



B O T T O M H O L E A S S U R A N C E , I N C .

Blacklight, Ultrasonic Wall Thickness,
& Liquid Penetrant Inspection

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

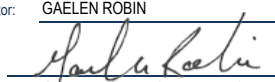
FACILITY / LOCATION **CLEAN WELL**
PROJECT **CHEVRON**

AUTHORIZED BY **TONY FREDRICK**
P.O. / JOB # **907441589**

INVOICE NO. _____
DATE: **6/3/2022**

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									
13426477	DRILL TECH	6.06	-	15 3/16	3"	7"	-	CTM-57	5.623.	5.846.						6.777.			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>1587</u>	Bath Mixture: <u>0.25</u>	Whitelight: <u>0.1</u>	Magnafux 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 Used From Unit # <u>32</u>			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"/>	Qual. Date(s) MT <u>11/30/2021</u> PT _____			Dwell Time: _____ min		
White Contrast		Long. Insp.	<input type="checkbox"/>	AC Current	<input type="checkbox"/>	Long. Insp.	<input type="checkbox"/>	DC Current	<input type="checkbox"/>			DC Current	<input type="checkbox"/>	Level II Inspector: <u>GAELEN ROBIN</u>			White Light: _____		
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"/>	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"/>						Magnafux Penetrant: <input type="checkbox"/> SKL-WP2 (Check one) <input type="checkbox"/> ZL-60D			
Job Information		3rd Party Rep _____						Signature: _____						Batch # _____			Dwell Time: _____ min		
B _____	GR _____	V _____	GR _____	D _____	P _____	GR _____							Signature: 			Signature guarantees final walk thru of job and job site			