

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 SERVICE TOOLS
PROJECT ENI

AUTHORIZED BY DERRICK ROBIN
P.O. / JOB # 907825428

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																			
								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							
EQ# 12817245 SO 513013-12	X-OVER SAP# 101299427	3.22	-	-	3 1/2	7	7	5 1/4 CAS											Acc	CONN. ONLY	NC 50	5/8	5 5/16							6 1/32		Acc	CONN. ONLY				

Remarks: CONNECTION INSP. AS PER WM-GL-HAL-HCT-900 REV. 0 (CONNECTION INSPECTION ONLY)

Batch # Info.		Connection Inspection				Body Inspection				Body Dry M.P.I.				Blacklight Inspection				Liquid Penetrant Inspection				
20-B	20B065	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:	8700	Bath Mixture:	0.30	Whitelight:	0.1	Magnaflux Developer:	SKD-S2	
Dry Powder		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 / Inspector Information						Batch #	_____	
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"/>	Equipment Used From Unit #	23	Dwell Time:	_____	min	White Light:	_____		
White Contrast		Long. Insp.	<input type="checkbox"/>	AC Current	<input type="checkbox"/>	Long. Insp.	<input type="checkbox"/>	DC Current	<input type="checkbox"/>	Trans. Insp.	<input type="checkbox"/>	DC Current	<input type="checkbox"/>	Qual. Date(s)	MT 4/26/2019	PT 4/26/2019	Magnaflux Penetrant:	<input type="checkbox"/> SKL-WP2				
14-A		Trans. Insp.	<input checked="" type="checkbox"/>	DC Current	<input checked="" type="checkbox"/>	Trans. Insp.	<input type="checkbox"/>	Visible M.P.I.	<input type="checkbox"/>	Signature guarantees final walk thru of job and job site						Batch #	_____					
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"/>	Level II Inspector:	BRANSON THERIOT									Dwell Time:	_____	min
Job Information		3rd Party Rep		Signature:																REVIEWED		
B	BT	V	BT	D	P	BT	By David Patin at 2:37 pm, May 23, 2022															