

From: Esther Bryan (She/Her)
Sent: Tuesday, December 17, 2024 6:32 PM
To: Hille, Sonia (DSHS) <Sonia.Hille@dshs.texas.gov>
Subject: RE: Quarterly Reports (Generally Licensed Devices)

Hello Ms. Hills,

Thank you for providing these reports which we will handle appropriately within the NRC's General License Program.

Best,

Esther M. Bryan, PMP

Project Manager

Material Safety Licensing Branch

MSST/NMSS

Nuclear Regulatory Commission

Office- 301-415-5011 Cell- 202-893-2269

Esther.Bryan@nrc.gov

From: Hille, Sonia (DSHS) <Sonia.Hille@dshs.texas.gov>
Sent: Tuesday, December 17, 2024 11:57 AM
To: Esther Bryan (She/Her) <Esther.Bryan@nrc.gov>
Subject: [External_Sender] Quarterly Reports (Generally Licensed Devices)

Hello Ms. Bryan,

I hope this email finds you well.

Our department receives quarterly reports as required by regulation for generally licensed devices distributed to licensees in Texas. These devices are typically sent to a licensee in Texas with the final location of use in the Gulf of Mexico.

Given the radionuclide and activity, Texas will normally contact the licensee to register the device. However, because of their intended use location, it falls outside of our jurisdiction.

From all the reports we have received, there are numerous meters in the Gulf of Mexico. I wanted to check with the NRC to see if your department oversees the licensees that possess these devices and/or if we need to be forwarding you these reports when we receive them.

I have attached a recent report for your reference.

Feel free to call me if you have any questions.

Sonia Hille
Health Physicist II, Radiation Section
Radioactive Materials Licensing Branch
Texas Department of State Health Services
P. O. Box 149347, Mail Code 1986
Austin, Texas 78714-9347

Cell: 512-289-4708

Main: 512-834-6661

Email: Sonia.hille@dshs.texas.gov

Web <https://www.dshs.texas.gov/texas-radiation-control>

Radiological Emergency Number 512-458-7460

How was my service today? <https://www.surveymonkey.com/r/RLUsurvey>



November 11, 2024

Radioactive Material Licensing Group
Radiation Safety Licensing Branch
Texas Department of State Health Services
PO Box 149347
Austin, TX 78714-9347

**Report of Distribution of Generally Licensed Devices
Radioactive Material License L-06765 – Third Quarter 2024**

There were four (4) generally licensed devices distributed to a general license holder and two (2) generally licensed devices received from a general license holder between 1 July 2024 and 31 August 2024. FMC Technologies, INC quarterly distribution report is included on pages 2, 3 and 4 of this document for your review.

Please do not hesitate to contact me should you have any questions or concerns.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Robert R. Roggenbuck Jr.', with a stylized flourish at the end.

Robert R. Roggenbuck Jr

Radiation Safety Officer - Instrument WR - MPM
P: +1 281.591.5448
M: +1 346.300.8082
E: Bobby.Roggenbuck@technipfmc.com

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 Information Services 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.

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	TO
LICENSE NUMBER L06765	07/01/2024	09/30/2024

INTERMEDIATE PERSON(S) (if any)

NAME OF INTERMEDIATE PERSON(S) Hunting	NAME OF RESPONSIBLE INDIVIDUAL Philip Sheridan	TITLE OF RESPONSIBLE INDIVIDUAL General Manager	TELEPHONE (832) 651-6543
NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

GENERAL LICENSEE INFORMATION

NAME OF GENERAL LICENSEE LLOG Exploration Company, LLC	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code) 1001 Ochsner Blvd, Suite 100 Covington, LA 70433		
NAME OF RESPONSIBLE INDIVIDUAL Thomas Gravouilla	TELEPHONE (985) 801-4300	Meters to be installed in Gulf of Mexico	
TITLE OF RESPONSIBLE INDIVIDUAL Sr. HSE Advisor			

INFORMATION ON DEVICE(S) TRANSFERRED

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS
08/01/2024	SUBSEA MPFM	SS-MPM-03	7962-22-44	Cs 137	200 mCi

INTERMEDIATE PERSON(S) (if any)

NAME OF INTERMEDIATE PERSON Hunting	NAME OF RESPONSIBLE INDIVIDUAL Philip Sheridan	TITLE OF RESPONSIBLE INDIVIDUAL General Manager	TELEPHONE (832) 651-6543
NAME OF INTERMEDIATE PERSON	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

GENERAL LICENSEE INFORMATION

NAME OF GENERAL LICENSEE Kosmos Energy	MAILING ADDRESS AT THE LOCATION OF USE (No., P.O. Boxes, include Zip Code) 15011 Katy Freeway, Suite 700 Houston, TX 77094		
NAME OF RESPONSIBLE INDIVIDUAL Charles Dudek	TELEPHONE (281) 921-3458	Meters to be installed in Gulf of Mexico	
TITLE OF RESPONSIBLE INDIVIDUAL Radiation Safety Officer			

INFORMATION ON DEVICE(S) TRANSFERRED

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS
07/01/2024	SUBSEA MPFM	SS-MPM-03	7961-18-52	Cs 137	200 mCi
07/01/2024	SUBSEA MPFM	SS-MPM-03	7961-20-01	Cs 137	200 mCi

TRANSFERS OF INDUSTRIAL DEVICES REPORT (TO GENERAL LICENSEES)

INTERMEDIATE PERSON(S) (if any)

NAME OF INTERMEDIATE PERSON(S) Port Fourchon	NAME OF RESPONSIBLE INDIVIDUAL Shane Futch	TITLE OF RESPONSIBLE INDIVIDUAL Radiation Safety Officer	TELEPHONE (504) 343-1938
NAME OF INTERMEDIATE PERSON(S)	NAME OF RESPONSIBLE INDIVIDUAL	TITLE OF RESPONSIBLE INDIVIDUAL	TELEPHONE

GENERAL LICENSEE INFORMATION

NAME OF GENERAL LICENSEE Shell	MAILING ADDRESS AT THE LOCATION OF USE <i>(No P.O. Boxes, include Zip Code)</i> Shell Exploration & Production Company
NAME OF RESPONSIBLE INDIVIDUAL Shane Futch	TELEPHONE (504) 343-1938
TITLE OF RESPONSIBLE INDIVIDUAL Radiation Safety Officer	One Shell Square 701 Poydras St, New Orleans, LA 70139 Meters to be installed in Gulf of Mexico

INFORMATION ON DEVICE(S) TRANSFERRED

DATE OF TRANSFER	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	ISOTOPE	ACTIVITY AND UNITS
07/01/2024	SUBSEA MPFM	SS-MPM-03	7962-22-05	Cs 137	200 mCi

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 <i>(No P.O. Boxes, include Zip Code)</i>
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

TRANSFERS OF INDUSTRIAL DEVICES REPORT (FROM GENERAL LICENSEES)

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

GENERAL LICENSEE INFORMATION

NAME OF GENERAL LICENSEE Kosmos Energy	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code) 15011 Katy Freeway, Suite 700 Houston, TX 77094
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INFORMATION ON DEVICE(S) RECEIVED

DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR (IF NOT REPORTING PARTY)
09/03/2024	Subsea MPFM	SS-MPM-03	7961-14-35	
09/03/2024	Subsea MPFM	SS-MPM-03	7961-17-08	

GENERAL LICENSEE INFORMATION

NAME OF GENERAL LICENSEE	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)
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INFORMATION ON DEVICE(S) RECEIVED

DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR (IF NOT REPORTING PARTY)

GENERAL LICENSEE INFORMATION

NAME OF GENERAL LICENSEE	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)
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INFORMATION ON DEVICE(S) RECEIVED

DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR (IF NOT REPORTING PARTY)

GENERAL LICENSEE INFORMATION

NAME OF GENERAL LICENSEE	MAILING ADDRESS AT THE LOCATION OF USE (No P.O. Boxes, include Zip Code)
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INFORMATION ON DEVICE(S) RECEIVED

DATE OF RECEIPT	TYPE OF DEVICE	MODEL NUMBER	SERIAL NUMBER	MANUFACTURER OR INITIAL TRANSFEROR (IF NOT REPORTING PARTY)