



BOTTOM HOLE ASSURANCE, INC.

Blacklight, Ultrasonic Wall Thickness,
& Liquid Penetrant Inspection

No. IR 42931-10

Email: BHAInc@bottomholeassurance.com
109 Citron Drive • Youngsville, LA 70592
Office: (337) 857-8994 Fax: (337) 857-8964

CUSTOMER Hole Opener Corp		3rd PARTY <input type="checkbox"/>	FACILITY / LOCATION Shop	AUTHORIZED BY Donovan		INVOICE NO. 42931		
RIG		OCS-G & WELL NO.		PROJECT	P.O. NO. / JOB NO.	DATE 8/18/2021		
SERIAL NO.	DESCRIPTION			PIN	BOX	I.D.	O.D.	LENGTH
1	**NEW COMPONENTS**							
2	05-160-012-482	HINGE PIN - OK						
3	05-160-012-483	HINGE PIN - OK						
4	05-160-012-484	HINGE PIN - OK						
5	05-160-012-485	HINGE PIN - OK						
6	05-160-012-486	HINGE PIN - OK						
7	05-160-012-487	HINGE PIN - OK						
8	05-160-012-488	HINGE PIN - OK						
9	05-160-012-489	HINGE PIN - OK						
10	05-160-012-490	HINGE PIN - OK						
11	05-160-012-491	HINGE PIN - OK						
12	05-160-012-492	HINGE PIN - OK						
13	05-160-012-493	HINGE PIN - OK						
14	05-160-012-494	HINGE PIN - OK						
15	05-160-012-495	HINGE PIN - OK						
16	05-160-012-496	HINGE PIN - OK						
17	05-160-012-497	HINGE PIN - OK						
18	05-160-012-498	HINGE PIN - OK						
19	05-160-012-499	HINGE PIN - OK						
20	05-160-012-500	HINGE PIN - OK						
21	05-160-012-501	HINGE PIN - OK						
22	05-160-012-502	HINGE PIN - OK						
23	05-160-012-503	HINGE PIN - OK						
24	05-160-012-504	HINGE PIN - OK						
25	05-160-012-505	HINGE PIN - OK						
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SUMMARY: Inspection as per DS-1 Volume 4

Batch # Info.	Connection Inspection		Body Inspection		Body Dry M.P.I.	
20-B 20B065	Wet Flour. M.P.I. <input 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 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 checked="" type="checkbox"/>	DC Current <input checked="" type="checkbox"/>		DC Current <input type="checkbox"/>
14-A	Trans. Insp. <input type="checkbox"/>	DC Current <input type="checkbox"/>	Trans. Insp. <input checked="" type="checkbox"/>	Visible M.P.I. <input type="checkbox"/>		
System Effectiveness:	LP-Comparative Block <input type="checkbox"/>	Dry MP-Castrol Strip <input type="checkbox"/>	Wet MP-Castrol Strip <input checked="" type="checkbox"/>			
Blacklight Inspection			Equipment / Inspector Information			
Blacklight Intensity: 5467	Bath Mixture: 0.25	Whitelight: 0.0	Equipment Used From Unit # 17	Qual. Date(s) MT 5/6/2019 PT		
Liquid Penetrant Inspection			3rd Party Rep: _____			
Whitelight: _____			Signature: _____			
Magnaflux Developer: SKD-S2	Magnaflux Penetrant: <input type="checkbox"/> SKL-WP2	(Check one) <input type="checkbox"/> ZL-60D	Level II Inspector: TANNER BLANCHARD			
Batch # _____	Batch # _____		Signature: <i>Tanner Blanchard</i>			
Dwell Time: _____ min	Dwell Time: _____ min		Signature guarantees final walk thru of job and job site			
Job Information			Customer Rep Signoff: _____			
B _____ TB _____	V _____ TB _____	D _____ P _____ TB _____				