

# BOTTOM HOLE ASSURANCE, INC.

No. DIR 43024ST-17



NDE Inspection Services

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**Bottomholeassurance.com**

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

FACILITY / LOCATION SERVICE TOOLS  
PROJECT ARENA

AUTHORIZED BY JASON CLOSTIO  
P.O. / JOB # 909216680

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# 12817215 SO 812017-16	PORTED SUB SAP# 102192863	2.98	-	-	3	6 1/4	6 1/4	NC 50	4 1/2						5/16	6 1/16		Rej	Damaged Shoulder	NC 50	5/8	5 5/16													6 1/16		Rej	Damaged Threads

Remarks: CONNECTION INSP AS PER MAN-GL-HAL-HCT-900 REV. 6.3 ( 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 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: <u>5060</u>	Bath Mixture: <u>0.25</u>	Whitelight: <u>0.1</u>	Magnaflex 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 / Inspector Information Equipment Used From Unit # <u>23</u> Qual. Date(s) MT <u>4/26/2024</u> PT <u>4/26/2024</u> Level II Inspector: <u>BRANSON THERIOT</u> Signature:				Batch # _____ 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"/>					White Light: _____ Magnaflex Penetrant: <input type="checkbox"/> SKL-WP2 (Check one) <input type="checkbox"/> ZL-60D									
White Contrast	Long. Insp. <input checked="" type="checkbox"/>	AC Current <input type="checkbox"/>	Long. Insp. <input type="checkbox"/>	DC Current <input type="checkbox"/>	Trans. Insp. <input type="checkbox"/>	DC Current <input type="checkbox"/>	Batch # _____ Dwell Time: _____ min													
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"/>															
Job Information		3rd Party Rep _____		Signature: _____		Signature: _____		Signature guarantees final walk thru of job and job site												
B	BT	V	BT	D	P	BT														



*By david.patin@bottomholeassurance.com at 3:37:56 PM, 4/30/2024*