

**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:	01/07/2025	Date of Report:	01/07/2025	Certificate No:	QC-WPS-25-0102/01
Client Name:	HALLIBURTON	Location:	WPS WORKSHOP	Job Number:	0102

Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
BP11584938.1	1	4 LEG WIRE ROPE SLING DIM: 0.70 M (L) X 14 MM (DIA) Manufacturer: BULLIVANTS IWRC MECHANICALLY SPLICED WITH ALUMINUM FERRULES C/W MASTER LINK ASSEMBLY AT THE TOP HARD EYE BOTH ENDS S.F: 5:1	3.6 T @ 60 DEG	01/22	29/01/2024

Reference Standard:	BS EN 31414-1/ HAL DOC: ST-GL-HAL-HSE-0420
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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 Sate 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:

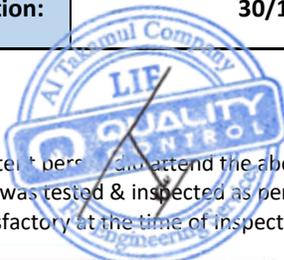
Particulars of any tests carried out as part of the examination: (If none state NONE)

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:	Client Signature & Stamp:	
ASHRAF ELSAID	MOHAMED ABDALLAH	ALI Talib HB48903 Date: 02-JULY-2025 Signature Haliburton	
Date of Next Through Examination:	30/12/2025		

REV: 01 Dated: 20 June 2022



THIS IS TO CERTIFY THAT; a competent person attended 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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Client Name:	HALLIBURTON	Location:	WPS WORKSHOP	Job Number:	0102
Serial Number:	QTY	Description	SWL	Date of manufacture if known:	Date of last thorough examination
S01 S02 S03 S04	4	<u>SAFETY PIN BOW SHACKLES</u> MANUFACTURER: GP SIZE: 5/8" GRADE: 6 FOS: 5:1	3.25T	01/22	29/01/2024
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?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input 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"/> √	
If the answer to the above question is YES has the equipment been installed correctly?		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> √		With an interval of 12 months?	
				<input type="checkbox"/> YES <input checked="" 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 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 checked="" type="checkbox"/> NO <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)				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:	Client Signature & Stamp:			
ASHRAF ELSAID	MOHAMED ABDALLAH	ALI Talib HB48903 Date: 02-JULY-2025 Signature			
Date of Next Through Examination:	30/12/2025				

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.



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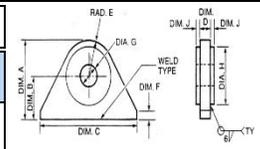
This Certificate complies with the requirements of the Lifting Equipment Operations and Lifting Equipment Regulations

Date of Examination:	01/07/2025	Date of Report:	01/07/2025	Certificate No:	QC-WPS-25-0102/03
Client Name:	HALLIBURTON	Location:	WPS WORKSHOP	Job Number:	0102
Last Inspection		Last Proof Load Test Date		Next Proof Load Test Due	
29/01/2024		15/05/2024		14/05/2026	

Serial Number:	QTY	Description
R-1199.18	1	<p>WLV CAGE</p> <p>DIM: 1.60 M (L) X 0.50 M (W) X 0.90 M (H)</p> <p>FULLY WELDED STEEL STRUCTURE WITH TOP FOUR MOUNTED LIFTING POINTS</p> <p>TARE WEIGHT: 200 KG</p> <p>PAYLOAD: 2000 KG</p> <p>M.G.W: 2200 KG</p>

Reference Standard:	BS 7072/ HAL DOC: WM-GL-HAL-HSE-0420
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Pad Eyes Dimension:	Thickness:	Pin Hole:	Length:	Height:
	20 MM	19 MM	155 MM	70 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 Item was 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:	Client Signature & Stamp:	
ASHRAF ELSAID	MOHAMED ABDALLAH	ALI Talib HB48903 Date: 02-JULY-2025 Signature	
Date of Next Through Examination:	30/12/2025	Signature Haliburton	

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