

**AL 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

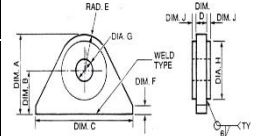
Date of Examination:	02-06-2024	Date of Report:	02-06-2024	Certificate No:	QC-Halliburton-2024-0236-29
Client Name:	Halliburton Sperry	Location:	Sperry Yard	Job Number:	QC-Halliburton-2024-0236

Last Inspection	Last Proof Load Test Date	Next Proof Load Test Due
30-12-2023	30-1-2021	29-11-2023

Serial Number:	QTY	Description	SWL
SAP No: 11486388 S.No: SDL-40056/A	1	OFFSHORE BOX DIM: 3.13 M (L) X 1.64 M (W) X 2.14 M (H) FULLY WELDED STEEL CONSTRUCTION WITH FOUR TOP MOUNTED LIFTING POINTS TARE WEIGHT: 2000 KG MAX. GROSS WEIGHT: 3500 KG	1500 KG

Reference Standard:	DNV 2.7-1/ HAL DOC: WM-GL-HAL-HSE-0420F & WM-GL-HAL-HSE-0420C REV 1
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Pad Eyes Dimension:	Thickness:	Pin Hole:	Length:	Height:
	25 mm	30 mm	130 mm	220 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? With an interval of 12 months? In accordance with an examination scheme? After the occurrence of exceptional circumstances?	YES	NO	✓
	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) 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**

**** 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:	
AIZAZ FARHAT	ASHRAF ELSAID		
Date of Next Through Examination:	01-12-2024		

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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CERTIFICATION OF VISUAL, THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION




Client:	HALLIBURTON SPERRY	Report No:	QC-Halliburton-2024-0236-30
Location:	SPERRY YARD	Job Number:	QC-Halliburton-2024-0236
Date:	2-Jun-2024	Next Inspection Date:	1-Dec-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 BOX
		UNIT S/N:	SDL-40056 S.NO:11486388
		UNIT DIM:	3.13 M (L) X 1.64 M (W) X 2.14 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			


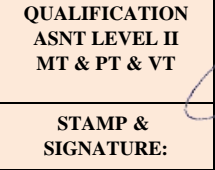
EQUIPMENT DETAILS						PERSON DETAILS		REVIEW BY	
Equipment:	AC-Yoke Test Block	Equipment:	Digital Lux Meter	Equipment:	AC/DC Yoke	INSPECTOR NAME:		SENIOR INSPECTOR:	NAVEED HUSSAIN
S.No:	1657	S.No:	2722003	S.No:	201504048	ASHRAF ELSAID		SUPERVISOR:	HANI ALI
Cal Due Date:	14-Aug-2024		Cal Due Date:	14-Aug-2024		QUALIFICATION ASNT LEVEL II MT & PT & VT		CLIENT:	
Black Magnetic Ink Manufacture:	Magnaflux	Batch No:	220306	Expiry Date:	MARCH-2025				
Whie Contrast Paint Manufacture:	Magnaflux	Batch No:	220602	Expiry Date:	JUN,2025				
Technical Details:	Magnetic Partical Concentration		Method		WMPT Light Intensity	STAMP & SIGNATURE:			
	1.2 to 2.4 ml/100 ml		Wet Magnetic Particle Testing (WMPT)		1350 Lux				
Original - Client Files		Copy - Area Office		QC/FN/MPI/065 Rev.00 DATED 07 Nov 2021					

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CERTIFICATION OF VISUAL, THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION

Client:	HALLIBURTON SPERRY	Report No:	QC-Halliburton-2024-0236-31
Location:	SPERRY YARD	Job Number:	QC-Halliburton-2024-0236
Date:	2-Jun-2024	Next Inspection Date:	1-Dec-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 BOX LADDER	
	UNIT S/N:	SDL-40056 S.NO:11486388	
	UNIT DIM:	3.13 M (L) X 1.64 M (W) X 2.14 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:	AC-Yoke Test Block	Equipment:	Digital Lux Meter	Equipment:	AC/DC Yoke	INSPECTOR NAME:		SENIOR INSPECTOR:	NAVEED HUSSAIN
S.No:	1657	S.No:	2722003	S.No:	201504048	ASHRAF ELSAID		SUPERVISOR:	HANI ALI
Cal Due Date:	14-Aug-2024	Cal Due Date:	14-Aug-2024			QUALIFICATION		CLIENT:	
Black Magnetic Ink Manufacture:	Magnaflux	Batch No:	220306	Expiry Date:	MARCH-2025	ASNT LEVEL II			
Whie Contrast Paint Manufacture:	Magnaflux	Batch No:	220602	Expiry Date:	JUN,2025	MT & PT & VT			
Technical Details:	Magnetic Partical Concentration		Method		WMPT Light Intensity	STAMP & SIGNATURE:			
	1.2 to 2.4 ml/100 ml		Wet Magnetic Particle Testing (WMPT)		1350 Lux				
Original - Client Files		Copy - Area Office		QC/FN/MPI/065 Rev.00 DATED 07 Nov 2021					

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Date of Examination:	02-06-2024	Date of Report:	02-06-2024	Certificate No:	QC-Halliburton-2024-0236-32
Client Name:	Halliburton Sperry	Location:	Sperry Yard	Job Number:	QC-Halliburton-2024-0236
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
AZ918 AZ919 AZ920 AZ921	04	SAFETY PIN BOW SHACKLE SIZE: 7/8" GRADE: 6 MANUFACTURE: CROSBY S.F: 6:1	6.5 TON	N/A	30-12-2023
Reference Standard:	BS EN 13889 / HAL DOC: WM-GL-HAL-HSE-0420F & WM-GL-HAL-HSE-0420C REV 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 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"/>
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
AIZAZ FARHAT	ASHRAF ELSAID				
Date of Next Through Examination:	01-12-2024				

REV: 01 Dated: 20 June 2022

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Date of Examination:	02-06-2024	Date of Report:	02-06-2024	Certificate No:	QC-Halliburton-2024-0236-33
Client Name:	Halliburton Sperry	Location:	Sperry Yard	Job Number:	QC-Halliburton-2024-0236

Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
AZ873	01	<p><u>5 LEGS WIRE ROPE SLING</u></p> <p>Manufacture: Safety Marine Master Leg DIM: 24 MM(DIA) x 1.57 M(L) S.F: 5:1 4 Leg Dim: 16 MM(DIA) x 2.16 M (L)</p> <p>IWRC, MECHANICALLY SPLICED WITH STEEL FERRULE C/W MASTER LINK ASSEMBLY HARD EYE BOTH ENDS</p>	6.2 TON at 0-45° Angle	N/A	30-12-2024

Reference Standard: BS EN 13414-1/ HAL DOC: WM-GL-HAL-HSE-0420F & WM-GL-HAL-HSE-0420C REV 1

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
If the answer to the above question is YES has the equipment been installed correctly?	YES	NO		In accordance with an examination scheme? After the occurrence of exceptional circumstances?	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

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