



BOTTOM HOLE ASSURANCE, INC.

Blacklight, Ultrasonic Wall Thickness, & Liquid Penetrant Inspection

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CUSTOMER / RIG _____ 3RD PARTY _____
 OCS-G & WELL _____
 FACILITY / LOCATION Shop _____ AUTHORIZED BY Donovan
 PROJECT TEXAS BRINE / RC 51127 P.O. / JOB # NO CHARGE
 INVOICE NO. 42931 DATE: 8/19/2021

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 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															
TS-19-22-5	Top Sub	4.43	34 1/8		3"	9 1/2	16"	7 5/8 reg	5 3/16						5/16	8 5/164	OK		INT																									
N/A	Jet Sub	2.06			4 1/16	9 7/16		7 5/8 reg	5 5/16						5/16	8 53/64	OK		7 5/8 reg	5/8	7 1/16						8 51/64	OK																
TS-19-22-2	Top Sub	4.60	36 1/4		3"	9 1/2	16"	7 5/8 reg	5 3/16						5/16	8 51/64	OK																											
DTU-19-22-2	22" Underreamer Body	6.54			N/A		10"												7 5/8 reg	5/8	7 1/16					8 29/64	OK																	

Remarks: Connections inspected only as per DS-1 Volume 4

Batch # Info. 20-B 20B065 Dry Powder 7-HF White Contrast 14-A	Connection Inspection						Body Inspection						Body Dry M.P.I.						Blacklight Inspection						Liquid Penetrant Inspection									
	Wet Flour M.P.I. <input checked="" type="checkbox"/>		Dry M.P.I. <input type="checkbox"/>		Residual <input type="checkbox"/>		Wet Flour M.P.I. <input type="checkbox"/>		Residual <input type="checkbox"/>		Dry M.P.I. <input type="checkbox"/>		Trans. Insp. <input type="checkbox"/>		AC Current <input type="checkbox"/>		DC Current <input type="checkbox"/>		Visible M.P.I. <input type="checkbox"/>		Blacklight Intensity: 8250		Bath Mixture: 0.25		Whitelight: 0.1		Magnaflux Developer: SKD-52		Batch # _____		Magnaflux Developer: SKD-52		Dwell Time: _____ min	
	Vis. Liq. Pen. <input type="checkbox"/>		Continuous <input checked="" type="checkbox"/>		Flour Lq. Pen. <input checked="" type="checkbox"/>		Long. Insp. <input type="checkbox"/>		Trans. Insp. <input type="checkbox"/>		AC Current <input type="checkbox"/>		DC Current <input type="checkbox"/>		Profile Gage RSC OK <input checked="" type="checkbox"/>		Equipment Used From Unit # 29		Qual. Date(s) MT 2/1/2021		PT _____		Equipment / Inspector Information		Level II Inspector: Lucas Broussard		Signature: <u>Lucas Broussard</u>		Signature guarantees final walk thru of job and job site					
	LP-Comparative Block <input type="checkbox"/>		Dry MIP-Castrol Strip <input type="checkbox"/>		3rd Party Rep _____		Job Information		B _____ TB _____ V _____		D _____ P _____ LB _____		System Effectiveness: _____		Remarks																			