

# DIMENSION BID

## SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK

(PART 1: To be completed by Assessor)

Name	LENNON CHUNG	COB Date	19.04.2024
Position	SENIOR SLICKLINE ASSISTANT I	RTB Date	25.04.2024
Client	VESTIGO	Location	
Platform	KMSE, VELESTO NAGA 2	Well	
Assessed By	NAME: COLLIN JUSTINE		

**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 ACT
- 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 ACT	✓								
c. Understanding of PTW System	✓								
d. Worksite House Keeping	✓								

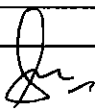
**Work Performance (20%)**

- 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:**

- Good communication between team and good team work.

Assessed By [Operator]	
Name	COLLIN JUSTINE
Date	25.04.2024

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## SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK

(PART 2: To be completed by Employee and Assessor)

Type of Task	Tasks Performed	Assessor Comment								
1. Pre-Job Preparation	A) GET APPROVE PTW ONSITE, DISCUSS ABOUT JHA, TOOLBOX TALK AMONG CREW AND WIS. B) PERFORM HAZARD HUNT BEFORE START OPERATION. C) PERFORM PRE-CHECKLIST ON ALL EQUIPMENT. D) TO CHECK ALL HOSES WAS TIGHT AND SECURE INSTALLED. E) ENSURE ALL TOOLS BEING PREPARED AND FUNCTION TEST PRIOR TO JOB BEING PERFORM. F) ENSURE ALL PRESSURE HOSE FROM POWERPACK TO RSU BEING SECURE WITH WHIP CHECK. G) BARRICADE WORKSITE & WELLHEAD AREA BEFORE PERFORM RIGGING UP THE PCE LOWER AND UPPER SECTION. H) CHECK WELL CONDITION TO KNOW IF THERES ANY POTENTIAL PASSING ON WELLHEAD VALVE. I) WALK THE LINE BEFORE START RIGGING UP AND IDENTIFY ANY HAZARD. J) ENSURE TO TOP UP DIESEL AND HYDRAULIC OIL ON POWERPACK AND SWCP.									
	Rating (by Operator)	STRONG 10 9 8	ADEQUATE 7 6 5	IMPROVEMENT NEEDED 4 3 2						
2. Surface Equipment Rig-up	A) MAKE UP PCE LOWER AND UPPER SECTION. B) PUT GREASE ON ALL LUBRICATOR CONNECTION BEFORE CONNECTING IT. C) CHECK O-RING BEFORE MAKE UP THE LUBRICATOR. D) DISCARD/CUT WIRE IF NEEDED. E) CHECK ANY DAMAGE ON ALL LUBRICATOR THREAD. F) HOOK UP ALL HOSES & CHECK ALL HOSES FOR ANY DAMAGE BEFORE USE. G) CHECK ALL PCE EQUIPMENT VALIDITY BEFORE USE. H) MAKE UP ROPE SOCKET. I) ENSURE ALL SHACKLE SECURE WITH SAFETY PIN. J) MAKE SURE TO FUNCTION TEST SWCP HYDRAULIC AND AIR LINE. K) TEST RUN POWERPACK BEFORE START OPERATION. L) ENSURE SWCP HOSE HAS NO LEAK OR DAMAGE. M) CONNECT HYDRAULIC BOP HOSES FROM RSU.									
	Rating (by Operator)	STRONG 10 9 8	ADEQUATE 7 6 5	IMPROVEMENT NEEDED 4 3 2						
3. Tools / Equipment Preparation	A) SERVICE & FUNCTION TEST TOOL BEFORE USING IT. B) PINNING RUNNING AND PULLING TOOLS. C) CHECK ANY THREAD DAMAGE ON TOOLS BEFORE/AFTER USE. D) FILE ANY TOOLS THAT HAVE SHARP EDGES TO PREVENT FROM BEING CUT. E) CLEAN ANY TOOL THAT IS STUCK DUE TO WAX OR AFTER RUN HOLE. F) INVENTORY TOOLS IF NECESSARY. G) ENSURE CHECKING ALL SIZE OF TOOLS AND CONNECTION IS SUITABLE TO USE BEFORE RUN IN HOLE.									
	Rating (by Operator)	STRONG 10 9 8	ADEQUATE 7 6 5	IMPROVEMENT NEEDED 4 3 2						
4. Equipment Problem Troubleshooting <i>[Please state type of equipment and describe troubleshooting job performed]</i>										
	Rating (by Operator)	STRONG 10 9 8	ADEQUATE 7 6 5	IMPROVEMENT NEEDED 4 3 2						

Type of Task	Tasks Performed			Assessor Comment								
	Rating (by Operator)	STRONG			ADEQUATE			IMPROVEMENT NEEDED				
		10	9	8	7	6	5	4	3	2		
5. Downhole Tools Servicing/Redressing/Maintenance	A) FUNCTION TEST AND PINNING 2.313" X-LINE RUNNING TOOL B) FUNCTION TEST AND PINNING 2.5" GS PULLING TOOL. C) PINNING AND FUNCTION TEST 2" SB PULLING TOOL. E) FUNCTION TEST 142BO. F) FUNCTION TEST AND PINNING 42BO.											
	Rating (by Operator)	10	9	8	7	6	5	4	3	2		

Type of Task	Tasks Performed	Assessor Comment																		
6. Tools Inventory & Reporting																				
	<b>Rating (by Operator)</b>	<table border="1"> <thead> <tr> <th colspan="3">STRONG</th> <th colspan="3">ADEQUATE</th> <th colspan="3">IMPROVEMENT NEEDED</th> </tr> <tr> <th>10</th> <th>9</th> <th>8</th> <th>7</th> <th>6</th> <th>5</th> <th>4</th> <th>3</th> <th>2</th> </tr> </thead> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2
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10	9	8	7	6	5	4	3	2												
7. Equipment Operation	[Operator to rate TSA / SA / SSA competency in operating the equipment]																			
	<b>Rating (by Operator)</b>	STRONG			ADEQUATE			IMPROVEMENT NEEDED												
		10	9	8	7	6	5	4	3	2										
	Power Pack	✓																		
	Air Compressor (N/A)		N/A																	
	GenSet (N/A)		N/A																	
	Control Panel	✓																		
	Test Pump	✓																		
	Pressure Control Equipment	✓																		
	Mast		N/A																	
Weight & Measuring Devices	✓																			
Downhole Tools	✓																			
Total		0	0	0	0	0	0	0	0	0										
Comments by Operator [please specify competency gaps / area of improvement]																				
<b>EXECUTE THE WELL SERVICES OPERATION (IF ANY)</b> (Operating Winch)																				
<b>Date / Location / Well No. / Job Type</b>	<b>Activity Summary</b>					<b>Toolstring Configuration</b>														
	<b>Rating (by Operator)</b>	STRONG			ADEQUATE			IMPROVEMENT NEEDED												
		10	9	8	7	6	5	4	3	2										
Comments by Operator [please specify competency gaps / area of improvement]																				

