

# BOTTOM HOLE ASSURANCE, INC.



NDE Inspection Services

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**Bottomholeassurance.com**

CUSTOMER HALLIBURTON ICC     3RD PARTY  
RIG \_\_\_\_\_  
OCS-G & WELL \_\_\_\_\_

FACILITY / LOCATION CLEAN WELL  
PROJECT BP

AUTHORIZED BY TONY FREDERICK  
P.O. / JOB # 909117507

INVOICE NO. \_\_\_\_\_  
DATE: 4/22/2024

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		
13390590	DRILL TECH	6.49	22 1/8	21 3/4	3"	6 3/4	6 3/4	CTM-57	5.623.	5.843.					6.721.		Acc	CONN ONLY	CTM-57		5.925.				5.627.	0.411.	6.725.		Acc	CONN ONLY

Remarks: CONNECTION INSP AS PER BSD-GL-HAL-CWT-201 Rev. 14 (CONNECTION INSPECTION ONLY) Customer Rep Signoff: \_\_\_\_\_

Batch # Info.	Connection Inspection	Body Inspection	Body Dry M.P.I	Blacklight Inspection	Liquid Penetrant Inspection
20-B 23A106 Dry Powder 7-HF White Contrast 14-A	Wet Flour. M.P.I. <input checked="" 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 checked="" type="checkbox"/> Long. Insp. <input checked="" type="checkbox"/> AC Current <input type="checkbox"/> Trans. Insp. <input checked="" type="checkbox"/> DC Current <input type="checkbox"/>	Wet Flour. M.P.I. <input type="checkbox"/> Residual <input type="checkbox"/> Vis. Liq. Pen. <input type="checkbox"/> Continuous <input type="checkbox"/> Flour Liq. Pen. <input type="checkbox"/> AC Current <input type="checkbox"/> Long. Insp. <input type="checkbox"/> DC Current <input type="checkbox"/> Trans. Insp. <input type="checkbox"/> Visible M.P.I. <input type="checkbox"/>	Dry M.P.I. <input type="checkbox"/> Residual <input type="checkbox"/> Long. Insp. <input type="checkbox"/> Continuous <input type="checkbox"/> Trans. Insp. <input type="checkbox"/> AC Current <input type="checkbox"/> DC Current <input type="checkbox"/>	Blacklight Intensity: <u>2864</u> Bath Mixture: <u>0.25</u> Whitelight: <u>0.1</u> Equipment Used From Unit # <u>32</u> Qual. Date(s) <u>MT 11/30/2021</u> PT _____	Magnaflux Developer: SKD-S2 Batch # _____ Dwell Time: _____ min White Light: _____ Magnaflux Penetrant: <input type="checkbox"/> SKL-WP2 (Check one) <input type="checkbox"/> ZL-60D Batch # _____ Dwell Time: _____ min
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: <u>GAELEN ROBIN</u> Signature: _____ <small>Signature guarantees final walk thru of job and job site</small>	
<b>Job Information</b>					
B _____ GR _____ V _____ GR _____ D _____ P _____ GR _____					

