

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(l) or our radioactive material license, L-06765, were made in the
calendar quarter beginning October 1st, 2015 and ending December 31st,
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)

(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, Privacy, and Information Collections Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollect@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		10/01/2015		12/31/2015	
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 Blyd 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