





## LIFTING ACCESSORIES OF VISUAL AND THOROUGH EXAMINATION

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

<b>Client:</b>	DAQING DRILLING COMPANY	<b>Certificate no:</b>	QC-B-05-25-0263-F/05
<b>Location:</b>	DQ RIG 022	<b>Job Order No:</b>	QC-B-05-25-0263
<b>Date of Examination:</b>	09-May-2025	<b>Next Inspection Due:</b>	08-Nov-2025
<b>Last Inspection</b>		<b>Last Proof Load Test Date</b>	
N/A		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL
2011YL1541-28 2011YL1541-29	<b>Single Leg Wire Rope Sling</b>  Dim : 45 m (L) X 16 mm (DIA) IWRC Mechanical Spliced With IWRC Aluminium Ferrules Hard Eyes X Plain End FOS: 5 : 1 Location : Manual Tong Hang Line – Mast Upper Section	01	14 KN
<b>Applicable Reference Standard:</b>	BS EN 13414-1		
* Is this the first examination after installation or assembly at a new site or location?	Was the examination carried out?		
	YES	NO	√
* If the answer to the above question is YES has the equipment been installed correctly?	* Within an interval of 6 months?		
	YES	NO	√
	* Within an interval of 12 months?		
	YES	NO	√
	* By 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 Become A Danger To Persons And A Description Of The Defect: <b>None</b>			
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)		NO	YES
Particulars Of Any Repair, Renewal, Or Alteration Required To Remedy The Defect Identified Above: <b>None</b>			
<b>** Visual And Dimension Check was Carried Out.</b>			
Is This Equipment Safe To Operate?		Yes Accept	NO Reject
		√	

<b>LEE &amp; ASNT Level II Inspector Name:</b>	<b>SIGNATURE:</b>	<b>Authenticating This Report:</b>	<b>SIGNATURE:</b>
Khaled Mahmoud		Ashraf Al Said	

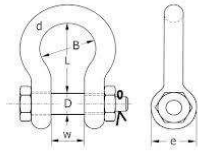
**THIS IS TO CERTIFY THAT;** a competent person did attend the above-mentioned owner's work location on the date shown above and the equipment described in this report was tested & inspected as per the requirements of Lifting Operations Lifting Equipment Regulation "LOLER". The result was found Satisfactory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





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<b>Client:</b>	DAQING DRILLING COMPANY	<b>Certificate no:</b>	QC-B-05-25-0263-F/06
<b>Location:</b>	DQ RIG 022	<b>Job Order No:</b>	QC-B-05-25-0263
<b>Date of Examination:</b>	09-May-2025	<b>Next Inspection Due:</b>	08-Nov-2025
<b>Last Inspection</b>		<b>Last Proof Load Test Date</b>	
N/A		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL		
0010	<p><b>Safety pin bow Shackles</b></p> <p>Size : 3/4" Grade : 6</p> <p>Manufacture: Crosby</p> <p>Location: Attracted With Drill Side Counter Weight</p> 	01	4.75 Ton		
<b>Applicable Reference Standard:</b>	BS EN 13889 / US FED SPEC RR-C-27 1 D				
* Is this the first examination after installation or assembly at a new site or location?	YES	NO	√		
	Was the examination carried out?				
* If the answer to the above question is YES has the equipment been installed correctly?	YES	NO	√		
	* Within an interval of 6 months?				
			YES	NO	√
			YES	NO	√
			YES	NO	√
			YES	NO	√
Identification Of Any Part Found To Have A Defect Which Is Or Could Become A Danger To Persons And A Description Of The Defect: <b>None</b>					
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)			NO	YES	√
Particulars Of Any Repair, Renewal, Or Alteration Required To Remedy The Defect Identified Above: <b>None</b>					
<b>** Visual And Dimension Check was Carried Out.</b>					
Is This Equipment Safe To Operate?			Yes Accept	NO Reject	√

<b>LEE &amp; ASNT Level II Inspector Name:</b>	<b>SIGNATURE:</b>	<b>Authenticating This Report:</b>	<b>SIGNATURE:</b>
Khaled Mahmoud		Ashraf Al Said	

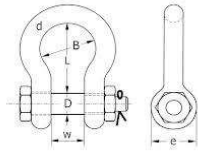
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<b>Location:</b>	DQ RIG 022	<b>Job Order No:</b>	QC-B-05-25-0263
<b>Date of Examination:</b>	09-May-2025	<b>Next Inspection Due:</b>	08-Nov-2025
<b>Last Inspection</b>		<b>Last Proof Load Test Date</b>	
N/A		By Manufacture	

IDENTIFICATION NO	DESCRIPTION	QTY	SWL
GB.9	<p><b>Safety pin bow Shackles</b></p> <p>Size : 3/4" Grade : 6</p> <p>Manufacture: GP</p> <p>Location: Attracted With Off Drill Side Counter Weight</p> 	01	4.75 Ton
<b>Applicable Reference Standard:</b>	BS EN 13889 / US FED SPEC RR-C-27 1 D		
* Is this the first examination after installation or assembly at a new site or location?	YES	NO	√
	Was the examination carried out?		
* If the answer to the above question is YES has the equipment been installed correctly?	YES	NO	√
	* Within an interval of 6 months?		
			YES
			NO
			√
			YES
			NO
			√
Identification Of Any Part Found To Have A Defect Which Is Or Could Become A Danger To Persons And A Description Of The Defect: <b>None</b>			
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)			NO
			√
			YES
			By:
Particulars Of Any Repair, Renewal, Or Alteration Required To Remedy The Defect Identified Above: <b>None</b>			
<b>** Visual And Dimension Check was Carried Out.</b>			
Is This Equipment Safe To Operate?		Yes Accept	NO Reject
		√	

<b>LEE &amp; ASNT Level II Inspector Name:</b>	<b>SIGNATURE:</b>	<b>Authenticating This Report:</b>	<b>SIGNATURE:</b>
Khaled Mahmoud		Ashraf Al Said	

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