# BOTTOM HOLE ASSURANCE, INC.


*Blacklight, Ultrasonic Wall Thickness,*
*& Liquid Penetrant Inspection*

Email: BHAInc@bottomholeassurance.com
109 Citron Drive • Youngsville, LA 70592
Office: (337) 857-8994 Fax: (337) 857-8964


No. DIR **51822SB1**

CUSTOMER **SBES** ☐ 3RD PARTY
RIG
OCS-G & WELL
FACILITY / LOCATION **SHOP**
PROJECT
AUTHORIZED BY **KALE**
P.O. / JOB # **W/O# 323750344**
INVOICE NO.
DATE: **5/18/2022**

| | | | | | | | | PIN | | | | | | | | | | BOX | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Serial # | Tool Description | Overall Length | Fishing Neck Length | Tong Space | Pin I.D. | Pin O.D. | Box O.D. | Connection Size | Pin Length | Pin Cylinder Diameter | Pin Nose Diameter | Pin Relief Diameter | Pin Rel. Width Pin Neck Lgth | 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 Lgth Float Bore Lgth | Box Thread Length | Counterbore Wall Thickness | Bevel Diameter | B S R | OK or Reject | Remarks |
| SN 11654482<br>PN 120141108 | 8" PM SUB | 8.42 | | | N/A | | 8" | | | | | | | | | | | 6 5/8 REG | 37/64 | 6 1/16 | | | | | 7 33/64 | | OK | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | MR 52197 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**Remarks:** INSP AS PER D00685901 REV. T ALL CONNECTIONS MARKED WITH CW STAMP UNLESS NOTED OTHERWISE

Customer Rep Signoff:

**Batch # Info.**

| | |
|---|---|
| 20-B | |
| Dry Powder | |
| 7-HF | |
| White Contrast | |
| 14-A | |

**Connection Inspection**

| | | | |
|---|---|---|---|
| Wet Flour. M.P.I. | ☐ | Dry M.P.I. | ☐ |
| Vis. Liq. Pen. | ☑ | Residual | ☐ |
| Flour Liq. Pen. | ☐ | Continuous | ☐ |
| Long. Insp. | ☐ | AC Current | ☐ |
| Trans. Insp. | ☐ | DC Current | ☐ |

**Body Inspection**

| | | | |
|---|---|---|---|
| Wet Flour. M.P.I. | ☐ | Residual | ☐ |
| Vis. Liq. Pen. | ☑ | Continuous | ☐ |
| Flour Liq. Pen. | ☐ | AC Current | ☐ |
| Long. Insp. | ☐ | DC Current | ☐ |
| Trans. Insp. | ☐ | Visible M.P.I. | ☐ |

**Body Dry M.P.I**

| | | | |
|---|---|---|---|
| Dry M.P.I. | ☐ | Residual | ☐ |
| Long. Insp. | ☐ | Continuous | ☐ |
| Trans. Insp. | ☐ | AC Current | ☐ |
| | | DC Current | ☐ |

System Effectiveness: LP-Comparitive Block ☑ Dry MP-Castrol Strip ☐ Wet MP-Castrol Strip ☐ Profile Gage RSC OK ☑

3rd Party Rep

**Job Information**

B V TB D TB P TB

Signature:

**Blacklight Inspection**

Blacklight Intensity: Bath Mixture: Whitelight:

**Equipment / Inspector Information**

Equipment Used From Unit # 25
Qual. Date(s) MT PT 1/27/2020
Level II Inspector: Tanner Blanchard
Signature:

Signature guarantees final walk thru of job and job site

**Liquid Penetrant Inspection**

Magnaflux Developer: SKD-S2
Batch # 21A02U
Dwell Time: 15 min
White Light: 190 FC
Magnaflux Penetrant: ☑ SKL-WP2
(Check one) ☐ ZL-60D
Batch # 19L05K
Dwell Time: 30 min