



BOTTOM HOLE ASSURANCE, INC.

Blacklight, Ultrasonic Wall Thickness,
& Liquid Penetrant Inspection

No. IR 42910-7

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Office: (337) 857-8994 Fax: (337) 857-8964

CUSTOMER Hole Opener Corp RIG		3rd PARTY <input type="checkbox"/>	FACILITY / LOCATION Shop OCS-G & WELL NO.	AUTHORIZED BY Donovan	INVOICE NO. 42910		
PROJECT WSP / RC51115		P.O. NO. / JOB NO. NO CHAGRE		DATE 6/30/2021			
SERIAL NO.	DESCRIPTION	PIN	BOX	I.D.	O.D.	LENGTH	
1							
2	DTU-19-1175-2						
3	11 3/4" UNDER REAMER BODY - OK (REINSPECT REWORKED AREA OF BODY)						
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SUMMARY: INSP AS PER DS-1 VOL 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 checked="" 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 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-Comparitive Block Dry MP-Castrol Strip Wet MP-Castrol Strip

Blacklight Inspection	Equipment / Inspector Information
Blacklight Intensity: <u>5145</u> Bath Mixture: <u>0.25</u> Whitelight: <u>0.1</u>	Equipment Used From Unit # <u>25</u> Qual. Date(s) MT <u>5/6/2019</u> PT _____
Liquid Penetrant Inspection Whitelight: _____ Magnaflux Developer: SKD-S2 Magnaflux Penetrant: <input type="checkbox"/> SKL-WP2 (Check one) <input type="checkbox"/> ZL-60D Batch # _____ Batch # _____ Dwell Time: _____ min Dwell Time: _____ min	3rd Party Rep: _____ Signature: _____ Level II Inspector: <u>TANNER BLANCHARD</u> Signature: <u>Tanner Blanchard</u> <small>Signature guarantees final walk thru of job and job site</small>
Job Information B _____ TB _____ V _____ TB _____ D _____ P _____ TB _____	Customer Rep Signoff: _____