

## SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK

(PART 1: To be completed by Assessor)

Name	Christopher Mathew Anak Kipli	COB Date	21.08.2023
Position	Slickline Assistant 3	RTB Date	18.09.2023
Client	TOSS	Location	M3DR-A
Platform	M3DR-A	Well	107
Assessed By	Macdonald Ngilo	Position: Slickline Operator	

### RATING LEGEND:

<b>STRONG</b>	Performance consistently exceeded expectations in all essential areas of responsibility, and the quality of work overall was excellent
<b>ADEQUATE</b>	Performance consistently met expectations in all areas of responsibility, at times possibly exceeding expectations, and the quality of work overall was very good
<b>IMPROVEMENT NEEDED</b>	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)								
	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 ACT
- c. Understanding of PTW System
- d. Worksite House Keeping

X									
X									
X									
X									

### 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

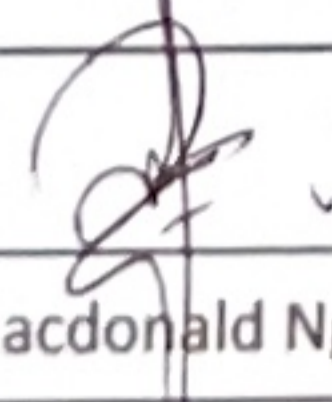
	X								
	X								
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### REMARKS/COMMENTS/FEEDBACK ON PERFORMANCE OR AREAS OF IMPROVEMENT:

Able to work smatr and give suggestion to crew member.

Able to work by himself without constant instruction and can work independently.

Suggest promote to be a senior assistant.

Assessed By [Operator]	
Name	Macdonald Ngilo
Date	17.09.2023

# DIMENSION BID

## 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	Prepare PTW before start operation. New permit submission to register. Preparing PTW attachment such as (Job Hazard Analysis, . Get sign from HSE, DSV, OIM. Conduct Tool box prior to start the slickline operation. Remind all crew aware about hazard on worksite and using full PPE during working. Safety sharing among crew onsite.									
		10	9	8	7	6	5	4	3	2
2. Surface Equipment Rig-up	PCE configuration 11.5" - 4 x 7" Ball Valve + 11.5"-4 x 8ft Lubricator + 11.5"-4 x 7" PIT + 11.5"-4 X 7" Quick Test Sub + 11.5 - 4 to 8.38" - 4 CROSSOVER + 8.3/8"- 4 x 8ft 2 section Lubricator +8.3/8"- 4 to 5.75"- 4 CROSSOVER + 5.75"-4 SBX..									
		10	9	8	7	6	5	4	3	2
3. Tools / Equipment Preparation	Prepare tool strings. 1.7/8" Rope Socket + 1.7/8" Swivel Joint + 2.5" x 5ft Stem + 1.7/8" 20 Stroke Link Jar + 1.7/8" QLS Male x 2.5" QLS Female. Prepare Tools. 7" Wire Scratcher, 6.550" CRQ Running Tool, 7" GS Pulling Tool									
		10	9	8	7	6	5	4	3	2
4. Equipment Problem Troubleshooting <i>[Please state type of equipment and describe troubleshooting job performed]</i>										
		10	9	8	7	6	5	4	3	2
5. Downhole Tools Servicing/Redressing/Maintenance	Make up 1.7/8" Rope Socket . Preparing, Redress, Pinning 6.550" CRQ Running Tool Prepare and pinning 7" GS Pulling tool retrieve/set Test Dart and retrieve 6.550" CRQ Tubing Hanger Plug.									
		10	9	8	7	6	5	4	3	2

Type of Task	Tasks Performed	Assessor Comment									
6. Tools Inventory & Reporting	To check package on site based on inventory list.										
											Rating (by Operator)
		10	9	8	7	6	5	4	3	2	

7. Equipment Operation	[Operator to rate TSA / SA / SSA competency in operating the equipment]	Assessor Comment									
		Rating (by Operator)			STRONG			ADEQUATE			IMPROVEMENT NEEDED
		10	9	8	7	6	5	4	3	2	
	Power Pack										
	Air Compressor										
	GenSet										
	Control Panel										
	Test Pump										
	Pressure Control Equipment										
	Mast										
	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]											

**EXECUTE THE WELL SERVICES OPERATION (IF ANY)**  
(Operating Winch)

Date / Location / Well No. / Job Type	Activity Summary	Toolstring Configuration											
		Rating (by Operator)			STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2			
Comments by Operator [please specify competency gaps / area of improvement]													

