



BOTTOM HOLE ASSURANCE, INC.

NDE Inspection Services

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Bottomholeassurance.com

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

FACILITY / LOCATION SERVICE TOOLS
PROJECT BP

AUTHORIZED BY JASON CLOSTIO
P.O. / JOB # 909241585

INVOICE NO. _____
DATE: 4/30/2024

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	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			
EQ# 12817308	PORTED SUB	3.14	-	-	3 1/2	6 1/4	6 1/4	NC 50	4 7/16						5/16	6 1/16			Rej	PITTED THREADS	NC 50	5/8	5 5/16						6 1/16			Rej	PITTED THREADS	

Remarks: CONNECTION INSP AS PER MAN-GL-HAL-HCT-900 REV. 6.3										Customer Rep Signoff: _____											
Batch # Info.		Connection Inspection				Body Inspection				Body Dry M.P.I.				Blacklight Inspection				Liquid Penetrant Inspection			
20-B	23K007	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: 3203	Bath Mixture: 0.25	Whitelight: 0.1	Magnaflux Developer: SKD-S2	Batch # _____			
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 / Inspector Information				Dwell Time: _____ min			
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"/>	Equipment Used From Unit # 23	Qual. Date(s) MT 4/26/2024 PT 4/26/2024		White Light: _____				
White Contrast		Long. Insp.	<input checked="" type="checkbox"/>	AC Current	<input type="checkbox"/>	Long. Insp.	<input type="checkbox"/>	DC Current	<input type="checkbox"/>	DC Current	<input type="checkbox"/>	DC Current	<input type="checkbox"/>	Magnafux Penetrant: <input type="checkbox"/> SKL-WP2				Batch # _____			
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"/>					(Check one) <input type="checkbox"/> ZL-60D				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"/>												
Job Information										3rd Party Rep _____											
B	BT	V	BT	D	P	BT	Signature: _____														
										Level II Inspector: BRANSON THERIOT		Signature: <i>Branson Theriot</i>									
										Signature guarantees final walk thru of job and job site											

By david.patin@bottomholeassurance.com at 3:38:14 PM, 4/30/2024