

March 18, 2015

Director, Office of Federal and State Materials and Environmental Management  
Programs

ATTN: GLTS

U.S. Nuclear Regulatory Commission  
Washington, DC 20555-0001

Re: Report of Distribution or Receipt of Generally Licensed Devices

Dear Hector Luis Rodriguez-Luccioni, Ph.D.  
Hector Luis Rodriguez-Luccioni  
US NRC  
(301) 415-6004

Report for distribution or receipt of generally licensed devices pursuant to 25 TAC §289.252(l) or our radioactive material license, L-06458, were made in the calendar quarter beginning Oct 1, 2014 and ending Dec 31, 2014.

Sincerely,

Warren Sneedon  
Radiation Safety Officer



**TRANSFERS OF INDUSTRIAL  
DEVICES REPORT  
(TO GENERAL LICENSEES)**

Estimated burden per response to comply with this mandatory collection request 36 minutes. NRC requests quarterly reports to keep apprised of device movements. Send comments regarding the burden estimate to the FOIA, Privacy, and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOF-10202, (3150-0001), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

(Continue on NRC Form 653, 653A or 653B, as appropriate)

**For each "licensee" to whom a device(s) has been transferred during the reporting period, supply the following:**

NAME OF VENDOR Multi Phase Meters Inc.	REPORTING PERIOD	
	FROM	TO
LICENSE NUMBER L06458	10/01/2014	12/31/2014

**INTERMEDIATE PERSON(S) (if any)**

NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

**GENERAL LICENSEE INFORMATION**

NAME OF GENERAL LICENSEE Anadarko	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code) 1201 Lake Robbins Drive The Woodlands, TX 77380 USA		
NAME OF RESPONSIBLE INDIVIDUAL Teri Powell	TELEPHONE (832) 636-1261		
TITLE OF RESPONSIBLE INDIVIDUAL Regulatory Analyst			

**INFORMATION ON DEVICE(S) TRANSFERRED**

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS
11/12/2014	Sealed Source	TS-MPM	7902-11-26	Cs-137	7.4 Gbq(200mCi)
11/12/2014	Sealed Source	TS-MPM	7902-11-27	Cs-137	7.4 Gbq(200mCi)
11/12/2014	Sealed Source	TS-MPM	7902-11-28	Cs-137	7.4 Gbq(200mCi)
11/12/2014	Sealed Source	TS-MPM	7902-11-29	Cs-137	7.4 Gbq(200mCi)

**INTERMEDIATE PERSON(S) (if any)**

NAME OF INTERMEDIATE PERSON	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
NAME OF INTERMEDIATE PERSON	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

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NAME OF RESPONSIBLE INDIVIDUAL Teri Powell	TELEPHONE (832) 636-1261		
TITLE OF RESPONSIBLE INDIVIDUAL Regulatory Analyst			

**INFORMATION ON DEVICE(S) TRANSFERRED**

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS
11/12/2014	Sealed Source	TS-MPM	7902-11-30	Cs-137	7.4 Gbq(200mCi)
11/12/2014	Sealed Source	TS-MPM	7902-11-31	Cs-137	7.4 Gbq(200mCi)

**TRANSFERS OF INDUSTRIAL DEVICES REPORT  
 (TO GENERAL LICENSEES) (continued)**

**INTERMEDIATE PERSON(S) (if any)**

NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

**GENERAL LICENSEE INFORMATION**

NAME OF GENERAL LICENSEE LLOG Exploration	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code) 1001 Ochsner Blvd Covington, La 70433
NAME OF RESPONSIBLE INDIVIDUAL Bruce Cooley	TELEPHONE (985) 801-4300
TITLE OF RESPONSIBLE INDIVIDUAL Vice President - Facilities	

**INFORMATION ON DEVICE(S) TRANSFERRED**

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS
12/14/2014	Sealed Source	SS-MPM	7961-13-01	Cs-137	7.4 Gbq(200mCi)

**INTERMEDIATE PERSON(S) (if any)**

NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE
NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

**GENERAL LICENSEE INFORMATION**

NAME OF GENERAL LICENSEE	MAILING ADDRESS AT THE LOCATION OF USE(No P.O. Boxes, include Zip Code)
NAME OF RESPONSIBLE INDIVIDUAL	TELEPHONE
TITLE OF RESPONSIBLE INDIVIDUAL	

**INFORMATION ON DEVICE(S) TRANSFERRED**

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