

**CERTIFICATE OF THOROUGH EXAMINATION**

This report complies with the Lifting Equipment Engineers Association Technical requirements

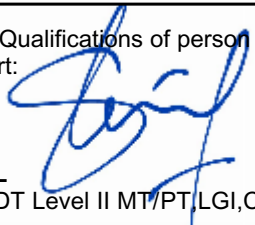

Date of Thorough Examination: Aug 28, 2023	Date of Report: Aug 28, 2023	Report Number: ISP.SL.SLB 25012/08/23 (VN)																										
P.O.Number: -		RFI Number: IBase ID 250753																										
Name and Address of employer for whom the thorough examination was made: <b>SCHLUMBERGER</b> Gedung Wisma Mulia. Jl Jend Gatot Subroto Suite 4301 No.42 Kuningan Barat, Jakarta Selatan, Indonesia		Address of premises at which the examination was made: <b>CIB</b> KITIC. Kav 17-18 Delta Mas. Cikarang Pusat <b>Departement: D&amp;M</b>																										
Description and identification of the equipment:	Safe Working Load(s):	Load test applied	Date of manufacture if known:	Date of last thorough examination:																								
<b>Logging unit. DNV Certifacate No : 167643</b> ID No : SLB 25012 Serial No : OLU-MB-8054 Tare Mass : 9500 kg Payload : 1300 kg Maximum Gross Mass : 10800 kg Number of pad eyes : 4 Position of pad eyes : Top aligned Manufacturer : Specialist Services Dimension (LxWxH) : 6058 mm x 2438 mm x 2591 mm Standard : DNVGL-ST-E271 , BS EN ISO 10855	-	-	February 2015	2023/05/30.VN																								
<b>Sling</b> ID No. : SLB 25012-1 4 leg wire rope sling in dia 26 mm x 4700 mm.	<b>WLL 10.8 tonne @ 42 Deg</b>	-	2015	2023/05/30.VN																								
<b>Shackle</b> ID No. : SLB 25012-2 Crosby Bolt type Anchor Shackle.Size 1 inch.	<b>WLL 8.5 tonne</b>	-	2015	2023/05/30.VN																								
<b>Shackle</b> ID No. : SLB 25012-3 Crosby Bolt type Anchor Shackle.Size 1 inch.	<b>WLL 8.5 tonne</b>	-	2015	2023/05/30.VN																								
<b>Shackle</b> ID No. : SLB 25012-4 Crosby Bolt type Anchor Shackle.Size 1 inch.	<b>WLL 8.5 tonne</b>	-	2015	2023/05/30.VN																								
<b>Shackle</b> ID No. : SLB 25012-5 Crosby Bolt type Anchor Shackle.Size 1 inch.	<b>WLL 8.5 tonne</b>	-	2015	2023/05/30.VN																								
<b>Is this the first examination after installation or assembly at a new site or location?</b> <table border="1"> <tr> <td>YES</td> <td>-</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table> <b>If the answer to the above question is YES has the equipment been installed correctly?</b> <table border="1"> <tr> <td>YES</td> <td>-</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>	YES	-	NO	<input checked="" type="checkbox"/>	YES	-	NO	<input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? <table border="1"> <tr> <td>YES</td> <td><input checked="" type="checkbox"/></td> <td>NO</td> <td>-</td> </tr> </table> Within an interval of 12 months? <table border="1"> <tr> <td>YES</td> <td>-</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table> In accordance with an examination scheme? <table border="1"> <tr> <td>YES</td> <td><input checked="" type="checkbox"/></td> <td>NO</td> <td>-</td> </tr> </table> After the occurrence of exceptional circumstances? <table border="1"> <tr> <td>YES</td> <td>-</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>				YES	<input checked="" type="checkbox"/>	NO	-	YES	-	NO	<input checked="" type="checkbox"/>	YES	<input checked="" type="checkbox"/>	NO	-	YES	-	NO	<input checked="" type="checkbox"/>
	YES	-	NO	<input checked="" type="checkbox"/>																								
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	YES	<input checked="" type="checkbox"/>	NO	-																								
YES	-	NO	<input checked="" type="checkbox"/>																									
YES	<input checked="" type="checkbox"/>	NO	-																									
YES	-	NO	<input checked="" type="checkbox"/>																									
Identification of any part found to have a defect which is or could become a danger to persons and a description of the defect: (If none state NONE) : <b>NONE</b>																												
Is the above a defect which is of immediate danger to persons				<table border="1"> <tr> <td>YES</td> <td>-</td> <td>NO</td> <td><input checked="" type="checkbox"/></td> </tr> </table>	YES	-	NO	<input checked="" type="checkbox"/>																				
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Form No.: ISP/REP/001/Rev.03




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Date of Thorough Examination: Aug 28, 2023		Date of Report: Aug 28, 2023		Report number: ISP.SL.SLB 25012/08/23 (VN)			
P.O.Number: -			RFI Number: IBase ID 250753				
Is the above a defect which is not yet but could become a danger to persons: (If YES state the date by when)				YES by:			
Particulars of any repair, renewal or alteration required to remedy the defect identified above: <b>NONE</b>							
Particulars of any tests carried out as part of the examination: (If none state NONE) NDT/MPI							
<b>IS THIS EQUIPMENT FIT FOR PURPOSE?</b>				YES	<input checked="" type="checkbox"/>	NO	-
Name & Qualifications of person making this report:  <b>SYAIFUL</b> ASNT NDT Level II MT/PT,LGI,CI Migas		Name of person authenticating this report:  <b>ACHMAD CHOIRONI</b> Lifting Supervisor		Latest date by which next thorough examination must be carried out:  Feb 28, 2024			



<b>Date of Report:</b>	Aug 28, 2023	<b>Report number:</b>	ISP.SL.SLB 25012/08/23 (VN)
<b>P.O.Number:</b>	-	<b>RFI Number:</b>	IBase ID 250753
<b>Client:</b>	<b>SCHLUMBERGER</b> Gedung Wisma Mulia. Jl Jend Gatot Subroto Suite 4301 No.42 Kuningan Barat, Jakarta Selatan, Indonesia	<b>Location:</b>	<b>CIB</b> KITIC. Kav 17-18 Delta Mas. Cikarang Pusat
<b>Job Description:</b>	Magnetic particle examination is to be used to detect discontinuities. Which are opened to the surface and subsurface of nonporous ferromagnetic steel		
<b>Items inspected (including serial number):</b>	Logging unit ( OLU-MB-8054 ) Manufacture : Specialist Services DNV Certifacate No : 167643. <b>ID No. SLB 25012   Serial No. OLU-MB-8054</b>		
<b>Areas inspected:</b>	Surface area ( pad eyes area )		
<b>Equipment details/ Chemical used:</b>	Permanent Yoke - Serial No : R0296A-B With Contrast Paint - Nabakem MP-35. Particle Ink - Nabakem SM-15		
<b>Method:</b>	Water Washable: <input type="checkbox"/> Visible: <input checked="" type="checkbox"/> Solvent removable: <input type="checkbox"/> Fluorsent: <input type="checkbox"/>		
<b>Material:</b>	Ferromagnetic		
<b>Preparation:</b>	Wire Buffed.Paint Removal		
<b>Surface Condition:</b>	As Welded		
<b>Test Procedure:</b>	ISP-SOP-NDT-03		
<b>Acceptance criteria:</b>	AWS D1.1 2020 Table 8.1		
<b>Pole Spacing:</b>	150 mm		
<b>Inspection result:</b>	<p>Photograph (s)</p> <p><b>No Found Indication During Time of Inspection. ( Acceptable )</b></p> 		

Name & Qualifications of person making this report:  <b>SYAIFUL</b> ASNT NDT Level II MT/PT,LGI,CI Migas	Name of person authenticating this report:  <b>ACHMAD CHOIRONI</b> Lifting Supervisor	Latest date by which next examination:  <p align="center">Feb 28, 2024</p>
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