



**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

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

FACILITY / LOCATION CLEAN WELL  
PROJECT LLOG

AUTHORIZED BY TONY FREDRICK  
P.O. / JOB # 907550988

INVOICE NO. \_\_\_\_\_  
DATE: 5/19/2022

Serial #	Tool Description	Overall Length	Fishing Neck Length	Tong Space	Pin I.D.	Pin O.D.	Box O.D.	PIN								BOX							OK or Reject	Remarks		
								Connection Size	Pin Length	Pin Cylinder Diameter	Pin Nose Diameter	Pin Relief Diameter	Pin Rel. Width Pin Neck Lgth	Bevel Diameter	B S R	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
13469604	RISER	7.21	-	14 11/16	3"	7"	-	CTM-57	5.625	5.837						6.738								Acc	RE-INSP	

Remarks: CONNECTION INSP. AS PER BSD-GL-HAL-CWT-201 (CONNECTION INSPECTION ONLY) (MACHINE SHOP CONNECTION INSPECTION ONLY) Customer Rep Signoff: \_\_\_\_\_

Batch # Info.		Connection Inspection			Body Inspection			Body Dry M.P.I		Blacklight Inspection			Liquid Penetrant Inspection	
20-B	19F096K	Wet Flour. M.P.I. <input checked="" type="checkbox"/>	Dry M.P.I. <input type="checkbox"/>	Wet Flour. M.P.I. <input type="checkbox"/>	Residual <input type="checkbox"/>	Dry M.P.I. <input type="checkbox"/>	Residual <input type="checkbox"/>	Blacklight Intensity: <u>5283</u>	Bath Mixture: <u>0.25</u>	Whitelight: <u>0.1</u>	Magnafux Developer: SKD-S2			
Dry Powder	7-HF	Vis. Liq. Pen. <input type="checkbox"/>	Residual <input type="checkbox"/>	Vis. Liq. Pen. <input type="checkbox"/>	Continuous <input type="checkbox"/>	Long. Insp. <input type="checkbox"/>	Continuous <input type="checkbox"/>	Equipment Used From Unit # <u>32</u>				Batch # _____		
White Contrast	14-A	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				
System Effectiveness:	LP-Comparative 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"/>	Level II Inspector: <u>GAELEN ROBIN</u>		Signature: _____		Signature: _____		White Light: _____			
Job Information		3rd Party Rep _____		Signature: _____		Signature: _____		Signature: _____		Magnafux Penetrant: <input type="checkbox"/> SKL-WP2				
B	GR	V	GR	D	P	GR	Signature: _____		Signature: _____		(Check one) <input type="checkbox"/> ZL-60D			
Signature guarantees final walk thru of job and job site											Batch # _____			
Signature guarantees final walk thru of job and job site											Dwell Time: _____ min			

REVIEWED  
By David Patin at 1:38 pm, May 24, 2022