

DIMENSION BID

COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

PART 1: To be completed by Assessor [WEIGHT: 40%]

Name	ZAINUDDIN YACOB	COB Date	18-8-24
Position	GEO	RTB Date	20-8-24
Client	PCSB	Location	DL-A
Platform	DULANG -A	Well	A7
Assessed By	Name: M. TAUFIQ	Position:	CTU Supv

RATING LEGEND:

STRONG Performance consistently exceeded expectations in all essential areas of responsibility, and the quality of work overall was excellent

ADEQUATE Performance consistently met expectations in all areas of responsibility, at times possibly exceeding expectations, and the quality of work overall was very good

IMPROVEMENT NEEDED Performance did not consistently met expectations - performance failed to meet expectations in one or more essential areas of responsibility

Assessment Criteria	Rating (Please ✓ where appropriate)								
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Safety Awareness (20%)

- a. Usage of Personal Protective Equipment
- b. Participation in UAUC
- c. Understanding of PTW System
- d. Worksite House Keeping

	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
	10	9	8	7	6	5	4	3	2
a. Usage of Personal Protective Equipment	✓								
b. Participation in UAUC		✓							
c. Understanding of PTW System		✓							
d. Worksite House Keeping		✓							


Work Performance (20%)

- e. Initiative and Creativity
- f. Decision Making Capability
- g. Understanding of Job Scope
- h. Tools Inventory and Reporting
- i. Work Quality
- j. Reporting
- k. Punctuality and Time Keeping
- l. Teamwork
- m. Communication
- n. Leadership Skills
- o. Adaptability to Work Environment/Surrounding
- p. Attitude
- q. Discipline

e. Initiative and Creativity		✓							
f. Decision Making Capability		✓							
g. Understanding of Job Scope		✓							
h. Tools Inventory and Reporting		✓							
i. Work Quality		✓							
j. Reporting		✓							
k. Punctuality and Time Keeping		✓							
l. Teamwork		✓							
m. Communication		✓							
n. Leadership Skills		✓							
o. Adaptability to Work Environment/Surrounding		✓							
p. Attitude		✓							
q. Discipline		✓							

REMARKS/COMMENTS/FEEDBACK ON PERFORMANCE OR AREAS OF IMPROVEMENT:

Assign as night supervisor during working period and able to perform operation without supervision.

Assessed By [Supervisor]	
Name	M. TAUFIQ
Date	1-9-24

Doc.Ref.No.: CTS-FORM-90

Revision No.: 01

Effective Date: 21/08/2023

(Rev.00,Dated:22/09/19-OBSOLETE)

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PART 2: To be completed by Employee and Assessor [WEIGHT: 60%]

Type of Task	Tasks Performed	Assessor Comment									
1. Pre-Job Preparation	<ul style="list-style-type: none"> - Attend meeting and tool box meeting with crew on board - attend pre job meeting - pre check all coil equipment prior start the job 	Done									
		10	9	8	7	6	5	4	3	2	
2. Surface Equipment Rig-up	<ul style="list-style-type: none"> - Assist crew to rig up surface line - set up equipment on board - spot and arrange flood light, CC and junction box - Rig up water injection line - Rig up arden pump 	Done									
		10	9	8	7	6	5	4	3	2	
3. Tools / Equipment Preparation	<ul style="list-style-type: none"> - Perform EMC? on CC, stripper, BOP's, CT Reel, injector, JF and power pack - prepare downhole tool 	Done									
		10	9	8	7	6	5	4	3	2	
4. Equipment	4.1 Batch Mixer <ul style="list-style-type: none"> - Supervise throughout operation 	- Done									
		10	9	8	7	6	5	4	3	2	
Employee was able to OPERATE the equipment:					Under Supervision						
					Standalone						

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PART 2: To be completed by Employee and Assessor [WEIGHT: 60%]

Type of Task	Tasks Performed	Assessor Comment								
	4.2 Pump Unit - Pump always check lubricated oil - Check discharge and suction valve - Pump always to get ready to perform the job	Done								
Rating (by SUPERVISOR)		STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	(9)	8	7	6	5	4	3	2
Employee was able to OPERATE the equipment:					Under Supervision			Standalone		
								/		
	4.3 Nitrogen Pump unit & Nitrogen Tank - Assist crew to rig up N2 line - Assist crew to rig up cyrogenic hose - Monitor operator to coldcheck N2	Done								
Rating (by SUPERVISOR)		STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	(9)	8	7	6	5	4	3	2
Employee was able to OPERATE the equipment:					Under Supervision			Standalone		
								/		
	4.4 Power Pack - Perform EMC 1 for fire and proof job	Done								
Rating (by SUPERVISOR)		STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	(9)	8	7	6	5	4	3	2
Employee was able to OPERATE the equipment:					Under Supervision			Standalone		
								/		
	4.5 Control Cabin - Set up VIB file - Perform EMC 1 - Update job ticket - Update chemical tracking	Done								
Rating (by SUPERVISOR)		STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	(9)	8	7	6	5	4	3	2
Employee was able to OPERATE the equipment:					Under Supervision			Standalone		
								/		

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Type of Task	Tasks Performed	Assessor Comment								
	4.6 CT Reel - Perform EMC 1	Done								
Rating (by SUPERVISOR)		STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
Employee was able to OPERATE the equipment:		Under Supervision			Standalone					
					/					
	4.7 Injector Head - Top up rigstar lube oil - Check and top up gear box oil - Perform EMC 1	Done								
Rating (by SUPERVISOR)		STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
Employee was able to OPERATE the equipment:		Under Supervision			Standalone					
					/					
	4.8 Pressure Control Equipment - Function test all logs - Function test stripper - Perform EMC 1	Done								
Rating (by SUPERVISOR)		STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
Employee was able to OPERATE the equipment:		Under Supervision			Standalone					
					/					
	4.9 Basic BHA Components - Prepare and make up BHA configuration to be use	Done								
Rating (by SUPERVISOR)		STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
Employee was able to OPERATE the tools:		Under Supervision			Standalone					
					/					

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PART 2: To be completed by Employee and Assessor [WEIGHT: 60%]

Type of Task	Tasks Performed			Assessor Comment								
5. Job Supervision (if applicable) Please complete this section if you perform any supervisory role during operation	Night supervisor			Done								
	Rating (by SUPERVISOR)			STRONG			ADEQUATE			IMPROVEMENT NEEDED		
	10	9	8	7	6	5	4	3	2			
	Please ✓ accordingly to confirm the role of the employee during operation			Full Supervisor			<input type="checkbox"/>					
				2nd / Night Supervisor			<input checked="" type="checkbox"/>					

