FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  MAMBU RONALD D						2. Issuer Name and Ticker or Trading Symbol FMC TECHNOLOGIES INC [FTI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner						
(Last) 1803 GE	(Fi	,	Middle)		10/02	2/20	006		,	onth/Day/Year)				X	below	er (give title w) VP and Con				
(Street) HOUST(			77067 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								3. Indi Line) X	,					
		Tab	le I - N	on-Deriv	ative S	Sec	urities	Ac	quired, [	Disp	osed o	of, or B	enefic	ially	Owne	d				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution Date,			Transaction Dispose Code (Instr. and 5)			rities Acc ed Of (D)			5. Amo Securit Benefic Owned	ies cially	Forr (D) o Indi	m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership	
					Code				v	Amoun	t (A)	A) or Price		Report Transa			tr. 4)	(Instr. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	tle of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, or Exercise (Month/Day/Year)			4. Transact	5. Number of Derivative			6. Date Exe Expiration (Month/Day	rcisa Date	able and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. of De Se (Ir	Price erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
					Code	v	(A)	(D)	Date Exercisable		piration ate	Title	Amour or Number of Shares	er						
Phantom Stock Units	<b>\$0</b> <sup>(1)</sup>	10/02/2006 <sup>(2)</sup>			A		116.18		(3)		(3)	Common Stock <sup>(4)</sup>	116.1	.8	\$7.05	8,685.66		D		
Phantom Stock Units	\$0 <sup>(1)</sup>	10/03/2006 <sup>(5)</sup>			A		120.99		(3)		(3)	Common Stock <sup>(4)</sup>	120.9	19	\$6.77	8,806.65		D		

## Explanation of Responses:

- 1. N/A
- 2. Acquisition of Phantom Stock Units (in an exempt transaction) by the reporting person under the FMC Technologies, Inc., Non-Qualified Savings and Investment Plan (NQ Plan). Phantom Stock Units are payable in cash following termination or retirement of the reporting person's employment with FMC Technologies, Inc., or death.
- 3. Phantom Stock Units are payable in cash following termination or retirement of the reporting person's employment with FMC Technologies, Inc., or death.
- 4. A participant's interest in the NQ Plan is represented in units (referred to as Phantom Stock Units) which consist of phantom shares of FMC Technologies, Inc. Common Stock and uninvested cash balances held by the NQ Plan for administrative convenience.
- 5. Acquisition of Phantom Stock Units (in an exempt transaction) under the FMC Technologies, Inc. Non-Qualified Savings and Investment Plan (NQ Plan) resulting from matching contribution by issuer. Phantom Stock Units are payable in cash following termination or retirement of the reporting person's employment with FMC Technologies, Inc., or death.

## Remarks:

By: James L. Marvin, attorney-in-fact 10/04/2006

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- \* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.