

Title	Job Supervision – Standard & Advanced Services				
Target Population	Field Engineer & Field Specialists				
This requirement is applicable to:		JFE		FST	EOT
	✓	FE1	✓	FS1	EO1
	✓	FE2	✓	FS2	EO2
			✓	FS3	EO3
					✓ GEO

Objective:

The objective of this task is to evaluate and verify the employee’s competency in executing coiled tubing operations independently as main supervisor or second supervisor (night shift). At this level, his competency is evaluated on both Standard and Advanced Services:

- Standard Services
 - Wellbore Cleanout
 - CT Cementing
 - Nitrogen Operations
 - Pumping Services

- Advanced Services
 - CT Fishing
 - CT Milling
 - CT Logging
 - CT Mechanical Packer
 - CT Real-Time Downhole Tools
 - CT Matrix Stimulation

Tasks:

The employee should complete the following tasks:

1. Play a strong operational role at location either as the main job supervisor or as a second supervisor (night shift) and ensure operations are carried out in a safe and efficient manner.
2. Participate in all aspects of the service delivery process such as job preparations i.e. logistics, wellsite client contact, managing the crew, job execution in compliance with CTS Standard and reporting requirements.
3. Review the Job Program.
4. Understand and be able to explain the Job Objective(s) for the operation.
5. Participate in the Job Safety Analysis or Risk Assessment for the operation.
6. Ensure pre and post EMC 1 for all equipment are being performed at location.
7. Leading the rig-up and rig-down of equipment in a safe manner.
8. Make some basic calculations as required during operation (some examples: MPSP, PT-A & PT-B values, CT string volume, volume to displace bottoms up wellbore, CT speed required to place fluids

in wellbore, Nitrogen required to flush CT string at surface, N2 required to displace CT String when at a given depth).

9. Calculate and log the times consumed in the following activities; mobilization, equipment spot, rig up, operation, NPT, standby, rig down, de-mobilization.
10. Calculate the total volume of fluids pumped and the total amount of additives used for operation.
11. Produce job tickets and get client's agreement and signature accordingly.

REQUIRED EVIDENCE:

- 1 Evidence of participation in and / or delivery of the above tasks refer OJT.


Brief summary of employee's learning outcome (to be completed by Assessor):

OVERALL SCORE	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
	10	9	8	7	6	5	4	3	2

MENTOR / ASSESSOR's Comments & Recommendation:

Objective met. Task completed.

Signature	<i>[Signature]</i>	Assessment Date	<i>13/10/24</i>
Name	<i>KUNG YEE HAN</i>	Position	<i>TECHNICAL ADVISOR</i>

FSM / OM Comments & Recommendation: Note to supervise and advise job procedure from design stage until evaluation stage.			
Signature		Assessment Date	13/10/24
Name	M. KHAIRUL RIDHWAN AZIZA CTS FIELD SERVICE MANAGER Dimension Bid (M) Sdn Bhd	Position	FSM



**Equipment Maintenance
Checklist 1**

Equipment type : CTU Batch Mixer	
Location : Omani Road	
Equipment number : 1024	
Checklist	
Appearance and Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit appearance good and clean
<input checked="" type="checkbox"/>	Verify that all earth/ground cables are in place, well connected
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Fire extinguisher is present and certified
Cooling System:	
<input checked="" type="checkbox"/>	Coolant level & condition
<input checked="" type="checkbox"/>	Check visible leaks
<input checked="" type="checkbox"/>	Radiator hose & clamp condition
Engine Inspection:	
<input checked="" type="checkbox"/>	Check engine oil level(SAE 15w-40) not be milty or too dark
<input checked="" type="checkbox"/>	Check any general leaks on all filter, hoses, and connectors.
<input checked="" type="checkbox"/>	Check fan, hub, fanbelt Condition/ Tension
<input checked="" type="checkbox"/>	Check Battery cable connectors
<input checked="" type="checkbox"/>	Check condition of engine hose's
<input checked="" type="checkbox"/>	Check for rusted part- repair if required
<input checked="" type="checkbox"/>	Check the crankcase vent system for excessive blow by
Air Cleaner:	
<input checked="" type="checkbox"/>	Air filter condition-check the element for water or soot and clean as required
Controls / Instrumentation:	
<input checked="" type="checkbox"/>	Normal kill tested
<input checked="" type="checkbox"/>	Emergency kill tested
<input checked="" type="checkbox"/>	Oil pressure gauge in good condition
<input checked="" type="checkbox"/>	Tachometer in good condition
<input checked="" type="checkbox"/>	Throttle control in good condition
<input checked="" type="checkbox"/>	Engine stop cable in good condition
<input checked="" type="checkbox"/>	Engine start valve in good condition
Exhaust System:	
<input checked="" type="checkbox"/>	Pipework - check for any leak or damage
<input checked="" type="checkbox"/>	Condition/Operation of rain cap
<input checked="" type="checkbox"/>	Condition of exhaust wrap are in place and in good condition
Transmission, Gearbox:	
<input checked="" type="checkbox"/>	Check level Sight glass shows in full (SAE 90)
<input checked="" type="checkbox"/>	Check condition of the gearbox breather filter
Hydraulic System:	
<input checked="" type="checkbox"/>	Check Hyd. Hoses/valve/connections undamage and clean
<input checked="" type="checkbox"/>	Hyd.tank - drain any water
<input checked="" type="checkbox"/>	Check hyd. oil level (2" from top) (Tellus 46)
<input checked="" type="checkbox"/>	Check hyd. gauges
<input checked="" type="checkbox"/>	Check condition of fittings & couplings
Fuel System:	
<input checked="" type="checkbox"/>	Check for any water contamination in the fuel filter sight bowl
<input checked="" type="checkbox"/>	Fuel tank - drain any water
<input checked="" type="checkbox"/>	Check for leaks on fuel lines, connections, and hoses
<input checked="" type="checkbox"/>	Fuel filter - check condition
<input checked="" type="checkbox"/>	Fill up the diesel tank to 90%

Running Hours : 1024	
Maintenance Schedules	
Date : 1/21/2021	
Checklist	
Air System:	
<input checked="" type="checkbox"/>	Check visible leaks, ensure air up 90-110psi-check that gauge are good
<input checked="" type="checkbox"/>	Gauges condition
<input checked="" type="checkbox"/>	Air reservoir /tanks - drain any water until that are clean
<input checked="" type="checkbox"/>	Air hose, connections, piping, valves and actuators condition
<input checked="" type="checkbox"/>	All control working properly
Zone II System:	
<input checked="" type="checkbox"/>	Flame traps - check cleanliness
<input checked="" type="checkbox"/>	Back pressure gauges - check condition
<input checked="" type="checkbox"/>	Spark arrestor - check condition
Paddles / Aggitator:	
<input checked="" type="checkbox"/>	Check oil level (SAE 90)
<input checked="" type="checkbox"/>	Grease bearing
<input checked="" type="checkbox"/>	Check agitators turn
System Pressure:	
	Fuel pressure@idle speed psi
	Fuel pressure@1800 RPM psi
	Oil pressure @ cold start psi
	Oil pressure @ 180deg.F psi
Certifications:	
	Sling condition/ Due on 09/24
	MPI due 1/21
	Load Test due 1/21

Please state the equipment readiness in either columns and spare used

Ready

Ready to go.

Signature: *[Handwritten Signature]*

Date : 21/1/21
Name : FIKRAN / BABU / ADAM / ZAEEM / HAFIZ
Position : EO1 / FST / PST / JFC

Please state any corrective actions and spare used.

Corrective Action Completion

Date :
 Name :
 Position :

Signature:



**Equipment Maintenance
Checklist 1**

Equipment type : Batch Mixer Tank	
Location : OILFIELD	
Equipment number : 014/RM/01	
☺ ☹	Checklist
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
Labelling	
<input checked="" type="checkbox"/>	MGW and SWL in place
<input checked="" type="checkbox"/>	Last annual inspection
Lifting Devices	
<input checked="" type="checkbox"/>	Inspection on shackles and pins, slings and lugs
<input checked="" type="checkbox"/>	MPI on pad eye if necessary
<input checked="" type="checkbox"/>	Mark the inspection date and due date
<input checked="" type="checkbox"/>	Load test is current
<input checked="" type="checkbox"/>	All protection caps and ID tags in place.
Corrosion, Dent, Defects in Weld	
<input checked="" type="checkbox"/>	Check for rust in weld, no leaks
<input checked="" type="checkbox"/>	Check for leakages
<input checked="" type="checkbox"/>	Check all piping, manhole covers, valves
Safety Equipment and Certification	
<input checked="" type="checkbox"/>	Visual inspection of all pad eyes and lifting gear
<input checked="" type="checkbox"/>	Safety guards and rail in working condition

Maintenance Schedule :	
Date : 21/08/2021	
☺ ☹	Checklist
C-Pump:	
<input checked="" type="checkbox"/>	C-Pump packing - check condition
<input checked="" type="checkbox"/>	Check operation and shut-in pressure
<input checked="" type="checkbox"/>	4x5 C-Pump > 45 psi
<input checked="" type="checkbox"/>	5x6 C-Pump > 55 psi
<input checked="" type="checkbox"/>	Perform circulation test
Mixing tank & piping:	
<input checked="" type="checkbox"/>	Check condition of mixing tank & paddle
<input checked="" type="checkbox"/>	Check condition of suction & discharge piping
<input checked="" type="checkbox"/>	Check condition of B/F Valve & grease
<input checked="" type="checkbox"/>	Check condition of safety railing w/comp.lock pin
<input checked="" type="checkbox"/>	Mixing head + circulation jet - no cement build up
Certifications:	
	Sling condition/ Due on 9/21
	MPI due 11/21
	Load Test due 11/21

Please state the equipment readiness in either columns and spare used

Ready

Ready to go

Date : 21/8/21
Name : FRODAN / KADUN / AZAN / ZAFEM / HAFIZ
Position : EM / FET / FET / JFE

Signature: *[Handwritten Signature]*

Please state any corrective actions and spare used.

Corrective Action Completion

Date :
Name :
Position :

Signature:

Equipment Maintenance Checklist 1

Equipment type : Single Pump Unit	
Location : OPEN YARD 30	
Equipment number : CU/SP/01	
Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit appearance good and clean
<input checked="" type="checkbox"/>	Verify that all earth/ground cables are in place, well connected
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Fire extinguisher is present and certified
Cooling System:	
<input checked="" type="checkbox"/>	Coolant level & condition
<input checked="" type="checkbox"/>	Check visible leaks
<input checked="" type="checkbox"/>	Radiator hose & clamp condition
Engine:	
<input checked="" type="checkbox"/>	Check engine oil level (SAE 15w-40) not be milky or too dark
<input checked="" type="checkbox"/>	Check any general leaks on all filter, hoses, and connectors.
<input checked="" type="checkbox"/>	Check fan, hub, fanbelt Condition/ Tension
<input checked="" type="checkbox"/>	Check Battery cable connectors
<input checked="" type="checkbox"/>	Check condition of engine hose's
<input checked="" type="checkbox"/>	Check for rusted part- repair if required
<input checked="" type="checkbox"/>	Check the crankcase vent system for excessive blow by
Air Cleaner:	
<input checked="" type="checkbox"/>	Air filter condition-check the element for water or soot and clean as required
Controls / Instrumentation:	
<input checked="" type="checkbox"/>	Normal kill and emergency kill tested
<input checked="" type="checkbox"/>	Check converter lock-up
<input checked="" type="checkbox"/>	Check all gauges are in good condition and working
<input checked="" type="checkbox"/>	Check (Rate+RPM) and (Pressure+OPS) condition
<input checked="" type="checkbox"/>	Throttle control in good condition
<input checked="" type="checkbox"/>	OPSD tested
Exhaust System:	
<input checked="" type="checkbox"/>	Pipework - check for any leak or damage
<input checked="" type="checkbox"/>	Condition/Operation of rain cap
<input checked="" type="checkbox"/>	Condition of exhaust wrap are in place and in good condition
Transmission, PTO & Drivelines:	
<input checked="" type="checkbox"/>	Sight glass shows in full (SAE 90)
<input checked="" type="checkbox"/>	Start & idle engine(5- Min) recheck oil level
<input checked="" type="checkbox"/>	Listen for excessive noise at PTO
<input checked="" type="checkbox"/>	Condition of Transmission hoses & fittings
<input checked="" type="checkbox"/>	Grease U-joint & propeller shaft
Hydraulic System:	
<input checked="" type="checkbox"/>	Check Hyd. Hoses/valve/connections undamage and clean
<input checked="" type="checkbox"/>	Hyd.tank - drain any water
<input checked="" type="checkbox"/>	Check hyd. oil level (2" from top) (Tellus 46)
<input checked="" type="checkbox"/>	Check hyd. gauges
<input checked="" type="checkbox"/>	Check condition of fittings & couplings
Fuel System:	
<input checked="" type="checkbox"/>	Check for any water contamination in the fuel filter sight bowl
<input checked="" type="checkbox"/>	Fuel tank - drain any water
<input checked="" type="checkbox"/>	Check for leaks on fuel lines, connections, and hoses
<input checked="" type="checkbox"/>	Fuel filter - check condition
<input checked="" type="checkbox"/>	Fill up the diesel tank to 90%

Running Hours : 2318	
Maintenance Schedule :	
Date : 21/08/2021	
Checklist	
Electrical System:	
<input checked="" type="checkbox"/>	Check batteries condition and voltage
<input checked="" type="checkbox"/>	Check alternator belt- 1/2-in to 3/4-in yield and wiring
<input checked="" type="checkbox"/>	Check starter condition and wiring
<input checked="" type="checkbox"/>	Cables/connectors condition
Air System:	
<input checked="" type="checkbox"/>	Check visible leaks, ensure air up 90-110psi-check that gauge are GOOD
<input checked="" type="checkbox"/>	Gauges condition
<input checked="" type="checkbox"/>	Air reservoir /tanks - drain any water until that are clean
<input checked="" type="checkbox"/>	Air hose,connections,piping.valves and actuators condition
<input checked="" type="checkbox"/>	All control working properly
Electronic Recording & Monitoring Devices:	
<input checked="" type="checkbox"/>	Check all sensors condition
<input checked="" type="checkbox"/>	Check pump controls, rate and pressure devices.
<input checked="" type="checkbox"/>	Cables/connectors condition
<input checked="" type="checkbox"/>	Acquisition - check communication with software/hardware
Zone II System:	
<input checked="" type="checkbox"/>	Flame traps - check cleanliness
<input checked="" type="checkbox"/>	Back pressure gauges - check condition
<input checked="" type="checkbox"/>	Spark arrestor - check condition
Power End & Chain Case:	
<input checked="" type="checkbox"/>	Check power end oil level & condition (SAE90)
<input checked="" type="checkbox"/>	Check chaincase oil level / Leaks (SAE40)
<input checked="" type="checkbox"/>	Grease chaincase bearing
<input checked="" type="checkbox"/>	Check hoses conditions for any leak
Fluid End:	
<input checked="" type="checkbox"/>	Check plungers condition. Plungers tight to pony rod.
<input checked="" type="checkbox"/>	Pressure sensor in place
<input checked="" type="checkbox"/>	Check plungers lubrication
<input checked="" type="checkbox"/>	Check lubrication oil tank level
C-Pump & Piping:	
<input checked="" type="checkbox"/>	Check C-Pump operation and record shut in pressure
<input checked="" type="checkbox"/>	Grease Butterfly Valve
<input checked="" type="checkbox"/>	Check piping conditions and remove any dirt
System Pressure:	
<input checked="" type="checkbox"/>	Fuel pressure@idle speed _____ psi
<input checked="" type="checkbox"/>	Fuel pressure@1800 RPM _____ psi
<input checked="" type="checkbox"/>	Oil pressure @ cold start 90 psi
<input checked="" type="checkbox"/>	Oil pressure @ 180deg.F _____ psi
Certifications:	
<input checked="" type="checkbox"/>	Sling condition/ Due on 09/21
<input checked="" type="checkbox"/>	MPI due 11/21
<input checked="" type="checkbox"/>	Load Test due 11/21

Please state the equipment readiness in either columns and spare used

Ready	Not Ready
<p style="font-size: 24px; text-align: center;">unit ready for next Job</p>	
<p>Date : 21/8/21</p> <p>Name : WAJED / ZAEEM / HAFIZ</p> <p>Position : EO 2 / JEE</p>	<p>Signature: </p>

Please state any corrective actions and spare used.

Corrective Action Completion	
Date :	Signature:
Name :	
Position :	



Equipment Maintenance Checklist 1

Equipment type : CTU Injector Head HR680	
Location : OPEN YARD	
Equipment number : CTU/14/07	
☺ ☹ Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
Lubrication:	
<input checked="" type="checkbox"/>	Chain lube oil tank level
<input checked="" type="checkbox"/>	Grease at all grease point
Hydraulic System:	
<input checked="" type="checkbox"/>	Check all hydraulic Hoses for damage,leaks or wear
<input checked="" type="checkbox"/>	Fitting & coupling condition
<input checked="" type="checkbox"/>	Check accumulators for correct precharge:
	Upper Traction <u>500</u> psi
	Middle Traction <u>500</u> psi
	Lower Traction <u>500</u> psi
	Outside Tension <u>500</u> psi
Chains:	
<input checked="" type="checkbox"/>	Chains must be clean
<input checked="" type="checkbox"/>	Check chain,rollers,bearings,pins & gripper blocks condition
<input checked="" type="checkbox"/>	Chain allignment
<input checked="" type="checkbox"/>	Check for unusual noise when running
Chain Tensioner System:	
<input checked="" type="checkbox"/>	Check all sprockets for wear and damage
<input checked="" type="checkbox"/>	Grease all bearings - drive and idler sprocket
<input checked="" type="checkbox"/>	Check cylinders for wear and damage
Drive Motor & Gear Box:	
<input checked="" type="checkbox"/>	Check gearbox lubricant level
<input checked="" type="checkbox"/>	Function test drive and brake system
<input checked="" type="checkbox"/>	Check for any leak or damage
Gooseneck:	
<input checked="" type="checkbox"/>	Check gooseneck alignment (prior to stab in)
<input checked="" type="checkbox"/>	Check gooseneck rollers for damages
<input checked="" type="checkbox"/>	Check linkages,pins,locking,covers and supports condition

Running Feet : 00/343	
Maintenance Schedule : EML 1	
Date : 18/08/2021	
☺ ☹ Checklist	
Recording & Monitoring Devices:	
<input checked="" type="checkbox"/>	Check operation & condition of friction wheel
<input checked="" type="checkbox"/>	Electronics - check cables/connectors condition
<input checked="" type="checkbox"/>	Depth counter - check alignmet and condition
<input checked="" type="checkbox"/>	Depth encoder - check condition and function test
<input checked="" type="checkbox"/>	WH pressure transducer - check condition
<input checked="" type="checkbox"/>	Secure Load Cell - weight off load cell
Certifications:	
	Sling condition/ Due on <u>01/22</u>
	MPI due <u>03/22</u>
	Load Test due <u>03/22</u>

Please state the equipment readiness in either columns and spare used

Ready	
Date : 18/08/2021	Signature:
Name : M. Wizar / ZAEEM / HAFIL	
Position : AS / JEG	

Please state any corrective actions and spare used.

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Corrective Action Completion

Date :	
Name :	Signature:
Position :	



Equipment Maintenance Checklist 1

Equipment type : Air Compressor	
Location : OREN YARD 20	
Equipment number : 110-11-190-028	
Checklist	
Appearance and Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit appearance good and clean
<input checked="" type="checkbox"/>	Verify that all earth/ground cables are in place , well connected
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Fire extinguisher is present and certified
Cooling System:	
<input checked="" type="checkbox"/>	Coolant level & condition
<input checked="" type="checkbox"/>	Check visible leaks
<input checked="" type="checkbox"/>	Radiator hose & clamp condition
Engine:	
<input checked="" type="checkbox"/>	Check engine oil level(SAE 15w-40) not be milty or too dark
<input checked="" type="checkbox"/>	Check any general leaks on all filter ,hoses, and connectors.
<input checked="" type="checkbox"/>	Check fan, hub, fanbelt Condition/ Tension
<input checked="" type="checkbox"/>	Check Battery cable connectors
<input checked="" type="checkbox"/>	Check condition of engine hose's
<input checked="" type="checkbox"/>	Check for rusted part- repair if required
<input checked="" type="checkbox"/>	Check the crankcase vent system for excessive blow by
Air Cleaner:	
<input checked="" type="checkbox"/>	Air filter condition-check the element for water or soot and clean as required
Controls / Instrumentation:	
<input checked="" type="checkbox"/>	Normal kill tested
<input checked="" type="checkbox"/>	Emergency kill tested
<input checked="" type="checkbox"/>	Oil pressure gauge in good condition
<input checked="" type="checkbox"/>	Tachometer in good condition
<input checked="" type="checkbox"/>	Throttle control in good condition
<input checked="" type="checkbox"/>	Engine stop cable in good condition
<input checked="" type="checkbox"/>	Engine start valve in good condition
Exhaust System:	
<input checked="" type="checkbox"/>	Pipework - check for any leak or damage
<input checked="" type="checkbox"/>	Condition/Operation of rain cap
<input checked="" type="checkbox"/>	Condition of exhaust wrap are in place and in good condition
Fuel System:	
<input checked="" type="checkbox"/>	Check for any water contamination in the fuel filter sight bowl
<input checked="" type="checkbox"/>	Fuel tank - drain any water
<input checked="" type="checkbox"/>	Check for leaks on fuel lines, connections, and hoses
<input checked="" type="checkbox"/>	Fuel filter - check condition
<input checked="" type="checkbox"/>	Fill up the diesel tank to 90%

Running Hours : 194	
Maintenance Schedule : 3MC 1	
Date : 20/08/2021	
Checklist	
Air System:	
<input checked="" type="checkbox"/>	Check visible leaks
<input checked="" type="checkbox"/>	Check all element on air flow system (compressor,seperator)
<input checked="" type="checkbox"/>	Air hose,connections,piping and valves condition
<input checked="" type="checkbox"/>	All control working properly
<input checked="" type="checkbox"/>	Gauges condition
Zone II System:	
<input checked="" type="checkbox"/>	Flame traps - check cleanliness
<input checked="" type="checkbox"/>	Back pressure gauges - check condition
<input checked="" type="checkbox"/>	Spark arrestor - check condition
System Pressure:	
	Fuel pressure@idle speed _____ psi
	Fuel pressure@1800 RPM _____ psi
	Oil pressure @ cold start <u>43</u> psi
	Oil pressure @ 180deg.F <u>45</u> psi
Certifications:	
	Sling condition/ Due on <u>01/22</u>
	MPI due <u>12/21</u>
	Load Test due <u>12/21</u>

Please state the equipment readiness in either columns and spare used

Ready

Ready to go

Date : 19/08/2021
 Name : MOHAMMED ALI MOHAMMED / ZAEEM / HAFIZ
 Position : GO / JEE

Signature:

Please state any corrective actions and spare used.

Corrective Action Completion
 Date :
 Name :
 Position :

Signature:



**Equipment Maintenance
Checklist 1**

Equipment type : Genset	
Location : OPER YARD	
Equipment number : 105/651-400A/002	
Checklist	
Appearance and Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit appearance good and clean
<input checked="" type="checkbox"/>	Verify that all earth/ground cables are in place, well connected
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input type="checkbox"/>	Fire extinguisher is present and certified
Cooling System:	
<input checked="" type="checkbox"/>	Coolant level & condition
<input checked="" type="checkbox"/>	Check visible leaks
<input checked="" type="checkbox"/>	Radiator hose & clamp condition
Engine:	
<input checked="" type="checkbox"/>	Check engine oil level(SAE 15w-40) not be milky or too dark
<input checked="" type="checkbox"/>	Check any general leaks on all filter, hoses, and connectors.
<input checked="" type="checkbox"/>	Check fan, hub, fanbelt Condition/ Tension
<input checked="" type="checkbox"/>	Check Battery cable connectors
<input checked="" type="checkbox"/>	Check condition of engine hose's
<input checked="" type="checkbox"/>	Check for rusted part- repair if required
<input checked="" type="checkbox"/>	Check the crankcase vent system for excessive blow by
Air Cleaner:	
<input checked="" type="checkbox"/>	Air filter condition-check the element for water or soot and clean as required
Controls / Instrumentation:	
<input checked="" type="checkbox"/>	Normal kill tested
<input checked="" type="checkbox"/>	Emergency kill tested
<input checked="" type="checkbox"/>	Oil pressure gauge in good condition
<input checked="" type="checkbox"/>	Tachometer in good condition
<input checked="" type="checkbox"/>	Throttle control in good condition
<input checked="" type="checkbox"/>	Engine stop cable in good condition
<input checked="" type="checkbox"/>	Engine start valve in good condition
Exhaust System:	
<input checked="" type="checkbox"/>	Pipework - check for any leak or damage
<input checked="" type="checkbox"/>	Condition/Operation of rain cap
<input checked="" type="checkbox"/>	Condition of exhaust wrap are in place and in good condition
Fuel System:	
<input checked="" type="checkbox"/>	Check for any water contamination in the fuel filter sight bowl
<input checked="" type="checkbox"/>	Fuel tank - drain any water
<input checked="" type="checkbox"/>	Check for leaks on fuel lines, connections, and hoses
<input checked="" type="checkbox"/>	Fuel filter - check condition
<input checked="" type="checkbox"/>	Fill up the diesel tank to 90%

Running Hours : 1403	
Maintenance Schedule : EM	
Date : 19/08/2021	
Checklist	
Electrical System:	
<input checked="" type="checkbox"/>	Check all cables and sockets in good condition
<input checked="" type="checkbox"/>	Generator in good condition
<input checked="" type="checkbox"/>	All reading in normal range
<input checked="" type="checkbox"/>	Circuit breaker in good condition
<input checked="" type="checkbox"/>	Equipment is grounded
Zone II System:	
<input checked="" type="checkbox"/>	Flame traps - check cleanliness
<input checked="" type="checkbox"/>	Back pressure gauges - check condition
<input checked="" type="checkbox"/>	Spark arrestor - check condition
System Pressure:	
	Fuel pressure@idle speed _____ psi
	Fuel pressure@1800 RPM _____ psi
	Oil pressure @ cold start <u>70</u> psi
	Oil pressure @ 180deg.F <u>72</u> psi
Certifications:	
	Sling condition/ Due on <u>01/22</u>
	MPI due <u>11/21</u>
	Load Test due <u>11/21</u>

Please state the equipment readiness in either columns and spare used

Ready

Ready to go

Date : 19/08/2021
 Name : MOHTO HAD MOHAMMAD / ZAEEM / HAFIZ
 Position : CO (JEE)

Signature: *[Signature]*

Please state any corrective actions and spare used.

Corrective Action Completion

Date : _____
 Name : _____
 Position : _____

Signature: _____



Equipment Maintenance Checklist 1

Equipment type : Fluid Storage Tank	
Location : OPEN YARD 20	
Equipment number : DE-VT-006	
☺ ☹ Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
Labelling	
<input checked="" type="checkbox"/>	MGW and SWL in place
<input checked="" type="checkbox"/>	Last annual inspection
Lifting Devices	
<input checked="" type="checkbox"/>	Inspection on shackles and pins, slings and lugs
<input checked="" type="checkbox"/>	MPI on pad eye if necessary
<input checked="" type="checkbox"/>	Mark the inspection date and due date
<input checked="" type="checkbox"/>	Load test is current
<input checked="" type="checkbox"/>	All protection caps and ID tags in place.
Corrosion, Dent, Defects in Weld	
<input checked="" type="checkbox"/>	Check for rust in weld, no leaks
<input checked="" type="checkbox"/>	Check for leakages
<input checked="" type="checkbox"/>	Check all piping, manhole covers, valves
Safety Equipment and Certification	
<input checked="" type="checkbox"/>	Visual inspection of all pad eyes and lifting gear
<input checked="" type="checkbox"/>	Safety guards and rail in working condition

Maintenance Schedule :	
Date : 19/08/2021	
☺ ☹ Checklist	
Certifications:	
	Sling condition/ Due on
	MPI due 4/21
	Load Test due 11/21

Please state the equipment readiness in either columns and spare used

Ready	
Ready to go	
Date : 19/08/2021	Signature:
Name : MOHD HAFIZ MUHAMMAD / ZAEEM / HAFIZ	
Position : GO / JFC	

Please state any corrective actions and spare used.	

Corrective Action Completion	
Date :	Signature:
Name :	
Position :	



**Equipment Maintenance
Checklist 1**

Equipment type : Fluid Storage Tank	
Location : OPEN YARD 70	
Equipment number : DE-V-005	
Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
Labelling	
<input checked="" type="checkbox"/>	MGW and SWL in place
<input checked="" type="checkbox"/>	Last annual inspection
Lifting Devices	
<input checked="" type="checkbox"/>	Inspection on shackles and pins, slings and lugs
<input checked="" type="checkbox"/>	MPI on pad eye if necessary
<input checked="" type="checkbox"/>	Mark the inspection date and due date
<input checked="" type="checkbox"/>	Load test is current
<input checked="" type="checkbox"/>	All protection caps and ID tags in place.
Corrosion, Dent, Defects in Weld	
<input checked="" type="checkbox"/>	Check for rust in weld, no leaks
<input checked="" type="checkbox"/>	Check for leakages
<input checked="" type="checkbox"/>	Check all piping, manhole covers, valves
Safety Equipment and Certification	
<input checked="" type="checkbox"/>	Visual inspection of all pad eyes and lifting gear
<input checked="" type="checkbox"/>	Safety guards and rail in working condition

Maintenance Schedule :	
Date : 19/08/2021	
Checklist	
Certifications:	
	Sling condition/ Due on
	MPI due 11/21
	Load Test due 11/21

Please state the equipment readiness in either columns and spare used

Ready

Ready to go

Date : 19/08/2021
 Name : MOHD ALIP MOHAMMAD / ZAEEM / HAFIZ
 Position : EO / JFG

Signature:

Please state any corrective actions and spare used.

Corrective Action Completion

Date :
 Name :
 Position :

Signature:




**Equipment Maintenance
Checklist 1**

Equipment type : Jacking Frame	
Location : OPEN YARD 20	
Equipment number : CM/24/01	
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Checklist
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
Lebelling	
<input checked="" type="checkbox"/>	MGW and SWL in place
<input checked="" type="checkbox"/>	Last annual inspection
Lifting Devices	
<input checked="" type="checkbox"/>	Inspection on shackles and pins,slings and lugs
<input checked="" type="checkbox"/>	MPI on pad eye if necessary
<input checked="" type="checkbox"/>	Mark the inspection date and due date
<input checked="" type="checkbox"/>	Load test is current
<input checked="" type="checkbox"/>	All protection caps and ID tags in place.
Corrosion,Dent,Defects in Weld	
<input checked="" type="checkbox"/>	Check for rust in weld,no leaks
<input checked="" type="checkbox"/>	Check for leakages
<input checked="" type="checkbox"/>	Check all piping,manhole covers,valves.
Safety Equipment and Certification	
<input checked="" type="checkbox"/>	Visual inspection of all pad eyes and lifting gear
<input checked="" type="checkbox"/>	Safety guards and rail in working condition

Maintenance Schedule :	
Date : 17/08/2021	
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Checklist
Certifications:	
	Sling condition/ Due on 01/2022
	MPI due 03/2022
	Load Test due 03/2022

Please state the equipment readiness in either columns and spare used

Ready	
Date : 17/08/2021	
Name : M. WILDAN / ZAEEM / HAFIL	
Position : JEG	
Signature: 	

Please state any corrective actions and spare used.

Corrective Action Completion	
Date :	Signature:
Name :	
Position :	



**Equipment Maintenance
Checklist 1**

Equipment type : Extension Frame	
Location : OPEN YARD 20	
Equipment number : CN/EF/01	
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Checklist
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
Labelling	
<input checked="" type="checkbox"/>	MGW and SWL in place
<input checked="" type="checkbox"/>	Last annual inspection
Lifting Devices	
<input checked="" type="checkbox"/>	Inspection on shackles and pins, slings and lugs
<input checked="" type="checkbox"/>	MPI on pad eye if necessary
<input checked="" type="checkbox"/>	Mark the inspection date and due date
<input checked="" type="checkbox"/>	Load test is current
<input checked="" type="checkbox"/>	All protection caps and ID tags in place.
Corrosion, Dent, Defects in Weld	
<input checked="" type="checkbox"/>	Check for rust in weld, no leaks
Safety Equipment and Certification	
<input checked="" type="checkbox"/>	Visual inspection of all pad eyes and lifting gear
<input checked="" type="checkbox"/>	Safety guards and rail in working condition

Maintenance Schedule :	
Date : 17/08/2021	
<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Checklist
Certifications:	
	Sling condition/ Due on _____
	MPI due <u>03/22</u>
	Load Test due <u>03/22</u>

Please state the equipment readiness in either columns and spare used

Ready

Date : 17/08/2021
 Name : M. Wisan / ZAEEM / HAFIZ
 Position : JS / JEE

Signature: 

Please state any corrective actions and spare used.

Corrective Action Completion

Date :
 Name :
 Position :

Signature:



Equipment Maintenance Checklist 1

Equipment type : CTU N2 Tank	
Location : OPEN YARD 70	
Equipment number : CU/NT/04	
Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid and tank condition - visually check for any damage
<input checked="" type="checkbox"/>	Check tank certifications validity
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
<input checked="" type="checkbox"/>	Drip pan condition
Vaporizer Coil:	
<input checked="" type="checkbox"/>	Fins, pipework and fittings - Check for any damage
<input checked="" type="checkbox"/>	Pressure up tank to check for leaks
Flow lines, Strainers & Seals:	
<input checked="" type="checkbox"/>	Pipework - Visually check for damages/leaks
<input checked="" type="checkbox"/>	Check suction strainer for leaks
<input checked="" type="checkbox"/>	Check copper/teflon seal rings
<input checked="" type="checkbox"/>	Caps on suction and discharge lines
Valves:	
<input checked="" type="checkbox"/>	Check handles in good condition
<input checked="" type="checkbox"/>	Valves working properly (open and close)
<input checked="" type="checkbox"/>	Valves properly identified
Pressure Gauges:	
<input checked="" type="checkbox"/>	Physically check gauges condition
<input checked="" type="checkbox"/>	Check gauges certification validity
<input checked="" type="checkbox"/>	All gauges function properly
<input checked="" type="checkbox"/>	Liquid level gauge working properly
Pressure Relief Valves:	
<input checked="" type="checkbox"/>	Verify PRV test date and correct setting
<input checked="" type="checkbox"/>	Test the operation of PRV
<input checked="" type="checkbox"/>	Check PRV not frozen with ice
<input checked="" type="checkbox"/>	Check PRV suction and discharge lines condition
<input checked="" type="checkbox"/>	Confirm road relief valve open during transportation

Maintenance Schedule :	
Date : 18/08/2021	
Checklist	
Cryogenic Hoses:	
<input checked="" type="checkbox"/>	Physically check hoses for leaks or damages
<input checked="" type="checkbox"/>	Check the unions (F&M) condition
<input checked="" type="checkbox"/>	Check seal rings in place
Certifications:	
	Sling condition/ Due on 09/21
	MPI due 03/22
	Load Test due 02/22

Please state the equipment readiness in either columns and spare used

Ready
- unit ready for next job

Date : 18/08/2021
Name : ZIYAN / ZABEN / HAFIZ
Position : G EO / S FE

Signature:

Please state any corrective actions and spare used.

Corrective Action Completion

Date :
Name :
Position :

Signature:



**Equipment Maintenance
Checklist 1**

Equipment type : CTU N2 Tank	
Location : OPEN YARD 70	
Equipment number : 14/N7/03	
Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid and tank condition - visually check for any damage
<input checked="" type="checkbox"/>	Check tank certifications validity
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
<input checked="" type="checkbox"/>	Drip pan condition
Vaporizer Coil:	
<input checked="" type="checkbox"/>	Fins, pipework and fittings - Check for any damage
<input checked="" type="checkbox"/>	Pressure up tank to check for leaks
Flow lines, Strainers & Seals:	
<input checked="" type="checkbox"/>	Pipework - Visually check for damages/leaks
<input checked="" type="checkbox"/>	Check suction strainer for leaks
<input checked="" type="checkbox"/>	Check copper/teflon seal rings
<input checked="" type="checkbox"/>	Caps on suction and discharge lines
Valves:	
<input checked="" type="checkbox"/>	Check handles in good condition
<input checked="" type="checkbox"/>	Valves working properly (open and close)
<input checked="" type="checkbox"/>	Valves properly identified
Pressure Gauges:	
<input checked="" type="checkbox"/>	Physically check gauges condition
<input checked="" type="checkbox"/>	Check gauges certification validity
<input checked="" type="checkbox"/>	All gauges function properly
<input checked="" type="checkbox"/>	Liquid level gauge working properly
Pressure Relief Valves:	
<input checked="" type="checkbox"/>	Verify PRV test date and correct setting
<input checked="" type="checkbox"/>	Test the operation of PRV
<input checked="" type="checkbox"/>	Check PRV not frozen with ice
<input checked="" type="checkbox"/>	Check PRV suction and discharge lines condition
<input checked="" type="checkbox"/>	Confirm road relief valve open during transportation

Maintenance Schedule :	
Date : 18/08/2021	
Checklist	
Cryogenic Hoses:	
<input checked="" type="checkbox"/>	Physically check hoses for leaks or damages
<input checked="" type="checkbox"/>	Check the unions (F&M) condition
<input checked="" type="checkbox"/>	Check seal rings in place
Certifications:	
	Sling condition/ Due on 09/21
	MPI due 03/22
	Load Test due 03/22

Please state the equipment readiness in either columns and spare used

Ready	
- Unit ready for heat job	

Date : 18/8/2021	Signature:
Name : ZIYAN / ZAEEM / HAFIZ	
Position : GEB / JFE	

Please state any corrective actions and spare used

Corrective Action Completion

Date :	Signature:
Name :	
Position :	



**Equipment Maintenance
Checklist 1**

Equipment type : CTU N2 Tank	
Location : OPEN YARD 20	
Equipment number : CU/N1/02	
Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid and tank condition - visually check for any damage
<input checked="" type="checkbox"/>	Check tank certifications validity
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
<input checked="" type="checkbox"/>	Drip pan condition
Vaporizer Coil:	
<input checked="" type="checkbox"/>	Fins, pipework and fittings - Check for any damage
<input checked="" type="checkbox"/>	Pressure up tank to check for leaks
Flow lines, Strainers & Seals:	
<input checked="" type="checkbox"/>	Pipework - Visually check for damages/leaks
<input checked="" type="checkbox"/>	Check suction strainer for leaks
<input checked="" type="checkbox"/>	Check copper/teflon seal rings
<input checked="" type="checkbox"/>	Caps on suction and discharge lines
Valves:	
<input checked="" type="checkbox"/>	Check handles in good condition
<input checked="" type="checkbox"/>	Valves working properly (open and close)
<input checked="" type="checkbox"/>	Valves properly identified
Pressure Gauges:	
<input checked="" type="checkbox"/>	Physically check gauges condition
<input checked="" type="checkbox"/>	Check gauges certification validity
<input checked="" type="checkbox"/>	All gauges function properly
<input checked="" type="checkbox"/>	Liquid level gauge working properly
Pressure Relief Valves:	
<input checked="" type="checkbox"/>	Verify PRV test date and correct setting
<input checked="" type="checkbox"/>	Test the operation of PRV
<input checked="" type="checkbox"/>	Check PRV not frozen with ice
<input checked="" type="checkbox"/>	Check PRV suction and discharge lines condition
<input checked="" type="checkbox"/>	Confirm road relief valve open during transportation

Maintenance Schedule :	
Date : 18/08/2021	
Checklist	
Cryogenic Hoses:	
<input checked="" type="checkbox"/>	Physically check hoses for leaks or damages
<input checked="" type="checkbox"/>	Check the unions (F&M) condition
<input checked="" type="checkbox"/>	Check seal rings in place
Certifications:	
	Sling condition/ Due on 09/21
	MPI due 03/22
	Load Test due 03/22

Please state the equipment readiness in either columns and spare used

Ready

- Unit ready

Date : 18/8/2021
Name : Jaleel / MAAEEM / HAFIZ
Position : GEO / JEG

Signature:

Please state any corrective actions and spare used.

Corrective Action Completion

Date :
Name :
Position :

Signature:



**Equipment Maintenance
Checklist 1**

Equipment type : CTU N2 Tank	
Location : OPEN YARD 20	
Equipment number : CU/NT/01	
Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid and tank condition - visually check for any damage
<input checked="" type="checkbox"/>	Check tank certifications validity
<input checked="" type="checkbox"/>	Walkway/Ladders - check for any damage
<input checked="" type="checkbox"/>	Drip pan condition
Vaporizer Coil:	
<input checked="" type="checkbox"/>	Fins, pipework and fittings - Check for any damage
<input checked="" type="checkbox"/>	Pressure up tank to check for leaks
Flow lines, Strainers & Seals:	
<input checked="" type="checkbox"/>	Pipework - Visually check for damages/leaks
<input checked="" type="checkbox"/>	Check suction strainer for leaks
<input checked="" type="checkbox"/>	Check copper/teflon seal rings
<input checked="" type="checkbox"/>	Caps on suction and discharge lines
Valves:	
<input checked="" type="checkbox"/>	Check handles in good condition
<input checked="" type="checkbox"/>	Valves working properly (open and close)
<input checked="" type="checkbox"/>	Valves properly identified
Pressure Gauges:	
<input checked="" type="checkbox"/>	Physically check gauges condition
<input checked="" type="checkbox"/>	Check gauges certification validity
<input checked="" type="checkbox"/>	All gauges function properly
<input checked="" type="checkbox"/>	Liquid level gauge working properly
Pressure Relief Valves:	
<input checked="" type="checkbox"/>	Verify PRV test date and correct setting
<input checked="" type="checkbox"/>	Test the operation of PRV
<input checked="" type="checkbox"/>	Check PRV not frozen with ice
<input checked="" type="checkbox"/>	Check PRV suction and discharge lines condition
<input checked="" type="checkbox"/>	Confirm road relief valve open during transportation

Maintenance Schedule :	
Date : 18/08/2021	
Checklist	
Cryogenic Hoses:	
<input checked="" type="checkbox"/>	Physically check hoses for leaks or damages
<input checked="" type="checkbox"/>	Check the unions (F&M) condition
<input checked="" type="checkbox"/>	Check seal rings in place
Certifications:	
	Sling condition/ Due on 09/21
	MPI due 03/22
	Load Test due 03/22

Please state the equipment readiness in either columns and spare used

Ready

- unit ready for next job

Date : 18/8/2021
Name : Delani / ZAEEM / HAFIZ
Position : GEO / JFC

Signature:

Please state any corrective actions and spare used.

Corrective Action Completion

Date :
Name :
Position :

Signature:



**Equipment Maintenance
Checklist 1**

Equipment type : Nitrogen Converter	
Location : YADD 20	
Equipment number : 014 NOV 01	
Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit appearance good and clean
<input checked="" type="checkbox"/>	Verify that all earth/ground cables are in place, well connected
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Fire extinguisher is present and certified
Cooling System:	
<input checked="" type="checkbox"/>	Coolant level & condition
<input checked="" type="checkbox"/>	Check visible leaks
<input checked="" type="checkbox"/>	Radiator hose & clamp condition
<input checked="" type="checkbox"/>	Check fan belt tension & fan condition
Engine:	
<input checked="" type="checkbox"/>	Check engine oil level(SAE 15w-40) not be milky or too dark
<input checked="" type="checkbox"/>	Check any general leaks on all filter, hoses, and connectors.
<input checked="" type="checkbox"/>	Check fan, hub, fanbelt Condition/ Tension
<input checked="" type="checkbox"/>	Check Battery cable connectors
<input checked="" type="checkbox"/>	Check condition of engine hose's
<input checked="" type="checkbox"/>	Check for rusted part- repair if required
<input checked="" type="checkbox"/>	Check the crankcase vent system for excessive blow by
Air Cleaner:	
<input checked="" type="checkbox"/>	Air filter condition-check the element for water or soot and clean as required
Controls / Instrumentation:	
<input checked="" type="checkbox"/>	Normal kill and emergency kill tested
<input checked="" type="checkbox"/>	Check all controls in good condition
<input checked="" type="checkbox"/>	Check all gauges are in good condition and working
<input checked="" type="checkbox"/>	Check (Rate+RPM) and (Pressure+OPS) condition
<input checked="" type="checkbox"/>	Check RPM, LN2 and GN2 discharge pressure
<input checked="" type="checkbox"/>	OPSD tested
Exhaust System:	
<input checked="" type="checkbox"/>	Pipework - check for any leak or damage
<input checked="" type="checkbox"/>	Condition/Operation of rain cap
<input checked="" type="checkbox"/>	Condition of exhaust wrap are in place and in good condition
Gearbox, PTO & Drivelines:	
<input checked="" type="checkbox"/>	Sight glass shows in full (SAE 90)
<input checked="" type="checkbox"/>	Start & idle engine(5- Min) recheck oil level
<input checked="" type="checkbox"/>	Listen for excessive noise at PTO
<input checked="" type="checkbox"/>	Check hoses, connections and seals condition
<input checked="" type="checkbox"/>	Check all bearings and U-joint grease points
Hydraulic System:	
<input checked="" type="checkbox"/>	Check Hyd. Hoses/valve/connections undamage and clean
<input checked="" type="checkbox"/>	Hyd.tank - drain any water
<input checked="" type="checkbox"/>	Check hyd. oil level (2" from top) (Tellus 46)
<input checked="" type="checkbox"/>	Check hyd. gauges
<input checked="" type="checkbox"/>	Check condition of fittings & couplings
Fuel System:	
<input checked="" type="checkbox"/>	Check for any water contamination in the fuel filter sight bowl
<input checked="" type="checkbox"/>	Fuel tank - drain any water
<input checked="" type="checkbox"/>	Check for leaks on fuel lines, connections, and hoses
<input checked="" type="checkbox"/>	Fuel filter - check condition
<input checked="" type="checkbox"/>	Fill up the diesel tank to 90%

Running Hours : 1657	
Maintenance Schedule :	
Date : 18/8/2021	
Checklist	
Electrical System:	
<input checked="" type="checkbox"/>	Check batteries condition and voltage
<input checked="" type="checkbox"/>	Check alternator belt- 1/2-in to 3/4-in yield and wiring
<input checked="" type="checkbox"/>	Check starter condition and wiring
<input checked="" type="checkbox"/>	Cables/connectors condition
Air System:	
<input checked="" type="checkbox"/>	Check visible leaks, ensure air up 90-110psi-check that gauge are GOOD
<input checked="" type="checkbox"/>	Gauges condition
<input checked="" type="checkbox"/>	Air reservoir /tanks - drain any water until that are clean
<input checked="" type="checkbox"/>	Air hose,connections,piping,valves and actuators condition
<input checked="" type="checkbox"/>	All control working properly
Electronic Recording & Monitoring Devices:	
<input checked="" type="checkbox"/>	Check all sensors condition
<input checked="" type="checkbox"/>	Check pump controls, rate and pressure devices.
<input checked="" type="checkbox"/>	Cables/connectors condition
<input checked="" type="checkbox"/>	Acquisition - check communication with software/hardware
Zone II System:	
<input checked="" type="checkbox"/>	Flame traps - check cleanliness
<input checked="" type="checkbox"/>	Back pressure gauges - check condition
<input checked="" type="checkbox"/>	Spark arrestor - check condition
N2 Vaporizer & Heat Exchanger:	
<input checked="" type="checkbox"/>	Check for leaks or damages
<input checked="" type="checkbox"/>	Check piping for leaks or damages
Booster Pump:	
<input checked="" type="checkbox"/>	Check C-Pump operation and condition
<input checked="" type="checkbox"/>	Check hoses, connections and seals condition
<input checked="" type="checkbox"/>	Suction strainer - check for leaks
<input checked="" type="checkbox"/>	Proximity switch & cable in good condition
<input checked="" type="checkbox"/>	Grease the bearings
Cold End & Warm End:	
<input checked="" type="checkbox"/>	Check for leaks or damages
<input checked="" type="checkbox"/>	Check operation - frost uniformly during cool down
<input checked="" type="checkbox"/>	Check lubrication level - when engine at idle
System Pressure:	
	Fuel pressure@idle speed _____ psi
	Fuel pressure@1800 RPM _____ psi
	Oil pressure @ cold start 70 psi
	Oil pressure @ 180deg.F 50 psi
Certifications:	
	Sling condition/ Due on 09/21
	MPI due 03/22
	Load Test due 03/22

Please state the equipment readiness in either columns and spare used

Ready

- unit ready for next job.

Date : 18/8/2021
Name : Dalani / ZACEM / HAFR
Position : GED / JFG

Signature:

Please state any corrective actions and spare used.

Corrective Action Completion

Date :
Name :
Position :

Signature:



Equipment Maintenance Checklist 1

Equipment type : DID2000 Reel Frame	
Location : OPEN YARD 20	
Equipment number : 024/DID F/01	
<input type="checkbox"/> <input type="checkbox"/>	Checklist
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Physically check frames and skid for damages
<input checked="" type="checkbox"/>	Check walkway/ladder for any damages
<input checked="" type="checkbox"/>	Loads secured
Swivel and Fluid Manifold:	
<input checked="" type="checkbox"/>	Manifold complete and secured
<input checked="" type="checkbox"/>	Grease plug valves and chiksans
<input checked="" type="checkbox"/>	Swivel bolts in place
<input checked="" type="checkbox"/>	Pressure test as required
Reel Drive System:	
<input checked="" type="checkbox"/>	Check drive chains condition and lubricate accordingly
<input checked="" type="checkbox"/>	Check chain case oil level
<input checked="" type="checkbox"/>	Grease main bearing accordingly
<input checked="" type="checkbox"/>	Check hydraulic hoses and connections for leaks/damages
Reel Brake System:	
<input checked="" type="checkbox"/>	Check for any damages
<input checked="" type="checkbox"/>	Test reel brake and drive system
<input checked="" type="checkbox"/>	Check drive chain tension
Levelwind:	
<input checked="" type="checkbox"/>	Test override clutch system
<input checked="" type="checkbox"/>	Check chains and leadscrew condition and operation
<input checked="" type="checkbox"/>	Visual check leadscrew yoke & leadcrew
<input checked="" type="checkbox"/>	Correct levelwind sprocket for tubing
<input checked="" type="checkbox"/>	Check levelwind trolley condition
<input checked="" type="checkbox"/>	Function test levelwind arm (up/down)
Counter:	
<input checked="" type="checkbox"/>	Check counter wheel condition
<input checked="" type="checkbox"/>	Function test the counter
<input checked="" type="checkbox"/>	Counter assembly rollers correct for size tubing
Tubing Length Monitor:	
<input type="checkbox"/>	Check its condition
<input type="checkbox"/>	Check sensor mount condition
<input type="checkbox"/>	Check guides and rollers condition
<input type="checkbox"/>	Check the connections and cables condition

Maintenance Schedule :	
Date : 17/08/2021	
<input type="checkbox"/> <input type="checkbox"/>	Checklist
Lubrication:	
<input type="checkbox"/>	Check inhibitor and lubrication tank level
<input type="checkbox"/>	Grease all lubrication points
Pressure Test:	
<input type="checkbox"/>	Reel
<input type="checkbox"/>	Manifold
Certifications:	
<input type="checkbox"/>	Sling condition/ Due on 01/22
<input type="checkbox"/>	MPI due 03/22
<input type="checkbox"/>	Load Test due 03/22

Please state the equipment readiness in either columns and spare used

Ready	
Date : 17/08/2021	Signature:
Name : TAUFIC / ZAEEM / HAFIZ	
Position : #C / JFE	

Please state any corrective actions and spare used.

Corrective Action Completion	
Date :	Signature:
Name :	
Position :	



Equipment Maintenance Checklist 1

Equipment type : CTU Control Cabin	
Location : OPEN YARD	
Equipment number : CTU/CC/01	
☺ ☹ Checklist	
Appearance & Safety Equipment:	
<input checked="" type="checkbox"/>	Ensure unit is clean
<input checked="" type="checkbox"/>	Skid condition - visually check for any damage
<input checked="" type="checkbox"/>	Fire extinguisher is present and certified
Cabin - General:	
<input checked="" type="checkbox"/>	Inspect hoses for excessive wear
<input checked="" type="checkbox"/>	Check all attaching hardware for tightness
<input checked="" type="checkbox"/>	Check under panels for sign of leaking hoses
<input checked="" type="checkbox"/>	Check hoses for signs of weeping
<input checked="" type="checkbox"/>	Inspect cabling and fittings for excessive wear/damage
<input checked="" type="checkbox"/>	Check horn operates
<input checked="" type="checkbox"/>	Check internal and external lighting is operational
<input checked="" type="checkbox"/>	Lighting system all in working condition
<input checked="" type="checkbox"/>	Windscreen
<input checked="" type="checkbox"/>	Airconditioning unit in working condition
<input checked="" type="checkbox"/>	Frame locking pins
<input checked="" type="checkbox"/>	Clean Cabin Interior
<input checked="" type="checkbox"/>	Secure all drain plug
<input checked="" type="checkbox"/>	Roof in good condition
<input checked="" type="checkbox"/>	Electronics & electrical system in good condition
<input checked="" type="checkbox"/>	Computers and monitor in working condition
<input checked="" type="checkbox"/>	Condition/Operation of rain cap
<input checked="" type="checkbox"/>	Condition of exhaust wrap
Controls:	
<input checked="" type="checkbox"/>	Emergency kill in working condition
<input checked="" type="checkbox"/>	Engine shut-down in working condition
<input checked="" type="checkbox"/>	Manual stripper control in working condition
<input checked="" type="checkbox"/>	Manual BOP control in working condition
<input checked="" type="checkbox"/>	Chain tension and traction in working condition
<input checked="" type="checkbox"/>	Injector chains lube valve in working condition
<input checked="" type="checkbox"/>	Injector Head in workig conditon
<input checked="" type="checkbox"/>	Levelwind override clutch and raise/lower condition
<input checked="" type="checkbox"/>	Reel drive in working condition
<input checked="" type="checkbox"/>	Reel brake in working condition

Maintenance Schedule : ETC /	
Date : 18/08/2021	
☺ ☹ Checklist	
Recording & Monitoring Devices:	
<input checked="" type="checkbox"/>	Check all sensors condition
<input checked="" type="checkbox"/>	Wellhead and circulating pressure gauge
<input checked="" type="checkbox"/>	Cables/connectors condition
<input checked="" type="checkbox"/>	Acquisition - check communication with software/hardware
<input checked="" type="checkbox"/>	Weight Indicator in working condition
<input checked="" type="checkbox"/>	Fucntion test CoilSTOP
Certifications:	
	Sling condition/ Due on 01/22
	MPI due 03/22
	Load Test due 03/22

Please state the equipment readiness in either columns and spare used

Ready	

Date : 18/08/21 Name : TAUFIQ / ZAEEM / HAFIZ Position : +S / JFC	Signature:
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Please state any corrective actions and spare used.

Corrective Action Completion	
Date :	Signature:
Name :	
Position :	