



# BOTTOM HOLE ASSURANCE, INC.

No. DIR 51722CW-3

Blacklight, Ultrasonic Wall Thickness, & Liquid Penetrant Inspection

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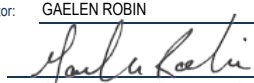
CUSTOMER HALLIBURTON ICC  3RD PARTY  
RIG \_\_\_\_\_  
OCS-G & WELL \_\_\_\_\_

FACILITY / LOCATION CLEAN WELL  
PROJECT HESS

AUTHORIZED BY TONY FREDRICK  
P.O. / JOB # 907856215

INVOICE NO. \_\_\_\_\_  
DATE: 5/17/2022

Serial #	Tool Description	Overall Length	Fishing Neck Length	Tong Space	Pin I.D.	Pin O.D.	Box O.D.	PIN										BOX						Remarks				
								Connection Size	Pin Length	Pin Cylinder Diameter	Pin Nose Diameter	Pin Relief Diameter	Pin Rel. Width	Pin Neck Lgh	Bevel Diameter	B S R	OK or Reject	Remarks	Connection Size	Counter Bore Length	Counter Bore Diameter	Bore Back Dia. Float Bore Dia.	Bore Back Lgh Float Bore Lgh		Box Thread Length	Counterbore Wall Thickness	Bevel Diameter	B S R
HMM 573	SPIRAL MILL	5.47	24 3/4	9 1/2	2 7/8	6 1/2	6 1/2	NC 50	4 7/16			4.737	27/32	6 11/32		Acc		NC 50	5/8	5 5/16	4 5/8	8 1/8			6 3/8		Rej	PITTED THREADS

Remarks: FULL BODY INSP. AS PER BSD-GL-HAL-CWT-201												Customer Rep Signoff:					
Batch # Info.		Connection Inspection				Body Inspection				Body Dry M.P.I.		Blacklight Inspection			Liquid Penetrant Inspection		
20-B Dry Powder	19F096K	Wet Flour. M.P.I. <input checked="" type="checkbox"/>	Dry M.P.I. <input type="checkbox"/>	Wet Flour. M.P.I. <input checked="" type="checkbox"/>	Residual <input type="checkbox"/>	Dry M.P.I. <input type="checkbox"/>	Residual <input type="checkbox"/>	Blacklight Intensity: <u>6201</u>	Bath Mixture: <u>0.25</u>	Whitelight: <u>0.1</u>	Magnaflox Developer: SKD-S2						
7-HF		Vis. Liq. Pen. <input type="checkbox"/>	Residual <input type="checkbox"/>	Vis. Liq. Pen. <input type="checkbox"/>	Continuous <input checked="" type="checkbox"/>	Long. Insp. <input type="checkbox"/>	Continuous <input type="checkbox"/>	Equipment Used From Unit # <u>32</u>			Batch # _____						
White Contrast		Flour Liq. Pen. <input type="checkbox"/>	Continuous <input checked="" type="checkbox"/>	Flour Liq. Pen. <input type="checkbox"/>	AC Current <input type="checkbox"/>	Trans. Insp. <input type="checkbox"/>	AC Current <input type="checkbox"/>	Qual. Date(s) <u>MT 11/30/2021</u> PT _____			Dwell Time: _____ min						
14-A		Long. Insp. <input checked="" type="checkbox"/>	AC Current <input checked="" type="checkbox"/>	Long. Insp. <input checked="" type="checkbox"/>	DC Current <input checked="" type="checkbox"/>	DC Current <input type="checkbox"/>	DC Current <input type="checkbox"/>	Level II Inspector: <u>GAELEN ROBIN</u>			White Light: _____						
System Effectiveness:		LP-Comparitive Block <input type="checkbox"/>	Dry MP-Castrol Strip <input type="checkbox"/>	Wet MP-Castrol Strip <input checked="" type="checkbox"/>	Profile Gage RSC OK <input checked="" type="checkbox"/>	Signature: _____		Signature: 			Magnaflox Penetrant: <input type="checkbox"/> SKL-WP2 (Check one) <input type="checkbox"/> ZL-60D						
Job Information		3rd Party Rep _____				Signature: _____		Signature guarantees final walk thru of job and job site			Batch # _____						
B _____	GR _____	V _____	GR _____	D _____	P _____	GR _____							Dwell Time: _____ min				