

BOTTOM HOLE ASSURANCE, INC.

No. DIR 50624TT-5

NDE Inspection Services

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Bottomholeassurance.com



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

FACILITY / LOCATION TEST TOOLS
PROJECT IN HOUSE

AUTHORIZED BY BOBBY CHOATE
P.O. / JOB # 1017510022

INVOICE NO. _____
DATE: 5/6/2024

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 Beel Width Pin Neck Lgth	Bevel Diameter	B S R	OK or Reject	Remarks	Connection Size	Counter Bore Length	Counter Bore Diameter	Float Bore Dia.	Bore Back Dia. Float Bore Lgth	Bore Back Lgth Float Bore Lgth		Box Thread Length	Counterbore Wall Thickness	Bevel Diameter	B S R
14131291	X-OVER	1.62	FL	FL	2 1/4	5	5	3 7/8 CAS	-	-	-	-	-	-	-	Acc	-	NC 38	11/16	4 1/16	-	-	-	-	4 7/8	-	AC C	-
12765401	X-OVER	1.46	FL	FL	2 1/4	5	5	NC 38	4	-	-	-	11/16	4 7/8	-	AC C	-	3 7/8 CAS	-	-	-	-	-	-	-	-	AC C	-
14131281	X-OVER	1.68	FL	FL	2 1/4	5	5	NC 38	3 15/16	-	-	-	MOD	4 7/8	-	AC C	-	3 7/8 CAS	-	-	-	-	-	-	-	-	AC C	-
12763642	X-OVER	1.33	FL	FL	2 1/4	5	5	3 7/8 CAS	-	-	-	-	-	-	-	AC C	-	NC 38	5/8	4 1/16	-	-	-	-	4 7/8	-	AC C	-
13008730	X-OVER	1.45	FL	FL	2 1/4	5	5	3 7/8 CAS	-	-	-	-	-	-	-	AC C	-	NC 38	11/16	4 1/16	-	-	-	-	4 57/64	-	RE J	PITTED THREADS
12765400	X-OVER	1.55	FL	FL	2 1/4	5	5	NC 38	4	-	-	-	5/16	4 3/4	-	RE J	DAMAGE THREADS	3 7/8 CAS	-	-	-	-	-	-	-	-	AC C	-
12802693	X-OVER	1.98	13 1/2	13	2 1/4	5	7	3 7/8 CAS	-	-	-	-	-	-	-	Acc	-	CTM 57	-	5.909	-	-	5.627	.549	6 3/4	-	Acc	-
617-1112	X-OVER	2.24	15 15/16	12 15/16	2 1/4	5	7	CTM 57	5.623	5.851	-	-	-	6.732	-	Acc	-	3 7/8 CAS	-	-	-	-	-	-	-	-	Acc	-
617-1106	X-OVER	2.17	13 1/8	12 7/8	2 1/4	5	7	CTM 57	-	-	-	-	-	-	-	Acc	-	CTM 57	-	5.936	-	-	5.630	.536	6.734	-	Acc	-
12953913	X-OVER	2.97	FL	FL	2 1/4	6 1/4	6 1/4	3 7/8 CAS	-	-	-	-	-	-	-	Acc	-	NC 50	5/8	5 5/16	-	-	-	-	6 7/64	-	RE J	PITTED THERADS

Remarks: FULL BODY INSP. AS PER BSM-GOM-HAL-TT-201 REV.6

Customer Rep Signoff: _____

Batch # Info.	20-B 23K007	Connection Inspection	Body Inspection	Body Dry M.P.I	Blacklight Inspection	Liquid Penetrant Inspection
Dry Powder	Wet Flour. M.P.I. <input checked="" type="checkbox"/> Residual <input type="checkbox"/>	Wet Flour. M.P.I. <input checked="" type="checkbox"/> Residual <input type="checkbox"/>	Wet Flour. M.P.I. <input checked="" type="checkbox"/> Residual <input type="checkbox"/>	Wet Flour. M.P.I. <input checked="" type="checkbox"/> Residual <input type="checkbox"/>	Blacklight Intensity: 2302 Bath Mixture: 0.25 Whitelight: 0.1	Magnaflux Developer: SKD-S2
7-HF	Vis. Liq. Pen. <input type="checkbox"/> Continuous <input checked="" type="checkbox"/>	Vis. Liq. Pen. <input type="checkbox"/> Continuous <input checked="" type="checkbox"/>	Vis. Liq. Pen. <input type="checkbox"/> Continuous <input checked="" type="checkbox"/>	Vis. Liq. Pen. <input type="checkbox"/> Continuous <input checked="" type="checkbox"/>	Equipment Used From Unit # 13	Batch # _____
White Contrast	Flour Liq. Pen. <input type="checkbox"/> AC Current <input type="checkbox"/>	Flour Liq. Pen. <input type="checkbox"/> AC Current <input type="checkbox"/>	Flour Liq. Pen. <input type="checkbox"/> AC Current <input type="checkbox"/>	Flour Liq. Pen. <input type="checkbox"/> AC Current <input type="checkbox"/>	Qual. Date(s) MT 2/16/2023 PT 8/9/2023	Dwell Time: _____ min
14-A	Long. Insp. <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>	Long. Insp. <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>	Long. Insp. <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>	Long. Insp. <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>	Level II Inspector: BRONZE POIRIER	White Light: _____
System Effectiveness:	Trans. Insp. <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>	Trans. Insp. <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>	Trans. Insp. <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>	Trans. Insp. <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>	Signature: <i>Bobby Poirier</i>	Magnaflux Penetrant: <input type="checkbox"/> SKL-WP2 <input type="checkbox"/> ZL-60D
	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: _____	(Check one)
	3rd Party Rep _____				Signature: _____	Batch # _____
Job Information				Signature: _____		
B	BP	V	BP	D	P	BP



Signature guanteees final walk thru of job and job site

By david.patin@bottomholeassurance.com at 3:19:58 PM, 5/6/2024