

AI TAKAMUL COMPANY FOR ENGINEERING TESTS AND PROFESSIONAL SAFETY LIMITED

Basra, North Rumaila, Quality Control Yard - Iraq

Tel: +9647810009138 / +9647834964657

Email: OP@qualitycontrol-iraq.com / hany.akafi@qualitycontrol-iraq.com



CERTIFICATE OF LOAD TESTING & THOROUGH EXAMINATION

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

Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/01
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Last Inspection		Last Proof Load Test Date		Next Proof Load Test Due	
27.05.2022		01.03.2013		After Any Repair/Modification	
Serial Number:	QTY	Description			PAYLOAD
L-6901051816-V03-001 SAP NO: 12252435	01	OFFSHORE UNIT (MAIN FRAME) DIM: 3.9 m (L) x 2.2 m (W) x 1.75 m (H) FULLY WELDED STEEL CONSTRUCTION WITH FOUR TOP MOUNTED LIFTING POINTS TARE WEIGHT: 2400 KG MAX. GROSS WEIGHT: 8700 KG			6300 KG
Reference Standard:		DNV2.7-1/ HAL DOC: WM-GL-HAL-HSE-0420			
Pad Eyes Dimension:		Thickness:	Pin Hole:	Length:	Height:
		40 mm	30 mm	70 mm	68 mm
Is this the first examination after Installation or assembly at a new site or location?		☐ YES ☒ NO		Was the examination carried out: Within an interval of 6 months? ☒ YES ☐ NO Within an interval of 12 months? ☐ YES ☒ NO In accordance with an examination scheme? ☒ YES ☐ NO After the occurrence of exceptional circumstances? ☐ YES ☒ NO	
If the answer to the above question is YES has the equipment been installed correctly?		☐ YES ☒ NO		☐ YES ☒ NO	
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 ☒ NO	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ** MPI was carried out on the pad eyes Welding Areas and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE?				☒ YES ☐ NO	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature: Haliburton		
Date of Next Through Examination:	09.11.2024				

REV: 01 Dated: 20 June 2022

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned owner's 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.





CERTIFICATION OF VISUAL, THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION			
Client:	HALLIBURTON	Report No:	QC-HALL-2024-0179/02
Location:	WPS	Job Number:	QC-HALL-2024-0179
Date:	10-May-2024	Next Inspection Date:	9-Nov-2024
Type Of Inspection:	VISUAL , THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION		Specification: ASTM E709 & ASTM E 1444 (2016) ASME V Article 7 (2019)
    		UNIT DESCRIPTION:	OFFSHORE UNIT (MAIN FRAME)
		UNIT S/N:	L-6901051816-V03-001 SAP NO: 12252435
		DIM:	3.9 m (L) x 2.2 m (W) x 1.75 m (H)
		INSPECTION RESULT :	
		VISUAL , THOROUGH EXAMINATION	unit fully inspected and found free from deforms, cracks, corrosion & mechanical damage
MAGNETIC PARTICLE INSPECTION		Welds & forgn areas inspected and found free from cracks and other defects	
FINAL RESULTS		unit found satisfactory and free of defects at the time of inspection	
COMMENT: Magnetic Particle Inspection With A/C Hand Yoke , Black & White Contrast			

EQUIPMENT DETAILS						PERSON DETAILS		REVIEW BY	
Equipment:	Astm Test Block	Equipment:	Digital Lux Meter WHITE LIGHT INTENSITY: 3160 lux	Equipment:	AC/DC Yoke PERMANET HAND MAGNATIC	INSPECTOR NAME:		SENIOR INSPECTOR:	NAVEED HUSSAIN
S.No:	1657	S.No:	2722003	S.No:	PY-09	ASHRAF ELSAID		SUPERVISOR:	HANI ALI
Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	QUALIFICATION: ASNT LEVEL II MT & PT & VT		CLIENT:	ALI Talib HB48903 Date: 11-05-2024 Signature  Haliburton
Black Magnetic Ink Concentration 7 HF		Magnaflux	Batch No:	220306	EXPIRE DATE:	MARCH,2025	STAMP & SIGNATURE:		
Whie Contrast Paint Manufacture:		Magnaflux	Batch No:	220602	EXPIRE DATE:	JUN,2025			
TECHNICAL DETAILS		TECH							
		Whie Contrast Paint Manufacture:		0.1 to 0.4 ml/100 ml					
		Black Magnetic Ink Concentration 7 HF		1.2 to 2.4 ml/100 ml					

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CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/03			
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179			
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination			
GIS85864/1	1	4 LEG WIRE ROPE SLING DIM: 3.5 M (L) X 22 MM (DIA) MANUFACTURER: ELMAR NOV FOS: 5:1 IWRC MECHANICALLY SPLICED WITH ALUMINUM FERRULES C/W MASTER LINK ASSEMBLY AT THE TOP HARD EYE BOTH ENDS	10 T	03.2013	27.05.2022			
Reference Standard:	BS EN 13414-1/ HAL DOC: ST-GL-HAL-HSE-0420							
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒	Was the examination carried out: Within an interval of 6 months? With an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?		YES ☒ NO ☐ YES ☐ NO ☒ YES ☒ NO ☐ YES ☐ NO ☒			
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐	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 ☐ NO ☒	Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)					
			N/A					
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 ☒ NO ☐			
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:					
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature Haliburton					
Date of Next Thorough Examination:	09/11/2024							

REV: 01 Dated: 20 June 2022

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned owner's 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.



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Basra, North Rumaila, Quality Control Yard - Iraq

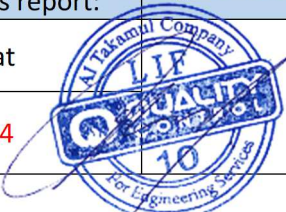
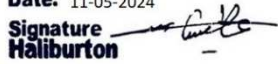
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CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/04
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
864/1A 864/1B 864/1C 864/1D	04	SAFETY PIN BOW SHACKLE MANUFACTURE: CROSBY SIZE: 1" S.F: 6:1 GRADE: 6	8.5 T	N/A	27.05.2022
Reference Standard:		BS EN 13889 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐		YES ☐ NO ☒	
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature:  Haliburton		
Date of Next Thorough Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/05
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Last Inspection		Last Proof Load Test Date		Next Proof Load Test Due	
27.05.2022		06.02.2013		After Any Repair/Modification	
Serial Number:	QTY	Description			PAYLOAD
L6901010860-V01-077	01	CONTROL PANEL DIM: 1.5 M (L) X 0.8 M (W) X 1.40 M (H) FULLY WELDED STEEL CONSTRUCTION WITH FOUR TOP MOUNTED LIFTING POINTS TARE WEIGHT: 1450 KG MAX. GROSS WEIGHT: 1450 KG			N/A
Reference Standard:		BS EN 12079/ HAL DOC: WM-GL-HAL-HSE-0420			
Pad Eyes Dimension:		Thickness:	Pin Hole:	Length:	Height:
		20 mm	16 mm	40 mm	39 mm
Is this the first examination after Installation or assembly at a new site or location?		YES	NO	✓	
If the answer to the above question is YES has the equipment been installed correctly?		YES	NO	✓	
Was the examination carried out:					
Within an interval of 6 months?		YES	NO	✓	
With an interval of 12 months?		YES	NO	✓	
In accordance with an examination scheme?		YES	NO	✓	
After the occurrence of exceptional circumstances?		YES	NO	✓	
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 NO ✓					
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when) N/A					
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 ** MPI was carried out on the pad eyes Welding Areas and found satisfactory					
IS THIS EQUIPMENT SAFE TO OPERATE? YES ✓ NO					
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature Haliburton		
Date of Next Through Examination:	09.11.2024				

REV: 01 Dated: 20 June 2022

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CERTIFICATION OF VISUAL, THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION			
Client:	HALLIBURTON	Report No:	QC-HALL-2024-0179/06
Location:	WPS	Job Number:	QC-HALL-2024-0179
Date:	10-May-2024	Next Inspection Date:	9-Nov-2024
Type Of Inspection:	VISUAL , THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION		Specification: ASTM E709 & ASTM E 1444 (2016) ASME V Article 7 (2019)
    		UNIT DESCRIPTION:	CONTROL PANEL
		UNIT S/N:	L6901010860-V01-077
		DIM:	1.5 M (L) X 0.8 M (W) X 1.40 M (H)
		INSPECTION RESULT :	
		VISUAL , THOROUGH EXAMINATION	unit fully inspected and found free from deforms, cracks, corrosion & mechanical damage
MAGNETIC PARTICLE INSPECTION	Welds & forgn areas inspected and found free from cracks and other defects		
FINAL RESULTS	unit found satisfactory and free of defects at the time of inspection		
COMMENT: Magnetic Particle Inspection With A/C Hand Yoke , Black & White Contrast			

EQUIPMENT DETAILS						PERSON DETAILS		REVIEW BY	
Equipment:	Astm Test Block	Equipment:	Digital Lux Meter WHITE LIGHT INTENSITY: 3160 lux	Equipment:	AC/DC Yoke PERMANET HAND MAGNATIC	INSPECTOR NAME:		SENIOR INSPECTOR:	NAVEED HUSSAIN
S.No:	1657	S.No:	2722003	S.No:	PY-09	ASHRAF ELSAID		SUPERVISOR:	HANI ALI
Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	QUALIFICATION: ASNT LEVEL II MT & PT & VT		CLIENT:	ALI Talib HB48903 Date: 11-05-2024 Signature  Haliburton
Black Magnetic Ink Concentration 7 HF		Magnaflux	Batch No:	220306	EXPIRE DATE:	MARCH,2025	STAMP & SIGNATURE:		
Whie Contrast Paint Manufacture:		Magnaflux	Batch No:	220602	EXPIRE DATE:	JUN,2025			
TECHNICAL DETAILS		TECH							
		Whie Contrast Paint Manufacture:		0.1 to 0.4 ml/100 ml					
		Black Magnetic Ink Concentration 7 HF		1.2 to 2.4 ml/100 ml					

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CERTIFICATE OF THOROUGH EXAMINATION

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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/07				
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179				
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination				
E1341	1	4 LEG WIRE ROPE SLING DIM: 1.25 M (L) X 14 MM (DIA) MANUFACTURER: ELMAR NOV FOS: 5:1 IWRC MECHANICALLY SPLICED WITH ALUMINUM FERRULES C/W MASTER LINK ASSEMBLY AT THE TOP HARD EYE BOTH ENDS	4.8 T	N/A	27.05.2022				
Reference Standard:	BS EN 13414-1/ HAL DOC: ST-GL-HAL-HSE-0420								
Is this the first examination after Installation or assembly at a new site or location?		YES	☐	NO	☒				
		YES	☐	NO	☒				
If the answer to the above question is YES has the equipment been installed correctly?		YES	☐	NO	☒				
		YES	☐	NO	☒				
Was the examination carried out:		Within an interval of 6 months?							
		With an interval of 12 months?							
		In accordance with an examination scheme?							
		After the occurrence of exceptional circumstances?							
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	☐	NO	☒				
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)		N/A							
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	☒	NO	☐				
Name of Inspector:	Name of person authenticating this report:	Signature & Stamp:							
Ashraf Elsaid	Aizaz Farhat								
Date of Next Thorough Examination:	09/11/2024								
		ALI Talib HB48903 Date: 11-05-2024 Signature Haliburton							

REV: 01 Dated: 20 June 2022

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned owner's 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.



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Basra, North Rumaila, Quality Control Yard - Iraq

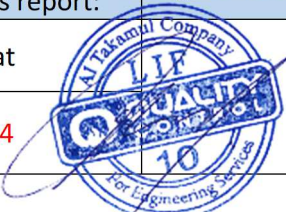
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CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/08
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
1341A 1341B 1341C 1341D	04	SAFETY PIN BOW SHACKLE MANUFACTURE: CROSBY SIZE: 1/2" S.F: 6:1 GRADE: 6	2 T	N/A	27.05.2022
Reference Standard:		BS EN 13889 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐			
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature:  Haliburton		
Date of Next Thorough Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

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CERTIFICATION OF VISUAL, THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION			
Client:	HALLIBURTON	Report No:	QC-HALL-2024-0179/09
Location:	WPS	Job Number:	QC-HALL-2024-0179
Date:	10-May-2024	Next Inspection Date:	9-Nov-2024
Type Of Inspection:	VISUAL , THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION		Specification: ASTM E709 & ASTM E 1444 (2016) ASME V Article 7 (2019)
		UNIT DESCRIPTION:	SPREADER PLATE
		UNIT S/N:	L-690572
		SWL:	9 T
		INSPECTION RESULT :	
		VISUAL , THOROUGH EXAMINATION	unit fully inspected and found free from deforms, cracks, corrosion & mechanical damage
		MAGNETIC PARTICLE INSPECTION	Welds & forgn areas inspected and found free from cracks and other defects
		FINAL RESULTS	unit found satisfactory and free of defects at the time of inspection
		COMMENT:	
		Magnetic Particle Inspection With A/C Hand Yoke , Black & White Contrast	

EQUIPMENT DETAILS						PERSON DETAILS		REVIEW BY	
Equipment:	Astm Test Block	Equipment:	Digital Lux Meter WHITE LIGHT INTENSITY: 3160 lux	Equipment:	AC/DC Yoke PERMANET HAND MAGNATIC	INSPECTOR NAME:		SENIOR INSPECTOR:	NAVEED HUSSAIN
S.No:	1657	S.No:	2722003	S.No:	PY-09	ASHRAF ELSAID		SUPERVISOR:	HANI ALI
Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	QUALIFICATION: ASNT LEVEL II MT & PT & VT		CLIENT:	ALI Talib HB48903 Date: 11-05-2024 Signature Haliburton 
Black Magnetic Ink Concentration 7 HF		Magnaflux	Batch No:	220306	EXPIRE DATE:	MARCH,2025	STAMP & SIGNATURE:		
Whie Contrast Paint Manufacture:		Magnaflux	Batch No:	220602	EXPIRE DATE:	JUN,2025			
TECHNICAL DETAILS		TECH							
		Whie Contrast Paint Manufacture:		0.1 to 0.4 ml/100 ml					
		Black Magnetic Ink Concentration 7 HF		1.2 to 2.4 ml/100 ml					

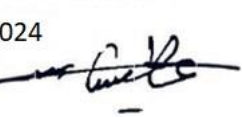


CERTIFICATION OF VISUAL, THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION			
Client:	HALLIBURTON	Report No:	QC-HALL-2024-0179/10
Location:	WPS	Job Number:	QC-HALL-2024-0179
Date:	10-May-2024	Next Inspection Date:	9-Nov-2024
Type Of Inspection:	VISUAL , THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION		Specification: ASTM E709 & ASTM E 1444 (2016) ASME V Article 7 (2019)
		UNIT DESCRIPTION:	LIFTING CAP 9-4"
		UNIT S/N:	E012253869 (L-694638)
		SWL:	4.75 T
		INSPECTION RESULT :	
		VISUAL , THOROUGH EXAMINATION	unit fully inspected and found free from deforms, cracks, corrosion & mechanical damage
		MAGNETIC PARTICLE INSPECTION	Welds & forgn areas inspected and found free from cracks and other defects
		FINAL RESULTS	unit found satisfactory and free of defects at the time of inspection
		COMMENT:	
		Magnetic Particle Inspection With A/C Hand Yoke , Black & White Contrast	

EQUIPMENT DETAILS						PERSON DETAILS		REVIEW BY	
Equipment:	Astm Test Block	Equipment:	Digital Lux Meter WHITE LIGHT INTENSITY: 3160 lux	Equipment:	AC/DC Yoke PERMANET HAND MAGNATIC	INSPECTOR NAME:		SENIOR INSPECTOR:	NAVEED HUSSAIN
S.No:	1657	S.No:	2722003	S.No:	PY-09	ASHRAF ELSAID		SUPERVISOR:	HANI ALI
Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	QUALIFICATION: ASNT LEVEL II MT & PT & VT		CLIENT:	ALI Talib HB48903 Date: 11-05-2024 Signature Haliburton 
Black Magnetic Ink Concentration 7 HF		Magnaflux	Batch No:	220306	EXPIRE DATE:	MARCH,2025	STAMP & SIGNATURE:		
Whie Contrast Paint Manufacture:		Magnaflux	Batch No:	220602	EXPIRE DATE:	JUN,2025			
TECHNICAL DETAILS		TECH							
		Whie Contrast Paint Manufacture:		0.1 to 0.4 ml/100 ml					
		Black Magnetic Ink Concentration 7 HF		1.2 to 2.4 ml/100 ml					



CERTIFICATION OF VISUAL, THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION			
Client:	HALLIBURTON	Report No:	QC-HALL-2024-0179/11
Location:	WPS	Job Number:	QC-HALL-2024-0179
Date:	10-May-2024	Next Inspection Date:	9-Nov-2024
Type Of Inspection:	VISUAL , THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION		Specification: ASTM E709 & ASTM E 1444 (2016) ASME V Article 7 (2019)
		UNIT DESCRIPTION:	LIFTING CLAMP
		UNIT S/N:	03330
		SWL:	3 T
		INSPECTION RESULT :	
		VISUAL , THOROUGH EXAMINATION	unit fully inspected and found free from deforms, cracks, corrosion & mechanical damage
		MAGNETIC PARTICLE INSPECTION	Welds & forgn areas inspected and found free from cracks and other defects
		FINAL RESULTS	unit found satisfactory and free of defects at the time of inspection
		COMMENT:	
		Magnetic Particle Inspection With A/C Hand Yoke , Black & White Contrast	

EQUIPMENT DETAILS						PERSON DETAILS		REVIEW BY	
Equipment:	Astm Test Block	Equipment:	Digital Lux Meter WHITE LIGHT INTENSITY: 3160 lux	Equipment:	AC/DC Yoke PERMANET HAND MAGNATIC	INSPECTOR NAME:		SENIOR INSPECTOR:	NAVEED HUSSAIN
S.No:	1657	S.No:	2722003	S.No:	PY-09	ASHRAF ELSAID		SUPERVISOR:	HANI ALI
Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024	QUALIFICATION: ASNT LEVEL II MT & PT & VT		CLIENT:	ALI Talib HB48903 Date: 11-05-2024 Signature Haliburton 
Black Magnetic Ink Concentration 7 HF		Magnaflux	Batch No:	220306	EXPIRE DATE:	MARCH,2025	STAMP & SIGNATURE:		
Whie Contrast Paint Manufacture:		Magnaflux	Batch No:	220602	EXPIRE DATE:	JUN,2025			
TECHNICAL DETAILS		TECH							
		Whie Contrast Paint Manufacture:		0.1 to 0.4 ml/100 ml					
		Black Magnetic Ink Concentration 7 HF		1.2 to 2.4 ml/100 ml					

AI TAKAMUL COMPANY FOR ENGINEERING TESTS AND PROFESSIONAL SAFETY LIMITED

Basra, North Rumaila, Quality Control Yard - Iraq

Tel: +9647810009138 / +9647834964657

Email: OP@qualitycontrol-iraq.com / hany.akafi@qualitycontrol-iraq.com



CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/12
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
B0342	01	SAFETY PIN BOW SHACKLE MANUFACTURE: Bash-p SIZE: 3/4" S.F: 6:1 GRADE: 6 FITTED WITH LIFTING CAP S/N: L-694638	4.75 T	N/A	27.05.2022
Reference Standard:		BS EN 13889 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐			
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 ☐	NO ☒
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒	NO ☐
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature:  Haliburton		
Date of Next Through Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned owner's 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.



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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/13
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
HEH007	01	<u>MASTER LINK</u> MANUFACTURE: CROSBY SIZE: 2" S.F: 4:1	44.3 TON	N/A	27.05.2022
Reference Standard:		BS EN 1677 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		☐ YES ☒ NO ☐ √		Was the examination carried out: Within an interval of 6 months? ☐ YES ☒ NO ☐ √ With an interval of 12 months? ☐ YES ☐ NO ☒ √ In accordance with an examination scheme? ☐ YES ☒ NO ☐ √ After the occurrence of exceptional circumstances? ☐ YES ☐ NO ☒ √	
If the answer to the above question is YES has the equipment been installed correctly?		☐ YES ☐ NO ☐ √			
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 ☐ NO ☒ √	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ √ ☐ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature Haliburton		
Date of Next Thorough Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

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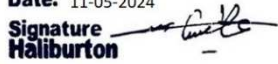
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CERTIFICATE OF THOROUGH EXAMINATION

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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/14
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
E722 E723	2	SINGLE LEG WIRE ROPE SLING MANUFACTURER: SAFETY MARINE DIM: 5.5 M (L) X 14 MM (DIA) FOS: 5:1 IWRC MECHANICALLY SPLICED WITH ALUMINUM FERRULES HARD EYE BOTH ENDS	2.25 T	N/A	27.05.2022
Reference Standard:		BS EN 13414-1/ HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐			
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature:  Haliburton		
Date of Next Thorough Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned owner's 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.



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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/15
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
A110	01	SAFETY PIN BOW SHACKLE MANUFACTURE: CROSBY SIZE: 1 1/8" S.F: 6:1 GRADE: 6	9.5 T	N/A	27.05.2022
Reference Standard:		BS EN 13889 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐		YES ☐ NO ☒	
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature:  Haliburton		
Date of Next Thorough Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/16
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
D8070	01	SAFETY PIN BOW SHACKLE MANUFACTURE: CROSBY SIZE: 1" S.F: 6:1 GRADE: 6	8.5 T	N/A	27.05.2022
Reference Standard:		BS EN 13889 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐		YES ☐ NO ☒	
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature:  Haliburton		
Date of Next Thorough Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

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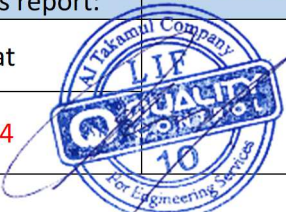
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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/17
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
47/1A 47/1B E1521A D5746A	04	SAFETY PIN BOW SHACKLE MANUFACTURE: CROSBY SIZE: 5/8" S.F: 6:1 GRADE: 6	3.25 T	N/A	27.05.2022
Reference Standard:		BS EN 13889 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐		YES ☐ NO ☒	
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature:  Haliburton		
Date of Next Thorough Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

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CERTIFICATE OF THOROUGH EXAMINATION

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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/18
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
S273-06 S273-07	2	SINGLE LEG WIRE ROPE SLING MANUFACTURER: SAFETY MARINE DIM: 7.5 M (L) X 16 MM (DIA) FOS: 5:1 IWRC MECHANICALLY SPLICED WITH ALUMINUM FERRULES HARD EYE BOTH ENDS	3 T	N/A	27.05.2022
Reference Standard:		BS EN 13414-1/ HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐		YES ☒ NO ☐	
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature: Haliburton		
Date of Next Thorough Examination:	09/11/2024				

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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/19
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
22973B 22973C 22973D	03	SAFETY PIN BOW SHACKLE MANUFACTURE: CROSBY SIZE: 1/2" S.F: 6:1 GRADE: 6	2 T	N/A	27.05.2022
Reference Standard:		BS EN 13889 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐		YES ☐ NO ☒	
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature: Haliburton		
Date of Next Thorough Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

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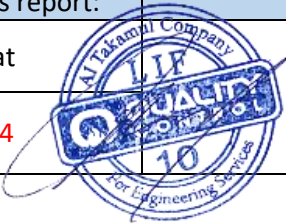
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Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/20
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
23/20	01	SAFETY PIN BOW SHACKLE MANUFACTURE: HOLLAND SIZE: 1/2" S.F: 6:1 GRADE: 6	2 T	N/A	27.05.2022
Reference Standard:		BS EN 13889 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐		YES ☐ NO ☒	
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature:  Haliburton		
Date of Next Thorough Examination:	09/11/2024				

REV: 01 Dated: 20 June 2022

THIS IS TO CERTIFY THAT; a competent person did attend the above-mentioned owner's 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.



AI TAKAMUL COMPANY FOR ENGINEERING TESTS AND PROFESSIONAL SAFETY LIMITED

Basra, North Rumaila, Quality Control Yard - Iraq

Tel: +9647810009138 / +9647834964657

Email: OP@qualitycontrol-iraq.com / hany.akafi@qualitycontrol-iraq.com



CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/21
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
E518	1	4 LEG WIRE ROPE SLING DIM: 3 M (L) X 19 MM (DIA) MANUFACTURER: ELMAR NOV FOS: 5:1 IWRC MECHANICALLY SPLICED WITH ALUMINUM FERRULES C/W MASTER LINK ASSEMBLY AT THE TOP HARD EYE BOTH ENDS	9.6 T	N/A	27.05.2022
Reference Standard:	BS EN 13414-1/ HAL DOC: ST-GL-HAL-HSE-0420				
Is this the first examination after Installation or assembly at a new site or location?		YES	☐	NO	☒
		YES	☐	NO	☒
If the answer to the above question is YES has the equipment been installed correctly?		YES	☐	NO	☒
		YES	☐	NO	☒
Was the examination carried out: Within an interval of 6 months? With an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?					
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 ☐ NO ☒
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)					N/A
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 ☒ NO ☐
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature: Haliburton		
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CERTIFICATE OF THOROUGH EXAMINATION

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

Date of Examination:	10.05.2024	Date of Report:	10.05.2024	Certificate No:	QC-HALL-2024-0179/22
Client Name:	HALLIBURTON	Location:	WPS	Job Number:	QC-HALL-2024-0179
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
E1528A E1528B E1528C E1528D	04	SAFETY PIN BOW SHACKLE MANUFACTURE: CROSBY SIZE: 3/4" S.F: 6:1 GRADE: 6	4.75 T	N/A	27.05.2022
Reference Standard:		BS EN 13889 / HAL DOC: ST-GL-HAL-HSE-0420			
Is this the first examination after Installation or assembly at a new site or location?		YES ☐ NO ☒		Was the examination carried out: Within an interval of 6 months? YES ☒ NO ☐ With an interval of 12 months? YES ☐ NO ☒ In accordance with an examination scheme? YES ☒ NO ☐ After the occurrence of exceptional circumstances? YES ☐ NO ☒	
If the answer to the above question is YES has the equipment been installed correctly?		YES ☐ NO ☐		YES ☐ NO ☒	
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 ☐ NO ☒	
Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when)				N/A	
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 ☒ NO ☐	
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
Ashraf Elsaid	Aizaz Farhat		 ALI Talib HB48903 Date: 11-05-2024 Signature: Haliburton		
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