



# INSPECTION REQUEST FORM

## QAQC DRILLING & WELL INTERVENTION

Doc N <sup>o</sup>	:	DWI-QAQC-FORM-XXX
Revision	:	00
Page	:	1 of 1

### 1. Inspection Information

Requester	:	Dedy Arif Sampurna						
Contract N <sup>o</sup>	:	KTAD-DC473-S.						
Purchase Order/Work Order	:	-						
Inspection Perform Date	:	Mon	Tue	Wed	Thu	Fri	Sat	Sun
		Date	Date	7 Dec 21	Date	Date	Date	Date
Supplier/Contractor	:	TechnipFMC						
Inspection Location	:	PSB						
Contact Person	:	Dedy Arif S / Juwanta Yeonardy						
		: 0813-4622-8689 / 0812-7622-4687						
Well Allocation	:	YN-31						
Material/Tool/Equipment	:	1 Ea – Riser 13-5/8.10K BX-159 Flange x 13-5/8.10K BX-159 Hub						

### 2. Scope Inspection Perform

Please to note in here the inspection scope and if any concern to be specially performed by QAQC personnel(s).

*Inspection Pad Eye*

Request by Contract Owner/Project Engineer	Request by Vendor/Services Company	Approved by QAQC Engineer/Coordinator
Adi Prasetyo	Dedy Arif Sampurna	Ardi Septiawan
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