

DIMENSION BID

Dimension Bid Competency Assurance Program

ASSESSMENT CHECKLIST

Unit: CAP 1.2 PLAN FOR WELL SERVICES OPERATIONS

Element: CAP 1.2.1 Plan Operational Requirements

PC	Description of Performance Criteria	Description of Evidence	Source of evidence			Competence	Remarks
			O/I	SD	Q/A		
a	Operation programs are prepared in accordance with objective plan.	Examine evidence on operation program (work action plan) against the Well Services objective programs. Check via questioning (oral/written) for under-pinning knowledge on the Well Services objective programs (include related procedures)	✓			C	
b	Difficulties in carrying out the operations are clarified with the relevant personnel.	Check via questioning (oral/written) for candidate's understanding on the process to go about an unclear objective programs. (Third Party feedback will be helpful and supportive i.e. from immediate supervisors, OIM, WS)	✓			C	

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Element: CAP 1.2.1 Plan Operational Requirements

PC	Description of Performance Criteria	Description of Evidence	Source of evidence			Competence	Remarks
			O/I	SD	Q/A	C / NYC	
c	Permit to Work is obtained in accordance with organisational and statutory requirements.	Confirm via the evidence (e.g. PTW forms) submitted. Check via questioning (oral/written), the under-pinning knowledge on the process of applying a PTW. Check understanding on PTW procedures.	✓			C	
d	Third party utilities are verified in accordance with operational and statutory requirements.	Check evidence on valid equipment passport.	✓			C	
e	Required quantities and types of materials and equipment are sourced timely.	Check via questioning (oral/written) for candidate's understanding on the objective programs. Tools and materials required for a particular job. To provide evidence on materials and equipment checklist (materials requisition, inventory checklist and equipment checklist).	✓			C	
f	Errors, omissions, and shortages of equipment are identified and appropriate remedial action taken.	Check candidate's under-pinning knowledge and awareness via questioning (oral/written).	✓			C	

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Legend:

Source of Evidence:

O/I	Observation / Interview
C	Competent

Supporting Document

SD	Supporting Document
NYC	Not Yet Competent

Written Questions & Answers

Q/A	Written Questions & Answers
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OVERALL SCORE	STRONG			ADEQUATE			IMPROVEMENT NEEDED			
	10	9	8	7	6	5	4	3	2	1
			8							

Assessed by:

Sazali Methky

(Name)

Signature

Date

Agreed by:

(TSO)

(Name)

Signature

Date

Verified by:

(HOD)

Afiza Ammar

(Name)

Signature

20/3/25

Date

