

DIMENSION BID

COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

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

Name	MOHAMAD AIDIL SAFWAN BIN KASHIF	COB Date	17/8/2023
Position	EQUIPMENT OPERATOR TRAINEE	RTB Date	20/9/2023
Client	PETRONAS CARIGALI	Location	ANGSI
Platform	ANGSI ANDRA	Well	A-25
Assessed By	Name: JOHARI BIN JOHOR Position: COILED TUBING SUPERVISOR		

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 meet expectations - performance failed to meet expectations in one or more essential areas of responsibility

Assessment Criteria	Rating (Please ✓ where appropriate)								
	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
	10	9	8	7	6	5	4	3	2

Safety Awareness (20%)

- a. Usage of Personal Protective Equipment
- b. Participation in UAU
- 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

					✓				
						✓			
					✓				
						✓			
				✓					
				✓					
				✓					
				✓					
			✓						
			✓						
			✓						

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

Good team work and follow procedure as per job program.

Assessed By (Supervisor)	<i>[Signature]</i>
Name	JOHARI BIN JOHOR
Date	21/9/2023

DIMENSION BID

COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

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

Type of Task	Tasks Performed	Assessor Comment																					
1. Pre-Job Preparation	1. Attend toolbox and morning meeting with CSR. 2. Prepare EPTW before do the job.	Done																					
												Rating (by SUPERVISOR)			STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2													
2. Surface Equipment Rig-up	1. Assist crew rig up surface line from SPO1 to CT reel and kit Port line to combi'r	Done																					
												Rating (by SUPERVISOR)			STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2													
3. Tools / Equipment Preparation	1. TOP up diesel on equipment	Done																					
												Rating (by Operator)			STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2													
4. Equipment	4.1 Batch Mixer 1. Assist BMX operator mixing 15% HCL. 2. Assist BMX operator mixing Neutralization fluid (soda ash) 3. Learn how to operate BMX and troubleshoot.	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			<input checked="" type="checkbox"/>															
					Standalone			<input type="checkbox"/>															

DIMENSION BID

COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

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

Type of Task	Tasks Performed	Assessor Comment																					
4.2 Pump Unit	1- Assist rig up Pumping Surface line. 2- Assist pump man open/close plug valve.	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	<input checked="" type="checkbox"/>				
						Standalone	<input type="checkbox"/>																
4.3 Nitrogen Pump unit & Nitrogen Tank	1. Assist / Lear transfer Nitrogen	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	<input checked="" type="checkbox"/>				
						Standalone	<input type="checkbox"/>																
4.4 Power Pack																							
												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	<input type="checkbox"/>				
						Standalone	<input type="checkbox"/>																
4.5 Control Cabin																							
												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	<input type="checkbox"/>				
						Standalone	<input type="checkbox"/>																

DIMENSION BID

COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

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

Type of Task	Tasks Performed	Assessor Comment																			
4.6 CT Reel	1. ASSIST CT operator spool in or out coil while running the job. 2. Lubricant CT string with corrosion	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																					
												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																					
												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	1. ASSIST crew make up BHA tools	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					

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

Revision No.: 01

Effective Date: 21/08/2023

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

CONTROLLED COPY