



David Estes
Gulf of Mexico HSE Specialist / RSO

USPS Certified Mail: 7020 2450 0001 9226 1522

January 29, 2024

Director, Office of Nuclear Material Safety and Safeguards
ATTN: Document Control Desk/GLTS
U.S. Nuclear Regulatory Commission
Washington DC 20555-0001

Chevron Gulf of Mexico is submitting written notification to the NRC on the transfer of one sealed source from OneSubsea (LA-10487-L01) to Chevron Gulf of Mexico (GL-727340-29). This device will be stored at the OneSubsea LLC warehouse located at 3007 Hwy 182 East, Bayou Vista, LA 70380.

Date of Transfer	Type of Device	Model Number	Serial Number	Storage Location	Isotope	Activity and Units
January 12, 2024	Sealed Source Flow Meter	SH7961 MPFM	7961-21-07	OneSubsea LLC 3007 Hwy 182 East, Bayou Vista, LA 70380	CS-137	200mCi

Please find attached for this MPFM:

- NRC Form 653
- OneSubsea Source Transfer Form
- Radiation Survey Report
- S-TEC Certificate of Compliance

If you should have any questions, please contact me at 505-320-3201 or email at EEST@chevron.com

Sincerely,

Chevron U.S.A. Inc.
Gulf of Mexico Business Unit
David Estes
Environmental HSE Specialist/Radiation Safety Officer

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NMSS

David Estes
GOM HSE Specialist / RSO
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T-7961-04 Rev. 00 | 29.01.2015

Certificate of Compliance

COC no: 4500602100-COC-7961-21-07
Customer PO no: 4500602100
Date of Shipment 02.02.2022

We hereby certify that:

Item	Serial Number
SH-7961, Source Holder for Subsea Installation	7961-21-07
Radiation Source Cs-137, 7.4GBq (200 mCi)	3265 CP

supplied by us under the conditions of the above referenced contract are in compliance with the terms, conditions and specification(s) of the contract.

Date of Signature: 28.02.2022

Name: Anders Mouland

Position: General Manager

Signature:

A handwritten signature in black ink, appearing to read 'Anders Mouland'.



Supplier: Technic FMC / One Subsea

W.O. Number: CVX JSM 802

Part Number: 2327006-02 Rev: _____

Description: MPFM S-Tec

Flow Meter S/N: 1218810560001

Survey Date: 1/11/24

Flow Meter Model: S-Tec SH 7961

Survey Meter S/N: 338242

Calibration: 7/18/23

Source Element: Cs137

Source S/N: 7961-21-07

Sealed Source Model: _____

Visual OK: yes

Survey Readings Background 0.3 MR/hr

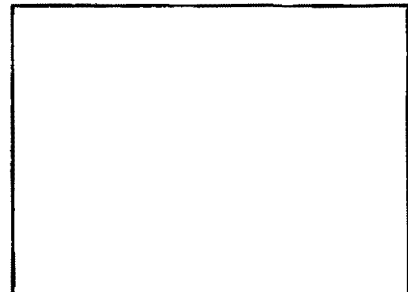
	Surface ^{All readings MR/hr}	6" from Surface	39" from Surface
From Front:	<u>9</u>	<u>3</u>	<u>0.8</u>
From Back:	<u>7</u>	<u>1.9</u>	<u>0.5</u>
From Left:	<u>1.5</u>	<u>0.9</u>	<u>0.3</u>
From Right:	<u>0.4</u>	<u>0.3</u>	<u>0.2</u>

Survey OK: Yes

Sketch:

Surveyed By: Jerrid Bergeron
Print Name

Signature: [Signature]
NOTE:



Source Transfer Form



The purpose of this form is to confirm the transfer of one 200 mCi Cs-137 source identified below from One Subsea (OSS) (License No. LA-10487-L01) to: Chevron Gulf of Mexico

Client Name Chevron Gulf of Mexico		
Responsible Person (print) David Estes	Title Environmental HSE Specialist/GOM RSO	
email eest@chevron.com	Phone.1 985 773 1884	Phone 2

Mailing Address - Client Office 100 North Park Blvd, S2240B Covington, LA 70433	Mailing address of the location of use - no PO Box; include zip code
Send correspondence from STC to this address? YES / NO	Address must be in the state in which the device(s) is transferred

Device and Source Transfer Details	
Meter model	S-Tec Sh7961
Meter S/N	121881056-00-01
Source model	SH-7961
Source S/N	7961-21-07
Source assay date	
Leak test date	
Well name	
Latitude	
Longitude	

Upon transfer of possession of the source(s) client acknowledges:

- Receiving a copy of the initial installation survey from the OSS representative;
- The device(s) is Generally Licensed and client becomes a General Licensee subject to the requirements thereof;
- STC will report transfer of a Generally Licensed Device(s) (GLD) to the agency(s) having jurisdiction; and
- The agency(s) may send written requests for information concerning the device(s) to the "location of use" mailing address.

Client (Print Name) David Estes	Sign 	Date 1/29/2024
One Sub Sea (Print Name) Jerrid Bergeron	Sign 	Date 1/11/2024



TRANSFERS OF INDUSTRIAL DEVICES REPORT (TO GENERAL LICENSEES)

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

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, Library and Information Collections Branch (T-6 A10M), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by email to Infocollections.Resource@nrc.gov, and the OMB reviewer at: OMB Office of Information and Regulatory Affairs, (3150-0001). Attn: Desk Officer for the Nuclear Regulatory Commission, 725 17th Street NW, Washington, DC 20503; email: oir_submission@omb.eop.gov. The NRC may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the document requesting or requiring the collection displays a currently valid OMB control number.

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

Name of Vendor OneSubsea	Reporting Period	
	From January 1, 2024	To March 31, 2024
License Number LA-10487-L01		

Intermediate Person(s) (if any)

Name of Intermediate Person(s)	Name of Responsible Individual	Title of Responsible Individual	Business Telephone Number

General Licensee Information

Name of General Licensee Chevron	Mailing Address at the Location of Use (No P.O. Boxes, include zip code) Chevron Gulf of Mexico 100 North Park Blvd, S2240B Covington, LA 70433
Name of Responsible Individual David Estes	Business Telephone Number 9857731884
Title of Responsible Individual HSE	

Information on Device(s) Transferred

Date of Transfer	Type of Device	Model Number	Serial Number	Isotope	Activity and Units
1/12/2024	Flowmeter	SH7961	7961-21-07	Cs-137	200 mCi

Intermediate Person(s) (if any)

Name of Intermediate Person(s)	Name of Responsible Individual	Title of Responsible Individual	Business Telephone Number

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	Business Telephone Number
Title of Responsible Individual	

Information on Device(s) Transferred

Date of Transfer	Type of Device	Model Number	Serial Number	Isotope	Activity and Units