



**BOTTOM HOLE ASSURANCE, INC.**

NDE Inspection Services

No. IR 92123TT-1

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Bottomholeassurance.com

CUSTOMER HALLIBURTON ICC		3rd PARTY <input type="checkbox"/>	FACILITY / LOCATION TEST TOOLS	AUTHORIZED BY BOBBY CHOATE		INVOICE NO.	
RIG		OCS-G & WELL NO.		PROJECT IN HOUSE	P.O. NO. / JOB NO. 1017510022	DATE 9/21/2023	
SERIAL NO.	DESCRIPTION		PIN	BOX	I.D.	O.D.	LENGTH
1	EQ# 10255946	5 1/2" CHAMP PACKER					
2	BAC20A0882-3	MECHANICAL SLIP BODY - ACC			INT - ACC		
3		SAP# 100071590					
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SUMMARY: FULL BODY INSP. BSM-GOM-HAL-TT-201 REV. 6      \*\*\*COMPONENTS ONLY\*\*\*      BHA ACC REF LINE 53

Batch # Info.	Connection Inspection		Body Inspection		Body Dry M.P.I	
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 checked="" type="checkbox"/>	Residual <input type="checkbox"/>	Dry M.P.I. <input type="checkbox"/>	Residual <input type="checkbox"/>
Dry Powder	Vis. Liq. Pen. <input type="checkbox"/>	Residual <input type="checkbox"/>	Vis. Liq. Pen. <input type="checkbox"/>	Continuous <input checked="" type="checkbox"/>	Long. Insp. <input type="checkbox"/>	Continuous <input type="checkbox"/>
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"/>
White Contrast	Long. Insp. <input checked="" type="checkbox"/>	AC Current <input type="checkbox"/>	Long. Insp. <input checked="" type="checkbox"/>	DC Current <input checked="" type="checkbox"/>		DC Current <input type="checkbox"/>
14-A	Trans. Insp. <input checked="" type="checkbox"/>	DC Current <input checked="" type="checkbox"/>	Trans. Insp. <input checked="" type="checkbox"/>	Visible M.P.I. <input type="checkbox"/>		

System Effectiveness: LP-Comparative Block  Dry MP-Castrol Strip  Wet MP-Castrol Strip

Blacklight Inspection	Equipment / Inspector Information
Blacklight Intensity: <u>3844</u> Bath Mixture: <u>0.25</u> Whitelight: <u>0.1</u>	Equipment Used From Unit # <u>13</u> Qual. Date(s) MT <u>3/23/2022</u> PT <u>8/23/2022</u>
<b>Liquid Penetrant Inspection</b> Whitelight: _____ Magnaflux Developer: SKD-S2 Magnaflux Penetrant: (Check one) <input type="checkbox"/> SKL-WP2 <input type="checkbox"/> ZL-60D Batch # _____ Batch # _____ Dwell Time: _____ min Dwell Time: _____ min	3rd Party Rep: _____ Signature: _____ Level II Inspector: DAVID PATIN Signature:  <small>Signature guarantees final walk thru of job and job site</small>
<b>Job Information</b> B <u>DP</u> V <u>DP</u> D _____ P <u>DP</u>	Customer Rep Signoff: _____