

Multi Phase Meters, Inc. 16350 Park Ten Place, Suite 211 Houston, Texas 77084 P +1 281.405.7900 www.fmctechnologies.com

April 26th 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(I) or our radioactive material license, L-06765, were made in the calendar quarter beginning April 1st, 2015 and ending June 30th, 2015, has been re-audited and revised as per attached form 653.

Sincerely,

Warren Sneedon

Radiation Safety Officer

NRC FORM 653 (05-2013) 10 CFR 32

U. S. NUCLEAR REGULATORY COMMISSION APPROVED BY OMB: NO. 3150-0001

EXPIRES: 05/31/2016

TRANSFERS OF INDUSTRIAL

DEVICES REPORT

(TO GENERAL LICENSEES)

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

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(TO GENERAL LICENSEES)

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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 20550. 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.

For each "lice	nsee" to who	m a device(s) has been transfe	rred during the repo	rting period,	supply	the following:	
NAME OF VENDOR				REPORTING PERIOD				
FMC Technologies Inc				FROM			TO	
LICENSE NUMBER L06765				04/01/2015		(06/30/2015	
INTERMEDIATE PERSON(S) (if any)								
NAME OF INTERMEDIATE PERSON(S) NAME OF RES		PONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL		_	TELEPHONE		
NAME OF INTERMEDIATE PERSON(S)		NAME OF RESPONSIBLE INDIVIDUAL		TITLE OF RESPONSIBLE INDIVIDUAL			TELEPHONE	
	,	<u>.</u>	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				
NAME OF RESPONSIBLE	INDIVIDUAL	-	TELEPHONE	Covington, LA 70433				
Bruce Cooley			(985) 801-4300					
TITLE OF RESPONSIBLE Vice President-Facili								
		NFORMATION ON DEVIC	L CE(S) TRANSFERRED					
DATE OF TRANSFER	TYPE OF D	DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS		
04/17/2015	Sealed Source		SS-MPM	7961-13-21	Cs-137	7.4 Gbq(200mCi)		
06/17/2015	/17/2015 Sealed Source		SS-MPM	7961-13-18	Cs-137	7.4 Gbq(200mCi)		
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INTERMEDIATE PERSON(S) (if any)								
NAME OF INTERMEDIATE	E PERSON	NAME OF RES	PONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL			TELEPHONE	
NAME OF INTERMEDIATE PERSON NAME (PONSIBLE 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	1				
TITLE OF RESPONSIBLE INDIVIDUAL				1				
		11	NFORMATION ON DEVIC	E(S) TRANSFERRED				
DATE OF TRANSFER	TYPE OF DEVICE		MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS		
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