



BOTTOM HOLE ASSURANCE, INC.

No. DIR 41524SB10

NDE Inspection Services

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Bottomholeassurance.com

CUSTOMER **S.B.E.S** 3RD PARTY
RIG _____
OCS-G & WELL _____

FACILITY / LOCATION Shop _____
PROJECT **Halliburton Sperry** _____

AUTHORIZED BY **Kale Veronie** _____
P.O. / JOB # **WO#326469416** _____

INVOICE NO. _____
DATE: **4/15/2024**

Serial #	Tool Description	Overall Length	Fishing Neck Length	Tong Space	Pin I.D.	Pin O.D.	Box O.D.	PIN							BOX					Remarks												
								Connection Size	Pin Length	Pin Cylinder Diameter	Pin Nose Diameter	Pin Relief Diameter	Pin Neck Lgth	Pin Rel. Width	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	
S/N 11199618 P/N N/A	8" CTN	7.03			N/A		7 15/16															6 5/8 REG	9/16	6 1/16					7 29/64		OK	N1
	MR54020/1																															

Remarks: INSP AS PER D00658901 REV. V N1: VISUAL AND DIMENSIONAL OF REFACE CONNECTION ONLY

Customer Rep Signoff: _____

Batch # Info.		Connection Inspection		Body Inspection		Body Dry M.P.I	
20-B	Wet Flour. M.P.I. <input 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"/>	
Dry Powder	Vis. Liq. Pen. <input checked="" type="checkbox"/>	Residual <input type="checkbox"/>	Vis. Liq. Pen. <input checked="" type="checkbox"/>	Continuous <input type="checkbox"/>	Long. Insp. <input type="checkbox"/>	Continuous <input type="checkbox"/>	
7-HF	Flour Liq. Pen. <input type="checkbox"/>	Continuous <input 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 type="checkbox"/>	AC Current <input type="checkbox"/>	Long. Insp. <input type="checkbox"/>	DC Current <input type="checkbox"/>		DC Current <input type="checkbox"/>	
14-A	Trans. Insp. <input type="checkbox"/>	DC Current <input type="checkbox"/>	Trans. Insp. <input type="checkbox"/>	Visible M.P.I. <input type="checkbox"/>			
System Effectiveness:	LP-Comparative Block <input checked="" type="checkbox"/>	Dry MP-Castrol Strip <input type="checkbox"/>	Wet MP-Castrol Strip <input type="checkbox"/>	Profile Gage RSC OK <input checked="" type="checkbox"/>			
Job Information B _____ V _____ KA _____ D _____ KA _____ P _____ KA _____ 3rd Party Rep _____ Signature: _____							

Blacklight Inspection		Liquid Penetrant Inspection	
Blacklight Intensity: _____	Bath Mixture: _____	Whitelight: _____	Magnaflux Developer: SKD-S2
Equipment / Inspector Information		Batch # 23D07C	
Equipment Used From Unit # 29	Qual. Date(s) MT _____ PT 12/1/2023	Dwell Time: 10 min	
Level II Inspector: KELTON ALFRED	White Light: 100		
Signature: _____	Magnaflux Penetrant: <input checked="" type="checkbox"/> SKL-WP2 (Check one) <input type="checkbox"/> ZL-60D		
Signature guarantees final walk thru of job and job site	Batch # 22B02C		
	Dwell Time: 20 min		