world. This License applies to the invention in the above-identified patent application and any and all divisions or continuations thereof and any resulting patent or reissue patent which may be granted thereon.

It is understood and agreed that this License does not preclude the Government from asserting rights under the provisions of said Contract or any other agreement between the Government and the Contractor, or any other rights of the Government with respect to the above-identified invention.

The Contractor hereby grants the Government an irrevocable power to inspect and make copies of the above-identified application.

Signed this 8th day of September, 2004.

BECHTEL BWXT IDAHO, LLC  
Operator of the INEEL

By: 

A. Ray Barnes  
Director, Technology Outreach  
P. O. Box 1625, Idaho Falls, ID 83415-3805