




CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

This Certificate complies with the requirements of the Lifting Equipment Operations and Lifting Equipment Regulations

Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037
Certificate No:	QC-DQ-03-24-0090-02/24		
Serial Number:	QTY	Description	SWL
12	01	SINGLE LEG WIRE ROPE SLING Dim: 13 MM DIA x 1 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store	2 TON
Reference Standard:	BS EN 13414-1		
Is this the first examination after Installation or assembly at a new site or location?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Within an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE			
Is the above a defect which is of immediate danger to persons:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
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:			
Particulars of any tests carried out as part of the examination: (If none state NONE)			
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory			
IS THIS EQUIPMENT SAFE TO OPERATE?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned work location on the date shown above and the equipment described in this report was tested & inspected as per the requirements of Lifting Operations and Lifting Equipment Regulation "LOLER". The result was found Satisfactory at the time of Inspection and considered Safe for Lifting.






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Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/25
Serial Number:	QTY	Description		SWL	Date of last thorough examination
B2532	01	SINGLE LEG WIRE ROPE SLING Dim: 10 MM DIA x 1 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Poor Boy Fall Arrestor		1.3 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
				Was the examination carried out: Within an interval of 6 months?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
				Within an interval of 12 months?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
				In accordance with an examination scheme?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
				After the occurrence of exceptional circumstances?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none state NONE) NONE					
Is the above a defect which is of immediate danger to persons:					YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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: <input type="text"/>
Particulars of any repair, renewal or alteration required to remedy the defect identified above:					
Particulars of any tests carried out as part of the examination: (If none state NONE)					
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?					YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

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Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090		
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/26		
Serial Number:	QTY	Description			SWL	Date of last thorough examination	
B2528	01	SINGLE LEG WIRE ROPE SLING Dim: 10 MM DIA x 1 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Poor Boy			1.3 TON	08.10.2023	
Reference Standard:		BS EN 13414-1					
Is this the first examination after Installation or assembly at a new site or location?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months?	
						YES	<input checked="" type="checkbox"/>
						NO	<input type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Was the examination carried out: Within an interval of 12 months?	
						YES	<input checked="" type="checkbox"/>
						NO	<input type="checkbox"/>
						YES	<input checked="" type="checkbox"/>
						NO	<input type="checkbox"/>
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none state NONE) NONE							
Is the above a defect which is of immediate danger to persons:						YES	<input type="checkbox"/>
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)						NO	<input checked="" type="checkbox"/>
Particulars of any repair, renewal or alteration required to remedy the defect identified above:						YES by:	
Particulars of any tests carried out as part of the examination: (If none state NONE)							
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory							
IS THIS EQUIPMENT SAFE TO OPERATE?						YES	<input checked="" type="checkbox"/>
						NO	<input type="checkbox"/>

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Date of Examination:	12.03.2024	Location:	DQ Rig 037		
Certificate No:	QC-DQ-03-24-0090-02/27				
Serial Number:	QTY	Description	SWL	Date of last thorough examination	
D11	01	SINGLE LEG WIRE ROPE SLING Dim: 40 MM DIA x 8 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. WITH TOP MASTER LINK ASSEMBLY Soft Eye X Soft Eye Location: Store	17 TON	08.10.2023	
Reference Standard:	BS EN 13414-1				
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			Within an interval of 12 months?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	In accordance with an examination scheme?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			After the occurrence of exceptional circumstances?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:				<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE)					
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	

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Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/28
Serial Number:	QTY	Description		SWL	Date of last thorough examination
B6653 B6652 B6654 B6651 B6650	05	SINGLE LEG WIRE ROPE SLING Dim: 16 MM DIA x 8 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store		3.3 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	With an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
		YES <input type="checkbox"/>	NO <input type="checkbox"/>	In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
		YES <input type="checkbox"/>	NO <input type="checkbox"/>	After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none state NONE) NONE					
Is the above a defect which is of immediate danger to persons:				YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE) The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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Date of Examination:	12.03.2024	Location:	DQ Rig 037
Certificate No:	QC-DQ-03-24-0090-02/29		
Serial Number:	QTY	Description	SWL
B6646 B6649 B6647 B6648	04	SINGLE LEG WIRE ROPE SLING Dim: 16 MM DIA x 5 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store	3.3 TON
Date of last thorough examination	08.10.2023		
Reference Standard:	BS EN 13414-1		
Is this the first examination after Installation or assembly at a new site or location?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	√
Was the examination carried out: Within an interval of 6 months?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	√
Was the examination carried out: Within an interval of 12 months?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	√
If the answer to the above question is YES has the equipment been installed correctly?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	√
In accordance with an examination scheme?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	√
After the occurrence of exceptional circumstances?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	√
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none state NONE) NONE			
Is the above a defect which is of immediate danger to persons:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	√
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:			
Particulars of any tests carried out as part of the examination: (If none state NONE)			
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory			
IS THIS EQUIPMENT SAFE TO OPERATE?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	√

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Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037
Certificate No:	QC-DQ-03-24-0090-02/30		
Serial Number:	QTY	Description	SWL
B3637	01	SINGLE LEG WIRE ROPE SLING Dim: 16 MM DIA x 3 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Hard Eye X Hard Eye Location: Store	3.3 TON
Date of last thorough examination	08.10.2023		
Reference Standard:	BS EN 13414-1		
Is this the first examination after Installation or assembly at a new site or location?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Within an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none state NONE) NONE			
Is the above a defect which is of immediate danger to persons:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
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:			
Particulars of any tests carried out as part of the examination: (If none state NONE)			
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Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/31
Serial Number:	QTY	Description		SWL	Date of last thorough examination
B2549	01	SINGLE LEG WIRE ROPE SLING Dim: 19 MM DIA x 1.2 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store		4.6 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Was the examination carried out:					
Within an interval of 6 months?		YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>
Within an interval of 12 months?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
In accordance with an examination scheme?		YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>
After the occurrence of exceptional circumstances?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:					YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE)					
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?					YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

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Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/32
Serial Number:	QTY	Description		SWL	Date of last thorough examination
H9937	01	SINGLE LEG WIRE ROPE SLING Dim: 26 MM DIA x 1.5 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Hard Eye X Hard Eye Location: Store		8 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months?	
				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	With an interval of 12 months?	
				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
				In accordance with an examination scheme?	
				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
				After the occurrence of exceptional circumstances?	
				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:				YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE)					
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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Date of Examination:	12.03.2024	Location:	DQ Rig 037	
Certificate No:	QC-DQ-03-24-0090-02/33			
Serial Number:	QTY	Description	SWL	Date of last thorough examination
B2518 B2521 B2533 B2510 B2525 B2536 B2540 B2516	08	SINGLE LEG WIRE ROPE SLING Dim: 10 MM DIA x 1 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store	1.3 TON	08.10.2023
Reference Standard:	BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	Was the examination carried out:	
			<input type="checkbox"/> YES <input checked="" type="checkbox"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/> ✓	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> ✓	Within an interval of 6 months? Within an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?	
			<input type="checkbox"/> YES <input checked="" type="checkbox"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/> ✓	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE				
Is the above a defect which is of immediate danger to persons:			<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	
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:				
Particulars of any tests carried out as part of the examination: (If none state NONE)				
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory				
IS THIS EQUIPMENT SAFE TO OPERATE?			<input type="checkbox"/> YES <input checked="" type="checkbox"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/> ✓	

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Date of Examination:	12.03.2024	Location:	DQ Rig 037
Certificate No:	QC-DQ-03-24-0090-02/34		
Serial Number:	QTY	Description	SWL
B2529 B2524 B2512 B2542 B2543 B2546 B2531 B2534	08	SINGLE LEG WIRE ROPE SLING Dim: 10 MM DIA x 1 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store	1.3 TON
Date of last thorough examination	08.10.2023		
Reference Standard:	BS EN 13414-1		
Is this the first examination after Installation or assembly at a new site or location?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Within an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE			
Is the above a defect which is of immediate danger to persons:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
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:			
Particulars of any tests carried out as part of the examination: (If none state NONE) The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory			
IS THIS EQUIPMENT SAFE TO OPERATE?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned work location on the date shown above and the equipment described in this report was tested & inspected as per the requirements of Lifting Operations Lifting Equipment Regulation "LOLER". The result was found Satisfactory at the time of Inspection and considered Safe for Lifting.






CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

This Certificate complies with the requirements of the Lifting Equipment Operations and Lifting Equipment Regulations

Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/35
Serial Number:	QTY	Description		SWL	Date of last thorough examination
A6456	01	SINGLE LEG WIRE ROPE SLING Dim: 19 MM DIA x 1.5 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store		4.6 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
				Was the examination carried out: Within an interval of 6 months?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
				Within an interval of 12 months?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
				In accordance with an examination scheme?	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
				After the occurrence of exceptional circumstances?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:					YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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: <input type="text"/>
Particulars of any repair, renewal or alteration required to remedy the defect identified above:					
Particulars of any tests carried out as part of the examination: (If none state NONE)					
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?					YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

This Certificate complies with the requirements of the Lifting Equipment Operations and Lifting Equipment Regulations

Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/36
Serial Number:	QTY	Description		SWL	Date of last thorough examination
B2547 B2548	02	SINGLE LEG WIRE ROPE SLING Dim: 19 MM DIA x 1.2 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store		4.6 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
				With an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
				After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:				YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE) The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

This Certificate complies with the requirements of the Lifting Equipment Operations and Lifting Equipment Regulations

Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/37
Serial Number:	QTY	Description		SWL	Date of last thorough examination
A6560 A6673	02	SINGLE LEG WIRE ROPE SLING Dim: 19 MM DIA x 2 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Hard Eye X Hard Eye Location: Store		4.6 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	With an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
		YES <input type="checkbox"/>	NO <input type="checkbox"/>	In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
		YES <input type="checkbox"/>	NO <input type="checkbox"/>	After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:				YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE) The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/38
Serial Number:	QTY	Description		SWL	Date of last thorough examination
C3196 P7086	02	SINGLE LEG WIRE ROPE SLING Dim: 16 MM DIA x 8 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store		3 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months?	
				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	With an interval of 12 months?	
				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
				In accordance with an examination scheme?	
				YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
				After the occurrence of exceptional circumstances?	
				YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:				YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE)					
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037
Certificate No:	QC-DQ-03-24-0090-02/39		
Serial Number:	QTY	Description	SWL
YL770-11 YL770-12	02	SINGLE LEG WIRE ROPE SLING Dim: 29 MM DIA x 10 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. WITH TOP MASTER LINK ASSEMBLY Soft Eye X Soft Eye Location: Store	8.1 TON
Reference Standard:	BS EN 13414-1		
Is this the first examination after Installation or assembly at a new site or location?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Within an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none State NONE) NONE			
Is the above a defect which is of immediate danger to persons:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
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:			
Particulars of any tests carried out as part of the examination: (If none state NONE) The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory			
IS THIS EQUIPMENT SAFE TO OPERATE?			YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

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ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

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Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037
Certificate No:	QC-DQ-03-24-0090-02/40		
Serial Number:	QTY	Description	SWL
YL741-11 YL741-12	02	SINGLE LEG WIRE ROPE SLING Dim: 26 MM DIA x 10 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. WITH TOP MASTER LINK ASSEMBLY Soft Eye X Soft Eye Location: Store	6.5 TON
Date of last thorough examination	08.10.2023		
Reference Standard:	BS EN 13414-1		
Is this the first examination after Installation or assembly at a new site or location?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			With an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE			
Is the above a defect which is of immediate danger to persons:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
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:			
Particulars of any tests carried out as part of the examination: (If none state NONE)			
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory			
IS THIS EQUIPMENT SAFE TO OPERATE?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

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Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/41
Serial Number:	QTY	Description		SWL	Date of last thorough examination
C3200 C3202 C3203	03	SINGLE LEG WIRE ROPE SLING Dim: 16 MM DIA x 8 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Store		3 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			Within an interval of 12 months?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	In accordance with an examination scheme?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			After the occurrence of exceptional circumstances?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:					<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE)					
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

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Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090		
Date of Examination:	12.03.2024	Location:	DQ Rig 037		
Certificate No:	QC-DQ-03-24-0090-02/42				
Serial Number:	QTY	Description	SWL	Date of last thorough examination	
P7126 P7127 P7128 P7129	04	SINGLE LEG WIRE ROPE SLING Dim: 28 MM DIA x 6 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. WITH TOP MASTER LINK ASSEMBLY Soft Eye X Soft Eye Location: Store	9 TON	08.10.2023	
Reference Standard:	BS EN 13414-1				
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			Within an interval of 12 months?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	In accordance with an examination scheme?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			After the occurrence of exceptional circumstances?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:				<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE)					
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090	
Date of Examination:	12.03.2024	Location:	DQ Rig 037	
Certificate No:	QC-DQ-03-24-0090-02/43			
Serial Number:	QTY	Description	SWL	Date of last thorough examination
D13 D14	02	SINGLE LEG WIRE ROPE SLING Dim: 36 MM DIA x 5.75 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. WITH TOP MASTER LINK ASSEMBLY Hard Eye X Soft Eye Location: Store	15 TON	08.10.2023
Reference Standard:	BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	Was the examination carried out: Within an interval of 6 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/> ✓ Within an interval of 12 months? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> ✓	In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/> ✓ After the occurrence of exceptional circumstances? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE				
Is the above a defect which is of immediate danger to persons:			<input type="checkbox"/> YES	<input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓
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:				
Particulars of any tests carried out as part of the examination: (If none state NONE)				
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory				
IS THIS EQUIPMENT SAFE TO OPERATE?			<input type="checkbox"/> YES	<input checked="" type="checkbox"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/> ✓

REV: 01 Dated: 20 June 2022

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Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090	
Date of Examination:	12.03.2024	Location:	DQ Rig 037	
Certificate No:	QC-DQ-03-24-0090-02/44			
Serial Number:	QTY	Description	SWL	Date of last thorough examination
AH01	01	SINGLE LEG WIRE ROPE SLING Dim: 28 MM DIA x 8 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. WITH TOP MASTER LINK ASSEMBLY Hard Eye X Hard Eye Location: Store	10 TON	08.10.2023
Reference Standard:	BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
			With an interval of 12 months? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
			After the occurrence of exceptional circumstances? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none State NONE) NONE				
Is the above a defect which is of immediate danger to persons:			<input type="checkbox"/> YES	<input type="checkbox"/> NO <input checked="" type="checkbox"/>
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:				
Particulars of any tests carried out as part of the examination: (If none state NONE)				
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory				
IS THIS EQUIPMENT SAFE TO OPERATE?			<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/>

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned work location on the date shown above and the equipment described in this report was tested & inspected as per the requirements of Lifting Operations Lifting Equipment Regulation "LOLER". The result was found Satisfactory at the time of Inspection and considered Safe for Lifting.






CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

This Certificate complies with the requirements of the Lifting Equipment Operations and Lifting Equipment Regulations

Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090	
Date of Examination:	12.03.2024	Location:	DQ Rig 037	
Certificate No:	QC-DQ-03-24-0090-02/45			
Serial Number:	QTY	Description	SWL	Date of last thorough examination
A8205	01	SINGLE LEG WIRE ROPE SLING Dim: 26 MM DIA x 8 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. WITH TOP MASTER LINK ASSEMBLY Hard Eye X Hard Eye Location: Store	8.6 TON	08.10.2023
Reference Standard:	BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	Was the examination carried out: Within an interval of 6 months? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> ✓ Within an interval of 12 months? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> ✓	In accordance with an examination scheme? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> ✓ After the occurrence of exceptional circumstances? <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none state NONE) NONE				
Is the above a defect which is of immediate danger to persons:			YES	<input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓
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:				
Particulars of any tests carried out as part of the examination: (If none state NONE)				
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory				
IS THIS EQUIPMENT SAFE TO OPERATE?			YES	<input checked="" type="checkbox"/> NO <input type="checkbox"/> ✓

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
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Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090		
Date of Examination:	12.03.2024	Location:	DQ Rig 037		
Certificate No:	QC-DQ-03-24-0090-02/46				
Serial Number:	QTY	Description	SWL	Date of last thorough examination	
A6371 A3519 A3518 A3517	04	SINGLE LEG WIRE ROPE SLING Dim: 44 MM DIA x 6 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. WITH TOP MASTER LINK ASSEMBLY Soft Eye X Soft Eye Location: Store	24.8 TON	08.10.2023	
Reference Standard:	BS EN 13414-1				
Is this the first examination after Installation or assembly at a new site or location?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	Was the examination carried out: Within an interval of 6 months?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/>
			Within an interval of 12 months?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/>	In accordance with an examination scheme?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/>
			After the occurrence of exceptional circumstances?		<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none state NONE) NONE					
Is the above a defect which is of immediate danger to persons:				<input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> ✓	
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE)					
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				<input type="checkbox"/> YES <input checked="" type="checkbox"/> ✓ <input type="checkbox"/> NO <input type="checkbox"/>	

REV: 01 Dated: 20 June 2022

ASNT Level II Inspector Name:	Authenticating This Report:	Signature & Stamp:	Date of Next Through Examination:
Mahmoud Ali	Mohamed Abdulla		11.09.2024

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CERTIFICATE OF VISUAL AND THOROUGH EXAMINATION

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Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037
Certificate No:	QC-DQ-03-24-0090-02/47		
Serial Number:	QTY	Description	SWL
A2211	01	SINGLE LEG WIRE ROPE SLING Dim: 38 MM DIA x 8.2 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. WITH TOP MASTER LINK ASSEMBLY Soft Eye X Soft Eye Location: Store	18.5 TON
Date of last thorough examination	08.10.2023		
Reference Standard:	BS EN 13414-1		
Is this the first examination after Installation or assembly at a new site or location?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> Within an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
If the answer to the above question is YES has the equipment been installed correctly?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE			
Is the above a defect which is of immediate danger to persons:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	
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:			
Particulars of any tests carried out as part of the examination: (If none state NONE)			
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory			
IS THIS EQUIPMENT SAFE TO OPERATE?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	

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Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090			
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/48			
Serial Number:	QTY	Description		SWL	Date of last thorough examination			
A6648	01	SINGLE LEG WIRE ROPE SLING Dim: 19 MM DIA x 1 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Hard Eye X Hard Eye Location: Store		4.6 TON	08.10.2023			
Reference Standard:		BS EN 13414-1						
Is this the first examination after Installation or assembly at a new site or location?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>			
If the answer to the above question is YES has the equipment been installed correctly?		YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
Was the examination carried out: Within an interval of 6 months?		YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>			
Within an interval of 12 months?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>			
In accordance with an examination scheme?		YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>			
After the occurrence of exceptional circumstances?		YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>			
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE								
Is the above a defect which is of immediate danger to persons:					YES	<input type="checkbox"/>	NO	<input checked="" type="checkbox"/>
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:								
Particulars of any tests carried out as part of the examination: (If none state NONE)								
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory								
IS THIS EQUIPMENT SAFE TO OPERATE?					YES	<input checked="" type="checkbox"/>	NO	<input type="checkbox"/>

REV: 01 Dated: 20 June 2022

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Client Name:	Daqing Drilling Company	Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037
Certificate No:	QC-DQ-03-24-0090-02/49		
Serial Number:	QTY	Description	SWL
C3293 C3295	02	SINGLE LEG WIRE ROPE SLING Dim: 16 MM DIA x 3 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Hard Eye X Hard Eye Location: TDS torque tube lifting carriage	7.8 TON
Date of last thorough examination	08.10.2023		
Reference Standard:	BS EN 13414-1		
Is this the first examination after Installation or assembly at a new site or location?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	√
Was the examination carried out: Within an interval of 6 months?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	√
Was the examination carried out: Within an interval of 12 months?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	√
If the answer to the above question is YES has the equipment been installed correctly?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	√
In accordance with an examination scheme? After the occurrence of exceptional circumstances?	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>	√
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none state NONE) NONE			
Is the above a defect which is of immediate danger to persons:	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	√
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:			
Particulars of any tests carried out as part of the examination: (If none state NONE)			
The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory			
IS THIS EQUIPMENT SAFE TO OPERATE?			YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √

REV: 01 Dated: 20 June 2022

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Client Name:	Daqing Drilling Company			Job Number:	QC-DQ-03-24-0090
Date of Examination:	12.03.2024	Location:	DQ Rig 037	Certificate No:	QC-DQ-03-24-0090-02/50
Serial Number:	QTY	Description		SWL	Date of last thorough examination
B2509	01	SINGLE LEG WIRE ROPE SLING Dim: 10 MM DIA x 1 M (L) FOS: 5:1 6X36 IWRC, ROPE GRAED 1960 N/MM2 GALV MECHANICALLY SPLICED WITH ALUMINUM FERRULE STEEL CORE. Soft Eye X Soft Eye Location: Fall Arrestor		1.3 TON	08.10.2023
Reference Standard:		BS EN 13414-1			
Is this the first examination after Installation or assembly at a new site or location?		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	Was the examination carried out: Within an interval of 6 months? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
				With an interval of 12 months? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
If the answer to the above question is YES has the equipment been installed correctly?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	In accordance with an examination scheme? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
				After the occurrence of exceptional circumstances? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) NONE					
Is the above a defect which is of immediate danger to persons:				YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
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:					
Particulars of any tests carried out as part of the examination: (If none state NONE) The subject Items were inspected Visually and dimensionally where no signs of defects were observed at the time of inspection and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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Mahmoud Ali	Mohamed Abdulla		11.09.2024

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