

# DIMENSION BID

## SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK

(PART 1: To be completed by Assessor)

Name	Ag Ku Mohd Amrie Bin Ag Khamis	COB Date	21-Nov-23
Position	Slickline Assistant 2	RTB Date	12-Dec-23
Client	SEAH	Location	St-Furious
Platform	SFJT-E	Well	SF-506, SF-514, SF-513, SF-512
Assessed By	Name : Yuzie Yussof Position : Slickline Operator		

### 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	
<b>Safety Awareness (20%)</b>	✓								
a. Usage of Personal Protective Equipment	✓								
b. Participation in ACT	✓								
c. Understanding of PTW System		✓							
d. Worksite House Keeping	✓								
<b>Work Performance (20%)</b>									
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:

KEEP IT UP

Assessed By [Operator]	Slickline Operator
Name	Yuzie Yussof
Date	11/12/2023

# DIMENSION BID

## SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK

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

Type of Task	Tasks Performed			Assessor Comment									
<b>1. Pre-Job Preparation</b>	A) PERFORM PRE CHECKLIST ON ALL EQUIPMENT B) TO CHECK ALL HOSES WAS TIGHT AND SECURE C) ENSURE ALL TOOLS BEING PREPARED PRIOR TO JOB BEING PERFORM D) ENSURE ALL PRESSURE HOSE FROM PP TO RSU BEING SECURE WITH WEB CHECK E) BARRICADE WORKSITE & WELLHEAD AREA BEFORE PERFORME RIGGING UP F) CHECK WELL CONDITION TO KNOW IF THERES POTENTIAL PASSING ON VALVE G) WALK THE LINE BEFORE START RIGGING UP AND IDENTIFY ANY HAZARD H) TOOLBOX MEETING BEFORE PROCEED TO JOB												
	<b>Rating (by Operator)</b> <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td>STRONG</td> <td>10</td> <td>9</td> <td>8</td> </tr> </table>			STRONG	10	9	8	<b>ADEQUATE</b>		<b>IMPROVEMENT NEEDED</b>			
STRONG	10	9	8										
	7	6	5	4	3	2							
<b>2. Surface Equipment Rig-up</b>	A) MAKE UP PCE B) PUT GREASE ON ALL LUB CONNECTION BEFORE CONNECTING IT C) CHECK O-RING BEFORE MAKE UP THE LUBRICATOR D) DISCARD WIRE IF NEEDED E) CHECK ANY DAMAGE ON ALL LUB 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 SLING												
	<b>Rating (by Operator)</b> <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td>STRONG</td> <td>10</td> <td>9</td> <td>8</td> </tr> </table>			STRONG	10	9	8	<b>ADEQUATE</b>		<b>IMPROVEMENT NEEDED</b>			
STRONG	10	9	8										
	7	6	5	4	3	2							
<b>3. Tools / Equipment Preparation</b>	A) SERVICE & FUNCTION TEST TOOL BEFORE USING IT B) PINNING QXE RUNNING 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 F) INVENTORY TOOLS IF NECESSARY												
	<b>Rating (by Operator)</b> <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td>STRONG</td> <td>10</td> <td>9</td> <td>8</td> </tr> </table>			STRONG	10	9	8	<b>ADEQUATE</b>		<b>IMPROVEMENT NEEDED</b>			
STRONG	10	9	8										
	7	6	5	4	3	2							
<b>4. Equipment Problem Troubleshooting</b> <i>[Please state type of equipment and describe troubleshooting job performed]</i>	N/A												
	<b>Rating (by Operator)</b> <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td>STRONG</td> <td>10</td> <td>9</td> <td>8</td> </tr> </table>			STRONG	10	9	8	<b>ADEQUATE</b>		<b>IMPROVEMENT NEEDED</b>			
STRONG	10	9	8										
	7	6	5	4	3	2							
<b>5. Downhole Tools Servicing/Redressing/Maintenance</b>	A) SERVICE DHT& FUNCTION TEST B) PINNING & FUNCTION TEST DHT C) MAKE UP TOOLSTRING D) PRPEARE AND CHANGE DAMAGE SPARE PART ON DAMAGE DHT E) CHECK ANY FAULTY ON DHT THAT BEING USED F) ENSURE ALL SHARP EDGES BEING FILE TO PREVENT FROM HAND CUT G) ENSURE ALL THREADED TOOLS BEING SECURE TIGHTLY												
	<b>Rating (by Operator)</b> <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td>STRONG</td> <td>10</td> <td>9</td> <td>8</td> </tr> </table>			STRONG	10	9	8	<b>ADEQUATE</b>		<b>IMPROVEMENT NEEDED</b>			
STRONG	10	9	8										
	7	6	5	4	3	2							

Type of Task	Tasks Performed			Assessor Comment					
<b>6. Tools Inventory &amp; Reporting</b>	A) PRECHECK INVENTORY DOWNHOLE TOOLS EVERY 2 WEEK. B) UPDATE INVENTORY DOWNHOLE TOOL CHECKLIST BORROW AND LEND C) UPDATE AND REPORTING MISSING DOWNHOLE TOOLS.								
	Rating (by Operator)	STRONG			ADEQUATE			IMPROVEMENT NEEDED	
	10	9	8	7	6	5	4	3	2
<b>7. Equipment Operation</b>	[Operator to rate TSA / SA / SSA competency in operating the equipment]								
	Rating (by Operator)	STRONG			ADEQUATE			IMPROVEMENT NEEDED	
Power Pack	10	9	8	7	6	5	4	3	2
Air Compressor									
GenSet									
Control Panel									
Test Pump									
Pressure Control Equipment									
Mast									
Weight & Measuring Devices									
Downhole Tools									
Total									
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
	Comments by Operator [please specify competency gaps / area of improvement]								

Type of Task		Tasks Performed	Assessor Comment
JOB DETAIL:			
DATE	WELL NO.	JOB TYPE	STATUS (COMPLETE / INCOMPLETE)
21-Nov-23	SF-506	RFA LOGGING	Completed
24-Nov-23	SF-514	RFA LOGGING	Completed
29-Nov-23	SF-513	Wax cut, Set plug, ZOC, TCC, SGS	Completed
4-Dec-23	SF-512	Wax cut, GLVC, ZOC, SGS, FGS	Completed

To be completed by verifier (FSM)

## SUMMARY OF OVERALL PERFORMANCE

		Score	
		Weight	Total %
<b>A</b>	<b>Safety Awareness</b>	20	
<b>B</b>	<b>Work Performance</b>	20	
<b>C</b>	<b>Technical Skills</b>		
1.	Pre-Job Preparation	8	
2.	Surface Equipment Rig-up	7	
3.	Tools / Equipment Preparation	8	
4.	Equipment Problem Troubleshooting	9	
5.	Downhole Tools Servicing/Redressing/ Maintenance	6	
6.	Tools Inventory & Reporting	7	
7.	Equipment Operation	7	
<b>D</b>	<b>TOTAL (A+B+C)</b>	60	100