

DIMENSION BID



SLICKLINE SERVICES DEVELOPMENT PLAN
SA II > SA III PROMOTION BOOKLET

FULL NAME:	MUHAMMAD SYAFIQ B. ARIFFIN
JOINED DATE:	5/6/2024
CONFIRMATION DATE:	
REGION:	TERENGGANU
DIVISION:	WMO
CONTROL DATE:	

DIMENSION BID



SLICKLINE SERVICES DEVELOPMENT PLAN

SA II > SA III PROMOTION BOOKLET

SA III Control Process

SA II expectations are set according to your location's requirements, but below you will find some guidelines as minimum requirements to help you succeed in the process.

You may expect to start your SA II control within 12 - 24 months from joining Dimension Bid Sdn. Bhd, depending on your competency development progress. The SA III module is more technical and operations oriented. By this stage a SA III is expected to have serviced most of SLS tools and equipment.

The path for SA II to prepare for SA III control will be:

1 Perform at least:

- i. Sea Offshore Trips (at least 3 different job types) – List of job refer to Para 6.3 a. Slickline Personnel Competency Matrix, items no 40 – 59.
- ii. Conduct 1ea x HSSE SQ Presentation OR 1 HSE Contribution Activity
- iii. Attend 3ea Technical In-house Training
- iv. Submit 1ea UAUC/day while offshore

2 Complete the following paperwork:

- i. SLS-FORM-141: SLS CMS Slickline Assistant II Promotion Booklet
- ii. SLS-FORM-149: SLS CMS Job Track Record
- iii. SLS-FORM-150: Slickline Assistant Workbook (for new hire)
- iv. SLS-FORM-13 : Slickline Assistant Performance Assessment Feedback
- v. Slickline Assistant II Training & Exam Module
- vi. HR-FORM-09 : Performance Appraisal & Development Plan

Note:

- 1 The HSSE presentation doesn't have to be self-made. You can use presentation from supplier or any other sources.
- 2 When preparing for the presentation, please expect questions from your audience. The presentation needs to demonstrate your full understanding in HSSE & SQ
- 3 During the HSSE presentation, you are expected to demonstrate your full understanding and awareness in HSSE & SQ
- 4 Target audiences for the presentation are Slickline Operators or Support Role at your Location. The management will evaluate the presentation and sign-off your control sheet.

Upon completion of the above requirement, please handover the complete package to your FSM who will then evaluate your eligibility for promotion together with OM for Management approval.

dimension bid

SLICKLINE ASSISTANT II EVALUATION CHECKLIST

SLICKLINE SERVICES

SLICKLINE ASSISTANT II DETAILS

FULL NAME

MUHAMMAD SYAIRD B. ARIFFIN

SENIORITY DATE

19/08/2022

REGION

PERENGANU

DIVISION

WMO

UNIT/SECTION

SLC

LOCATION

SEMANAN

CONFIRMATION DATE

Please tick (✓) at the relevant box the Competency Level of the Slickline Assistant II (L1-Awareness, L2-Basic, L3-Skilled, L4-Broad, L5-Full Understanding)

SAFETY	L1	L2	L3	L4	L5	ASSESSED BY	DATE	QUALITY	L1	L2	L3	L4	L5	ASSESSED BY	DATE
DB HSE Policy	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AHMAD	18/11	QMS & ISO knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	HAFZAN	18/11/2024
Risk Assessment and Hazard Identification	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AHMAD	18/11	DB Quality Policy & Objectives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	HAFZAN	18/11/2024
Field Safety and PTW Familiarization	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AHMAD	18/11	DB Slickline Procedure and SOP	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	HAFZAN	18/11/2024

Custodian Name and Position AHMAD 18/11/2024 Custodian Signature/Date HAFZAN 19/11/2024

SERVICE QUALITY	L1	L2	L3	L4	L5	ASSESSED BY	DATE	SERVICE QUALITY	L1	L2	L3	L4	L5	ASSESSED BY	DATE
Knowledge of Slickline Services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11	Slickline Job Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11
Tools and Equipment Handling	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11	Post-job Preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11

Custodian Name and Position ASMAN SULONG - SASO Custodian Signature/Date ASMAN SULONG - SASO -

PERSONAL QUALITY	L1	L2	L3	L4	L5	ASSESSED BY	DATE	PERSONAL QUALITY	L1	L2	L3	L4	L5	ASSESSED BY	DATE
Learning Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11	Field Operations Readiness Status	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11
Time Discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11	Stress Management	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11
Command/Instruction Handling	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11	Communication Skills - Writing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11
Self Confident	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11	Communication Skills - Speaking	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11

Custodian Name and Position ASMAN SULONG - SASO - Custodian Signature/Date ASMAN SULONG - SASO -

MANAGEMENT / ADMINISTRATION	L1	L2	L3	L4	L5	ASSESSED BY	DATE	MANAGEMENT / ADMINISTRATION	L1	L2	L3	L4	L5	ASSESSED BY	DATE
Inventory Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11	Inspection Knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11
Materials Planning	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11	Slickline Job Reporting	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	ASMAN	18/11

Custodian Name and Position ASMAN SULONG - SASO - Custodian Signature/Date ASMAN SULONG - SASO -

MANAGER'S COMMENTS *Specify the candidate main strong points and development areas*

CANDIDATE'S COMMENTS *Add comments about the support you have received from your tutor/location*

RECOMMENDED FOR NEXT POSITION ? YES NO *Remark : If NO, please submit e-mail to FSM and specify details here.*

CANDIDATE'S SIGNATURE	INSTRUCTOR'S SIGNATURE	MANAGER'S SIGNATURE	DATE
	AFIQ AIMAN BIN HASSAN Slickline Manager DIMENSION BID (M) SDN BHD	 AFIQAMMAR BIN ZULKEPLI GENERAL MANAGER DIMENSION BID (M) SDN BHD	

DIMENSION BID

SLICKLINE ASSISTANT II EVALUATION CHECKLIST SLICKLINE SERVICES

SLICKLINE ASSISTANT II DETAILS

FULL NAME

MUHAMMAD SYAFIQ B. ARIFFIN

SENIORITY DATE

19/6/2022

REGION

TERENGGANU

DIVISION

WMO

UNIT/SECTION

SLS

LOCATION

KEMAMAN

CONFIRMATION DATE

✓

TECHNICAL EVALUATION

Please tick (✓) at the relevant box the Competency Level of the Slickline Assistant II
(L1-Awareness, L2-Basic, L3-Skilled, L4-Broad, L5-Full Understanding)

BASIC WIRELINE	L1 L2 L3 L4 L5					PCE	L1 L2 L3 L4 L5				
	Wireline Operation	Well Completion	Down Hole Tool	Wireline Cable	Slickline Service Operation		Well Control Equipment	Control Module Operating	SWCP Operating	Flow Tube	Pressure Test Pump
Wireline Operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Well Completion	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Down Hole Tool	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Wireline Cable	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Slickline Service Operation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Custodian Name and Position	Azman - SLSO					Custodian Name and Position	Rosman / MS				
Custodian Signature/Date	18/11/24.					Custodian Signature/Date	18/11/24.				
OPERATION AND MAINTENANCE						OPERATION AND MAINTENANCE					
	L1	L2	L3	L4	L5		L1	L2	L3	L4	L5
Auxiliary SE (MPI/LT)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Spooling Control System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Slimline Unit/P.Pack/RSU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Engine System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mast and Hoisting System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Hydraulic System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Generator/Air Compressor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Electric & Electronic System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Down Hole Tool L1 & L2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Drive train System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Custodian Name and Position	Rosman / MS					Custodian Name and Position	Rosman / MS				
Custodian Signature/Date	18/11/24.					Custodian Signature/Date	18/11/24.				
Operation						GENERAL					
	L1	L2	L3	L4	L5		L1	L2	L3	L4	L5
Winch Man	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Basic Down Hole Tool Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Rig Up/Down	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pulling Tool Application	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PTW Familiarization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	PTW Familiarization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Custodian Name and Position	Azman - SLSO					Custodian Name and Position	Fairuz Fitri - SLSO				
Custodian Signature/Date	18/11/24.					Custodian Signature/Date	18/11/24.				

DIMENSION BID

INSTRUCTOR'S COMMENTS

Syafiq has met all requirement to be promoted to SA111

CANDIDATE'S COMMENTS

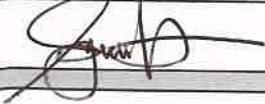
Add comments about the support you have received from your tutor/location

INSTRUCTOR

Recommend Promotion to Next Level?

 Y N**DIVISION MANAGER**

Approve Promotion To Next Level ?

 Y N**CANDIDATE'S SIGNATURE****INSTRUCTOR'S SIGNATURE**

 TSM
AFIQ AIMAN BIN HASSAN
Field Service Manager
DIMENSION BID (M) SDN BHD.

MANAGER'S SIGNATURE

AFIQAMMAR BIN ZULKEPLI
GENERAL MANAGER
DIMENSION BID (M) SDN BHD.

DATE

DIMENSION BID

SLICKLINE ASSISTANT II EVALUATION CHECKLIST SLICKLINE SERVICES

SLICKLINE ASSISTANT II DETAILS

FULL NAME

MUHAMMAD SYAFIQ B. ARIFFIN

SENIORITY DATE

19/06/2022

REGION

TERENGGANU

DIVISION

WMD

UNIT/SECTION

SLS

LOCATION

KEMAMAN

CONFIRMATION DATE

*

SLICKLINE ASSISTANT II CHECKLIST

Done prior to final submission to HR

No Slickline Assistant Package will be processed by the HR if any of the points are missing.

TASK & REPORTS

- 5 x Offshore Trip (Please attach SLS-FORM-149 Job Track Record)
- 1ea x HSE SQ Presentation OR 1 HSE Contribution Activity
- Completed Slickline Assistant II Training & Exam Module
- Attend 3ea x Technical Inhouse Training
- 1 ea UAUC per day (for every offshore trip) and signed by Safety Officer
- Completed Slickline Assistant Performance Assessment Feedback for all jobs performed (refer Job Track Record)
- Completed Performance Appraisal & Development Plan

PAPERWORK

- Slickline Assistant II Evaluation Sheet
- Slickline Assistant II Technical Evaluation Sheet
- Job Tracking Record (Verified by FSM)
- HSE SQ Slide Presentation signed by Safety Officer
- Technical Inhouse Training Attendance
- 1ea UAUC per day and signed by Safety Officer
- SLS-FORM-13 : Slickline Assistant Performance Assessment Feedback
- HR-FORM-09 : Performance Appraisal & Development Plan

VERIFICATION

I hereby verify that the above paperworks and documents above has been checked and confirmed true. I further certify that all information contained herein is true and accurate.

I understand that any falsifying of any document above could result in disciplinary action and being denied access to Slickline Assistant program in future.

PREPARED AND SUBMITTED BY



SIGNATURE

NAME : MUHAMMAD SYAFIQ B. ARIFFIN
POS : SLS ASSISTANT II
DATE : 21/11/24

DIMENSION BID

ENDORSEMENT

All check points listed above have been verified completed by myself or my delegates.

I Deem This Slickline Assistant II Candidate READY to be Promoted to Next Level

VERIFIED BY

SIGNATURE

FSW
N

NAME : AFIQ AIMAN BIN HASSAN
POS : Field Service Manager
DATE : DIMENSION BID (M) SDN BHD
25/11/24

AGREED BY

A

SIGNATURE

NAME : AFIQAMMAR BIN ZULKEPLI
POS : GENERAL MANAGER
DATE : DIMENSION BID (M) SDN BHD

FOR HR USAGE

I hereby received this Slickline Assistant package for processing

I deem this Slickline Assistant II Candidate READY to be promoted to Next Level.

RECEIVED BY

SIGNATURE

NAME :
POS :
DATE :