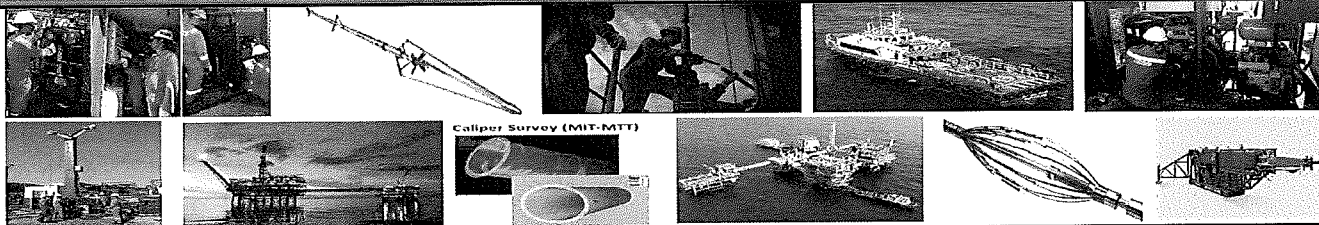


DIMENSION BID



SLICKLINE SERVICES DEVELOPMENT PLAN
SA III > SSA I PROMOTION BOOKLET

FULL NAME:	Edrican Edmon Mangkah
JOINED DATE:	
CONFIRMATION DATE:	
REGION:	Emo
DIVISION:	slickline - operation
CONTROL DATE:	

DIMENSION BID

SLICKLINE ASSISTANT III EVALUATION SHEET SLICKLINE SERVICES

SLICKLINE ASSISTANT III DETAILS

FULL NAME

SENIORITY DATE

Edrian Edmon Mangkah

REGION

DIVISION

UNIT/SECTION

LOCATION

CONFIRMATION DATE

EMO

Slickline

Operation

Labuan

Please tick (✓) at the relevant box the Competency Level of the Slickline Assistant III (L1-Awareness, L2-Basic, L3-Skilled, L4-Broad, L5-Full Understanding)

SAFETY	L1 L2 L3 L4 L5					ASSESSED BY	DATE	QUALITY	L1 L2 L3 L4 L5					ASSESSED BY	DATE
DB HSE Policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	QMS & ISO knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11
Risk Assessment and Hazard Identification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	DB Quality Policy & Objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11
Field Safety and PTW Familiarization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	DB Slickline Procedure and SOP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11

Custodian Name and Position: Alleyson / FSM
Custodian Signature/Date: Alleyson / 28/11/23

SERVICE QUALITY	L1 L2 L3 L4 L5					ASSESSED BY	DATE	SERVICE QUALITY	L1 L2 L3 L4 L5					ASSESSED BY	DATE
Basic Knowledge of Slickline Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	Slickline Job Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11
Tools and Equipment Handling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	Post-job Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11

Custodian Name and Position: Alleyson / FSM
Custodian Signature/Date: Alleyson / 28.11.23

PERSONAL QUALITY	L1 L2 L3 L4 L5					ASSESSED BY	DATE	PERSONAL QUALITY	L1 L2 L3 L4 L5					ASSESSED BY	DATE
Learning Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	Field Operations Readiness Status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11
Time Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	Stress Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11
Command/Instruction Handling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	Communication Skills - Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11
Self Confident	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	Communication Skills - Speaking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11

Custodian Name and Position: Alleyson / FSM
Custodian Signature/Date: Alleyson / 28/11/23

MANAGEMENT / ADMINISTRATION	L1 L2 L3 L4 L5					ASSESSED BY	DATE	MANAGEMENT / ADMINISTRATION	L1 L2 L3 L4 L5					ASSESSED BY	DATE
Inventory Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	Inspection Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11
Materials Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11	Slickline Job Reporting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Alleyson	28/11

Custodian Name and Position: Alleyson / FSM
Custodian Signature/Date: Alleyson / 28/11/23

MANAGER'S COMMENTS Specify the candidate main strong points and development areas
- Ready for hir next position (GRA I)

CANDIDATE'S COMMENTS Add comments about the support you have received from your tutor/location

RECOMMENDED FOR NEXT POSITION ? YES NO Remark : If NO, please submit e-mail to FSM and specify details here.

CANDIDATE'S SIGNATURE

INSTRUCTOR'S SIGNATURE

MANAGER'S SIGNATURE

DATE

[Signature]

[Signature]

[Signature]

28/11/2023

DIMENSION BID



SA III Control Process

SA III expectations are set according to your location's requirements, but below you will find some guidelines as minimum requirements to help you succeed in the process.

You may expect to start your SA III control within 18 - 30 months from joining Dimension Bid Sdn. Bhd, depending on your competency development progress. The SA III module is more technical and operations oriented combined with troubleshooting element. By this stage a SA III is expected to have executed most of SLS services.

The path for SA III to prepare for SSA I control will be:

- 1 Perform at least:
 - i. Sea Offshore Trips (at least 3 different job types) – List of job refer to Para 6.3 a. Slickline Personnel Competency Matrix, items no 40 – 59.
 - ii. Conduct 1ea Technical Presentation (preferably at DB KL Office)
 - iii. Conduct 1ea x HSSE SQ Presentation OR 1 HSE Contribution Activity
 - iv. Attend 3ea Technical In-house Training
 - v. Submit 1ea UAUC/day while offshore
- 2 Complete the following paperworks:
 - i. SLS-FORM-142: SLS CMS Slickline Assistant III Promotion Booklet
 - ii. SLS-FORM-149: SLS CMS Job Track Record
 - iii. SLS-FORM-150: Slickline Assistant Workbook (for new hire)
 - iv. SLS-FORM-13: Slickline Assistant Performance Assessment Feedback
 - v. Slickline Assistant III Training & Exam Module
 - vi. HR-FORM-09 : Performance Appraisal & Development Plan

Note:

- 1 The HSSE presentation doesn't have to be self-made. You can use presentation from supplier or any other sources.
- 2 When preparing for the presentation, please expect questions from your audience. The presentation needs to demonstrate your full understanding in HSSE & SQ
- 3 During the HSSE presentation, you are expected to demonstrate your full understanding and awareness in HSSE & SQ
- 4 During the Technical presentation, you are expected to demonstrate your knowledge and understanding in Surface Equipment, Slickline DHT, Slickline Job Type and Challenges & Lesson Learnt.
- 5 Target audiences for the presentation are Slickline Operators or Support Role at your Location. The management will evaluate the presentation and sign-off your control sheet.

Upon completion of the above requirement, please handover the complete package to your FSM who will then evaluate your eligibility for promotion together with OM for Management approval.

DIMENSION BID

SLICKLINE ASSISTANT III TECHNICAL EVALUATION SHEET

SLICKLINE SERVICES

SLICKLINE ASSISTANT III DETAILS

FULL NAME				SENIORITY DATE	
Ednean Edmon Mangkaha					
REGION	DIVISION	UNIT/SECTION	LOCATION	CONFIRMATION DATE	
Emo	Slickline	Operation	Labuan		

TECHNICAL EVALUATION

Please tick (✓) at the relevant box the Competency Level of the Slickline Assistant III
(L1-Awareness, L2-Basic, L3-Skilled, L4-Broad, L5-Full Understanding)

WIRESLINE	L1	L2	L3	L4	L5	MAINTENANCE	L1	L2	L3	L4	L5
Wireline Operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Unit/P.Pack/Winch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Well Completion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Cable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Down Hole Tool Servicing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Well Head Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Setup Surface Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Maintenance Flow Process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mast and Hoisting System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Genset/Air Comp	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Custodian Name and Position	Alleyson / FSM
Custodian Signature/Date	Alleyson / 28-11-23

Custodian Name and Position	Alleyson / FSM
Custodian Signature/Date	Alleyson / 28-11-23

Trouble Shooting Skill	L1	L2	L3	L4	L5	PCE	L1	L2	L3	L4	L5
Surface Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Rig Up & Rig Down	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Cable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Control Module	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Down Hole Tool	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pressure Control Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Pressure Control Equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Single Well Control Panel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SWCP/T.Pump/Control Module	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pressure Test Pump	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Custodian Name and Position	Alleyson / FSM
Custodian Signature/Date	Alleyson / 28-11-23

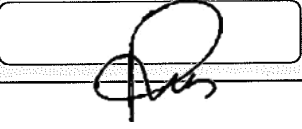

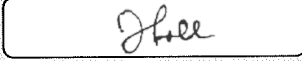
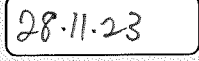
Custodian Name and Position	Alleyson / FSM
Custodian Signature/Date	Alleyson / 28-11-23

Operation	L1	L2	L3	L4	L5	GENERAL	L1	L2	L3	L4	L5
Winch Man	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Special Tools Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Logging/Perforating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Fishing Tools Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Custodian Name and Position	Alleyson / FSM
Custodian Signature/Date	Alleyson / 28-11-23

Custodian Name and Position	Alleyson / FSM
Custodian Signature/Date	Alleyson / 28-11-23

DIMENSION BID

INSTRUCTOR'S COMMENTS			
- Able to perform troubleshoot on equipment - Quick learner, persistent & is listen to command effectively			
CANDIDATE'S COMMENTS		Add comments about the support you have received from your tutor/location	
INSTRUCTOR		DIVISION MANAGER	
Recommend Promotion to Next Level?	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Approve Promotion To Next Level?	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>
CANDIDATE'S SIGNATURE	INSTRUCTOR'S SIGNATURE	MANAGER'S SIGNATURE	DATE
			

DIMENSION BID

SLICKLINE ASSISTANT III EVALUATION CHECKLIST SLICKLINE SERVICES

SLICKLINE ASSISTANT III DETAILS

FULL NAME				SENIORITY DATE	
Edrean Edmond Mangkah					
REGION	DIVISION	UNIT/SECTION	LOCATION	CONFIRMATION DATE	
EMO	Slickline	Operation	Labuan		

SLICKLINE ASSISTANT III CHECKLIST

Done prior to final submission to HR
No Slickline Assistant Package will be processed by the HR if any of the points are missing.

TASK & REPORTS

- 5 x Offshore Trip (Please attach SLS-FORM-149 Job Track Record)
- 1ea x Technical Presentation (Preferably at DB KL Office - Please attach slide presentation)
- Completed Slickline Assistant III Training & Exam Module
- Attend 3ea x Technical Inhouse Training
- 1 ea UAUC per day (for every offshore trip) and signed by Safety Officer
- Completed Slickline Assistant Performance Assessment Feedback for for all jobs performed (refer Job Track Record)
- Completed Performance Appraisal & Development Plan

PAPERWORK

- Slickline Assistant III Evaluation Sheet
- Slickline Assistant III Technical Evaluation Sheet
- Job Tracking Record (Verified by FSM)
- Technical Slide Presentation (Verified by OM)
- Technical Inhouse Training Attendance
- 1ea UAUC per day and signed by Safety Officer
- SLS-FORM-13 : Slickline Assistant Performance Assessment Feedback
- HR-FORM-09 : Performance Appraisal & Development Plan

VERIFICATION

I hereby verify that the above paperworks and documents above has been checked and confirmed true. I further certify that all information contained herein is true and accurate.
I understand that any falsifying of any document above could result in disciplinary action and being denied access to Slickline Assistant program in future.

PREPARED AND SUBMITTED BY



SIGNATURE
NAME : Edrean Edmund Mangkah
POS : Slickline Asst 2
DATE : 28/11/2023

DIMENSION BID

ENDORSEMENT

All check points listed above have been verified completed by myself or my delegates.
I Deem This Slickline Assistant III Candidate READY to be Promoted to Next Level

VERIFIED BY

Alleyson

SIGNATURE

NAME : ALLEYSON AKIN

POS : DIMENSION BID (M) SDN BHD

DATE : East Malaysia Operation 28/11/23

AGREED BY

Afiq Ammar

SIGNATURE

NAME : Afiq Ammar

POS : Head of SLS

DATE : 26th Dec 2023

FOR HR USAGE

I hereby received this Slickline Assistant III package for processing
I deem this Slickline Assistant III Candidate READY to be promoted to Next Level.

RECEIVED BY

SIGNATURE

NAME :

POS :

DATE :