



BOTTOM HOLE ASSURANCE, INC.

No. DIR 45084-2

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

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CUSTOMER HOLE OPENER CORP 3RD PARTY
 RIG _____
 OCS-G & WELL _____

FACILITY / LOCATION SHOP
 PROJECT ARENA / RC 51198

AUTHORIZED BY DONOVAN
 P.O. / JOB # 8156

INVOICE NO. 45084
 DATE: 6/23/2022

Serial #	Tool Description	Overall Length	Fishing Neck Length	Tong Space	Pin I.D.	Pin O.D.	Box O.D.	Connection Size	PIN								BOX								Remarks								
									Pin Length	Pin Cylinder Diameter	Pin Nose Diameter	Pin Relief Diameter	Pin Rel. Width	Pin Neck Lgth	Bevel Diameter	BSR	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	BSR	OK or Reject	Remarks			
05-220-009-118,168	(2) BUSHING																																
05-16B-044-500,469,485	(6) HINGE BLOCK PIN																																

Remarks:

FULL BODY INSP AS PER DS-1 VOL 4

Customer Rep Signoff: _____

Batch # Info: 20-B 21J002 Dry Powder 131502 7-HF White Contrast 14-A		Connection Inspection Wet Flour M.P.I. <input type="checkbox"/> Dry M.P.I. <input type="checkbox"/> Vis. Liq. Pen. <input type="checkbox"/> Residual <input type="checkbox"/> Flour Liq. Pen. <input type="checkbox"/> Continuous <input type="checkbox"/> Long. Insp. <input type="checkbox"/> AC Current <input type="checkbox"/> Trans. Insp. <input type="checkbox"/> DC Current <input type="checkbox"/>				Body Inspection Wet Flour M.P.I. <input checked="" type="checkbox"/> Residual <input type="checkbox"/> Vis. Liq. Pen. <input type="checkbox"/> Continuous <input checked="" type="checkbox"/> Flour Liq. Pen. <input type="checkbox"/> AC Current <input type="checkbox"/> Long. Insp. <input type="checkbox"/> DC Current <input checked="" type="checkbox"/> Trans. Insp. <input checked="" type="checkbox"/> Visible M.P.I. <input type="checkbox"/>				Body Dry M.P.I. Dry M.P.I. <input checked="" type="checkbox"/> Residual <input type="checkbox"/> Long. Insp. <input checked="" type="checkbox"/> Continuous <input checked="" type="checkbox"/> Trans. Insp. <input type="checkbox"/> AC Current <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>				Blacklight Inspection Blacklight Intensity: 4670 Bath Mixture: 0.25 Whitelight: 0.1 Equipment / Inspector Information Equipment Used From Unit # 25 Qual. Date(s) MT 5/6/2019 PT _____ Level II Inspector: Tanner Blanchard				Liquid Penetrant Inspection Magnaflex Developer: SKD-S2 Batch # _____ Dwell Time: _____ min White Light: _____ Magnaflex Penetrant: <input type="checkbox"/> SKL-WP2 (Check one) <input type="checkbox"/> ZL-60D Batch # _____ Dwell Time: _____ min					
System Effectiveness: LP-Comparative Block <input type="checkbox"/> Dry MP-Castrol Strip <input checked="" type="checkbox"/> Wet MP-Castrol Strip <input checked="" type="checkbox"/> Profile Gage RSC OK <input checked="" type="checkbox"/>								3rd Party Rep _____ Signature: _____								Signature: Signature guarantees final walk thru of job and job site							
Job Information B _____ TB _____ V _____ TB _____ D _____ P _____ TB _____																							