



BOTTOM HOLE ASSURANCE, INC.

NDE Inspection Services

No. IR 50624TT-1

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Bottomholeassurance.com

CUSTOMER HALLIBURTON ICC		3rd PARTY <input type="checkbox"/>	FACILITY / LOCATION TEST TOOLS	AUTHORIZED BY BOBBY CHOATE		INVOICE NO.	
RIG		OCS-G & WELL NO.		PROJECT IN HOUSE	P.O. NO. / JOB NO. 1017510022	DATE 5/6/2024	
SERIAL NO.	DESCRIPTION		PIN	BOX	I.D.	O.D.	LENGTH
1	EQ# 10919842	5" BELOW PACKER SAFTEY JOINT					
2							
3							
4	BAC22A1345-1	SPLINED OPERATING PISTON - ACC		INT - ACC			
5		SAP# 100065368					
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SUMMARY: FULL BODY INSP. BSM-GOM-HAL-TT-201 REV. 6 ***COMPONENTS ONLY***

Batch # Info.	Connection Inspection		Body Inspection			Body Dry M.P.I	
20-B 23K007	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"/>	
Dry Powder	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"/>	
7-HF	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"/>	
White Contrast	Long. Insp. <input checked="" type="checkbox"/>	AC Current <input type="checkbox"/>	Long. Insp. <input checked="" type="checkbox"/>	DC Current <input checked="" type="checkbox"/>		DC Current <input type="checkbox"/>	
14-A	Trans. Insp. <input checked="" type="checkbox"/>	DC Current <input checked="" type="checkbox"/>	Trans. Insp. <input checked="" type="checkbox"/>	Visible M.P.I. <input type="checkbox"/>			

System Effectiveness: LP-Comparitive Block Dry MP-Castrol Strip Wet MP-Castrol Strip

Blacklight Inspection	Equipment / Inspector Information
Blacklight Intensity: <u>3248</u> Bath Mixture: <u>0.25</u> Whitelight: <u>0.1</u>	Equipment Used From Unit # <u>13</u> Qual. Date(s) MT <u>2/16/2023</u> PT <u>8/9/2023</u>
Liquid Penetrant Inspection Whitelight: _____ Magnaflux Developer: SKD-S2 Magnaflux Penetrant: (Check one) <input type="checkbox"/> SKL-WP2 <input type="checkbox"/> ZL-60D Batch # _____ Batch # _____ Dwell Time: _____ min Dwell Time: _____ min	3rd Party Rep: _____ Signature: _____ Level II Inspector: BRONZE POIRIER Signature: <u>Bobby Poirier</u> <small>Signature guarantees full walk thru of job and job site</small>
Job Information B <u>BP</u> V <u>BP</u> D _____ P <u>BP</u>	Customer Rep Signoff: _____

