

**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

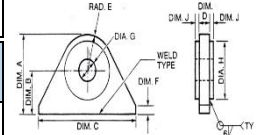
Date of Examination:	13/03/2025	Date of Report:	13/03/2025	Certificate No:	QC-2025-1303-05
Client Name:	HALLIBURTON	Location:	SPERRY YARD	Job Number:	130325

Last Inspection	Last Proof Load Test Date	Next Proof Load Test Due
13/08/2024	18/ 02/ 2006	AFTER ANY REPAIR/MODIFICATION

Serial Number:	QTY	Description
SAP No: 10777835 S.No: A3344-1/05	1	<p align="center"><u>MUD LOGGING UNIT</u></p> <p>DIMENSION: 7.9 M (L) X 2.74 M (W) X 2.72 M (H)</p> <p>FULLY WELDED STEEL CONSTRUCTION WITH FOUR TOP MOUNTED LIFTING POINTS</p> <p>TARE WEIGHT: 11000 KG</p> <p>PAYLOAD: 2000 KG</p> <p>GROSS WEIGHT: 13000 KG</p>

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:
	38 mm	30 mm	140 mm	100 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	✓
					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**

**** 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	MOHAMED ABDALLAH		
Date of Next Through Examination:	12/09/2025		

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-2025-1303-06		
Location:		SPERRY YARD			Job Number:		130325		
Date:		Thursday, March 13, 2025			Next Inspection Date:		Friday, September 12, 2025		
Type Of Inspection:		VISUAL , THOROUGH EXAMINATION & MAGNETIC PARTICLE INSPECTION			Specification:		ASTM E709 & ASTM E 1444 (2016) ASME V Article 7 (2019)		
					UNIT DESCRIPTION:		MUD LOGGING UNIT PAD EYES AND LADDER		
					UNIT S/N:		10777835		
					UNIT DIM:		7.9 M (L) X 2.74 M (W) X 2.72 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:	ASHRAF ELSAID	SENIOR INSPECTOR:	MOHAMED ABDALLAH
S.No:	1657	S.No:	2722003	S.No:	201504052				
Cal Due Date:	11-Apr-25	Cal Due Date:	13-Apr-25	Cal Due Date:	11-Apr-25	QUALIFICATION	ASNT LEVEL II MT & PT & VT	CLIENT:	
Black Magnetic Ink Manufacture:	Magnaflux	Batch No:	230604	Expiry Date:	MAY,2026				
Whie Contrast Paint Manufacture:	Magnaflux	Batch No:	230408	Expiry Date:	APRIL,2026				
Technical Details:	Magnetic Partical Concentration		Method		WMPT Light Intensity				
	1.2 to 2.4 ml/100 ml		Wet Magnetic Particle Testing (WMPT)		3630 Lux				
Original - Client Files		Copy - Area Office		QC/FN/MPI/065 Rev.00 DATED 07 Nov 2021					

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Date of Examination:	13/03/2025	Date of Report:	13/03/2025	Certificate No:	QC-2025-1303-07
Client Name:	HALLIBURTON	Location:	SPERRY YARD	Job Number:	130325
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
B0113	01	<p>4 LEGS WIRE ROPE SLING</p> <p>MANUFACTURER: SAFETY MARINE SERVICES</p> <p>DIMENSION: 5.9 M (L) X 28 MM (DIA)</p> <p>FOS: 5:1</p> <p>IWRC, MECHANICALLY SPLICED WITH ALUMINUM FERRULE C/W MASTER LINK ASSEMBLY HARD EYE BOTH ENDS</p>	19 ton at 0-45°	N/A	13/08/2024
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 <input type="checkbox"/> NO <input checked="" type="checkbox"/>	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 <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"/>			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)					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 <input checked="" type="checkbox"/> NO <input type="checkbox"/>
Name of Inspector:	Name of person authenticating this report:		Signature & Stamp:		
ASHRAF ELSAID	MOHAMED ABDALLAH				
Date of Next Through Examination:	12/09/2025				

REV: 01 Dated: 20 June 2022

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Date of Examination:	13/03/2025	Date of Report:	13/03/2025	Certificate No:	QC-2025-1303-08
Client Name:	HALLIBURTON	Location:	SPERRY YARD	Job Number:	130325

Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
X51 X52 X53 X54	04	<u>SAFETY PIN BOW SHACKLE</u> MANUFACTURE: CROSBY SIZE: 1" GRADE: 6 S.F: 6:1	8.5 TON	N/A	13/08/2024

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	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	√
If the answer to the above question is YES has the equipment been installed correctly?	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

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IS THIS EQUIPMENT SAFE TO OPERATE? YES NO

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