

April 26<sup>th</sup> 2016

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 of Generally Licensed Devices

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

Report for distribution of generally licensed devices pursuant to 25 TAC §289.252(l) or our radioactive material license, L-06765, were made in the calendar quarter beginning October 1<sup>st</sup>, 2015 and ending December 31<sup>st</sup>, 2015, has been re-audited and revised as per attached form 653.

Sincerely,



Warren Sneedon  
Radiation Safety Officer

(05-2013)  
19 CFR 32



# 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, NEOB-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 FMC Technologies Inc	REPORTING PERIOD	
	FROM 10/01/2015	TO 12/31/2015
LICENSE NUMBER L06765		

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
12/22/2015	Sealed Source	SS-MPM	7961-14-32	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

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					
DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS