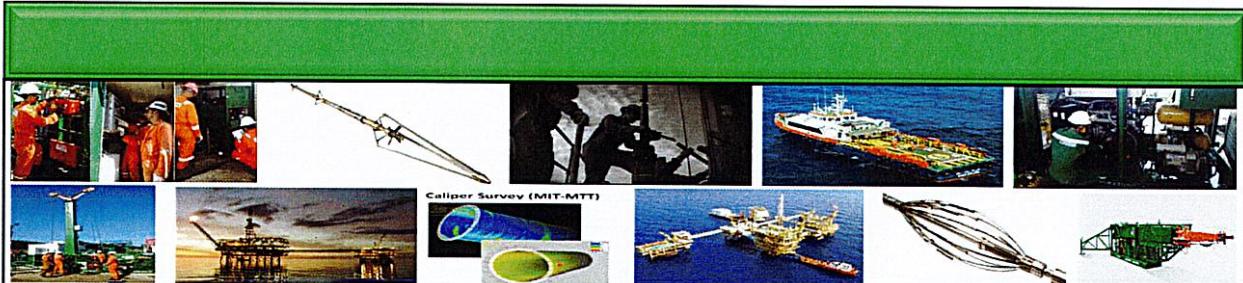


DIMENSION BID



SLICKLINE SERVICES DEVELOPMENT PLAN

TSA > SA II PROMOTION BOOKLET

| | |
|--------------------|------------------------------|
| FULL NAME: | Muhammad Ajish Bin Zainuddin |
| JOINED DATE: | 27.11.2023 |
| CONFIRMATION DATE: | 23.6.2024 |
| REGION: | East Malaysia |
| DIVISION: | Slickline Services |
| CONTROL DATE: | 14 - Nov - 2024 |

DIMENSION BID



SLICKLINE SERVICES DEVELOPMENT PLAN

TSA > SA II PROMOTION BOOKLET

Trainee Slickline Assistant Control Process

TSA 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 do your control after 2 trips offshore or within 12 months from joining Dimension Bid Sdn. Bhd. TSA must possess basic knowledge in SLS operations in order to meet your required competency level in SLS common services.

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

1. Perform at least:

- i. 2ea Offshore Trips (5 or 6 times Trip for Control Panel Job is only count as 1 offshore trip) – List of job refer to Para 6.3 a. ✓
- ii. Slickline Personnel Competency Matrix, items no 40 – 59.
- iii. Conduct 1ea x HSSE SQ Presentation OR 1 HSE Contribution Activity ✓
- iv. Attend 3ea Technical In-house Training ✓
- iv. Submit 1ea UAUC/day while offshore ✓

2. Complete the following paperwork:

- i. SLS-FORM-140: SLS CMS Trainee Slickline Assistant Promotion Booklet ✓
- ii. SLS-FORM-149: SLS CMS Job Track Record ✓
- iii. SLS-FORM-150: Slickline Assistant Workbook ✓
- iv. SLS-FORM-13 : Slickline Assistant Performance Assessment Feedback ✓
- v. HR-FORM-09 : Performance Appraisal & Development Plan ✓

Note:

The HSSE presentation doesn't have to be self-made. You can use presentation from supplier or any other sources.

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.

When preparing for the presentation, please expect questions from your audience.

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

TRAINEE SLICKLINE ASSISTANT EVALUATION SHEET SLICKLINE SERVICES

TRAINEE SLICKLINE ASSISTANT DETAILS

| | | | | | |
|-----------------------------|-----------|--------------|----------|-------------------|--|
| FULL NAME | | | | SENIORITY DATE | |
| MUHAMMAD AQISH BIN ZAINUDIN | | | | | |
| REGION | DIVISION | UNIT/SECTION | LOCATION | CONFIRMATION DATE | |
| SABAH | SLICKLINE | OPERATION | LABUAN | 23/6/2024 | |

East Malaysia Please tick (✓) at the relevant box the Competency Level of the Trainee Slickline Assistant (L1-Awareness, L2-Basic, L3-Skilled)

| SAFETY | L1 | L2 | L3 | ASSESSED BY | DATE | QUALITY | L1 | L2 | L3 | ASSESSED BY | DATE |
|--------------------------------------|--------------------------|-------------------------------------|--------------------------|-------------|----------|--------------------------------|--------------------------|-------------------------------------|--------------------------|-------------|----------|
| DB HSE Policy | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | QMS & ISO knowledge | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| Hazard Identification | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Amim | 14.11.24 | DB Quality Policy & Objectives | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Amim | 14.11.24 |
| Field Safety and PTW Familiarization | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | DB Slickline Procedure and SOP | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |

| | | |
|-----------------------------|--------------------------|--|
| Custodian Name and Position | Custodian Signature/Date | |
|-----------------------------|--------------------------|--|

| SERVICE QUALITY | L1 | L2 | L3 | ASSESSED BY | DATE | SERVICE QUALITY | L1 | L2 | L3 | ASSESSED BY | DATE |
|---------------------------------------|--------------------------|-------------------------------------|--------------------------|-------------|----------|---------------------------|--------------------------|-------------------------------------|--------------------------|-------------|----------|
| Basic Knowledge of Slickline Services | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Amim | 14.11.24 | Slickline Job Preparation | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Amim | 14.11.24 |
| Tools and Equipment Handling | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Post-job Preparation | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |

| | | |
|-----------------------------|--------------------------|--|
| Custodian Name and Position | Custodian Signature/Date | |
|-----------------------------|--------------------------|--|

| PERSONAL QUALITY | L1 | L2 | L3 | ASSESSED BY | DATE | PERSONAL QUALITY | L1 | L2 | L3 | ASSESSED BY | DATE |
|------------------------------|--------------------------|-------------------------------------|--------------------------|-------------|----------|-----------------------------------|--------------------------|-------------------------------------|--------------------------|-------------|----------|
| Learning Initiative | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Field Operations Readiness Status | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| Time Discipline | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Amim | | Stress Management | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Amim | 14.11.24 |
| Command/Instruction Handling | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | 14.11.24 | Communication Skills - Writing | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| Self Confident | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Communication Skills - Speaking | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |

| | | |
|-----------------------------|--------------------------|--|
| Custodian Name and Position | Custodian Signature/Date | |
|-----------------------------|--------------------------|--|

| MANAGEMENT / ADMINISTRATION | L1 | L2 | L3 | ASSESSED BY | DATE | MANAGEMENT / ADMINISTRATION | L1 | L2 | L3 | ASSESSED BY | DATE |
|-----------------------------|-------------------------------------|-------------------------------------|--------------------------|-------------|----------|-----------------------------|--------------------------|-------------------------------------|--------------------------|-------------|----------|
| Inventory Planning | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Amim | 14.11.24 | Inspection Knowledge | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Amim | 14.11.24 |
| Materials Planning | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | Slickline Job Reporting | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |

| | | |
|-----------------------------|--------------------------|--|
| Custodian Name and Position | Custodian Signature/Date | |
|-----------------------------|--------------------------|--|

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

- Ready for next promotion

| | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|--|
| CANDIDATE'S COMMENTS | Add comments about the support you have received from your tutor/location | |
| <ul style="list-style-type: none"> - Every department of maintenance team give a very good lecture. - Good Training plan | | |

| | | | |
|---------------------------------|-----------------------------------------|-----------------------------|-----------------------------------------------------------------------|
| RECOMMENDED FOR NEXT POSITION ? | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/> | Remark : If NO, please submit e-mail to FSM and specify details here. |
|---------------------------------|-----------------------------------------|-----------------------------|-----------------------------------------------------------------------|

| | | | |
|-----------------------|------------------------|---------------------|--------------|
| CANDIDATE'S SIGNATURE | INSTRUCTOR'S SIGNATURE | MANAGER'S SIGNATURE | DATE |
| | | | 12. 14.11.24 |

DIMENSION BID

TRAINEE SLICKLINE ASSISTANT TECHNICAL EVALUATION SHEET SLICKLINE SERVICES

TRAINEE SLICKLINE ASSISTANT DETAILS

FULL NAME

SENIORITY DATE

MUHAMMAD AQSH BIN ZAINUDIN

REGION
EAST MALAYSIA

DIVISION
SLICKLINE

UNIT/SECTION
OPERATION

LOCATION
LABUAN

CONFIRMATION DATE
23 / 6 / 2024

TECHNICAL EVALUATION

Please tick (✓) at the relevant box the Competency Level of the Trainee Slickline Assistant (L1-Awareness, L2-Basic, L3-Skilled)

| BASIC WIRELINE | A B C | | | BASIC PCE | A B C | | | | |
|------------------------------------|-------------------------------------|-------------------------------------|------------------------------|----------------|--------------------------|-------------------------------------|-------------------------------------|---------------------------|--------------------|
| | Wireline Rig-up/Rig-down Operation | Wireline Winch Operation | Wireline Well Exit Procedure | Wireline Cable | Rig Up & Rig Down | Control Module | Pressure Control Equipment | Single Well Control Panel | Pressure Test Pump |
| Wireline Rig-up/Rig-down Operation | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | |
| Wireline Winch Operation | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Wireline Well Exit Procedure | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |
| Wireline Cable | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |

| | |
|-----------------------------|------------|
| Custodian Name and Position | Amin / PSM |
| Custodian Signature/Date | Amin / PSM |

| | |
|-----------------------------|------------|
| Custodian Name and Position | Amin / PSM |
| Custodian Signature/Date | Amin / PSM |

| BASIC SURFACE EQUIPMENT OPERATION | A B C | | | BASIC SURFACE EQUIPMENT OPERATION | A B C | | |
|-----------------------------------|-------------------------------------|-------------------------------------|--------------------------|-----------------------------------|--------------------------|--------------------------|--------------------------|
| | Slimline Unit | N/A | | Air Compressor | N/A | | |
| Power Pack | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Spooling Control System | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Reel Skid Unit | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Engine System | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Generator | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hydraulic System | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Mast | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Electric & Electronic System | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| | |
|-----------------------------|------------|
| Custodian Name and Position | Amin / PSM |
| Custodian Signature/Date | Amin / PSM |

| | |
|-----------------------------|------------|
| Custodian Name and Position | Amin / PSM |
| Custodian Signature/Date | Amin / PSM |

| BASIC MEASUREMENT | A B C | | | GENERAL | A B C | | |
|-------------------|--------------------------|-------------------------------------|--------------------------|----------------------|--------------------------|-------------------------------------|--------------------------|
| | Depth Control | | | Basic Down Hole Tool | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Meter | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Winch Man Signal | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Pressure | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | PTW Familiarization | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

| | |
|-----------------------------|------------|
| Custodian Name and Position | Amin / PSM |
| Custodian Signature/Date | Amin / PSM |

| | |
|-----------------------------|------------|
| Custodian Name and Position | Amin / PSM |
| Custodian Signature/Date | Amin / PSM |

INSTRUCTOR'S COMMENTS

- Knowledgeable, ready for promotion

DIMENSION BID

TRAINEE SLICKLINE ASSISTANT TECHNICAL EVALUATION SHEET SLICKLINE SERVICES

CANDIDATE'S COMMENTS

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

-Good training plan
- Every crew at the offshore was so helpful.

INSTRUCTOR

Recommend Promotion to Next Level?

Y N

DIVISION MANAGER

Approve Promotion To Next Level ?

Y N

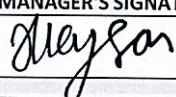
CANDIDATE'S SIGNATURE



INSTRUCTOR'S SIGNATURE



MANAGER'S SIGNATURE



DATE

14/11/24

DIMENSION BID

| TRAINEE SLICKLINE ASSISTANT EVALUATION CHECKLIST | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------|----------|-------------------|
| SLICKLINE SERVICES | | | | |
| TRAINEE SLICKLINE ASSISTANT DETAILS | | | | |
| FULL NAME | SENIORITY DATE | | | |
| MUHAMMAD AQISH BIN ZAINUDIN | | | | |
| REGION | DIVISION | UNIT/SECTION | LOCATION | CONFIRMATION DATE |
| EAST MALAYSIA | SLICKLINE | OPERATION | LABUAN | 26/06/2024 |
| TRAINEE SLICKLINE ASSISTANT 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 | | | | |
| <input checked="" type="checkbox"/> Completed Slickline Assistant Workbook (Please attach SLS-FORM-150 Slickline Assistant Workbook) <input checked="" type="checkbox"/> 2 x Offshore Trip (Please attach SLS-FORM-149 Job Track Record) <input checked="" type="checkbox"/> 1ea x HSE SQ Presentation OR 1 HSE Contribution Activity <input checked="" type="checkbox"/> Attend 3ea x Technical Inhouse Training (Please attach Attendance Form) <input checked="" type="checkbox"/> 1 ea UAUC per day (for every offshore trip) and signed by Safety Officer <input checked="" type="checkbox"/> Completed Slickline Assistant Performance Assessment Feedback for all jobs performed (refer Job Track Record) <input type="checkbox"/> Completed Performance Appraisal & Development Plan | | | | |
| PAPERWORK | | | | |
| <input checked="" type="checkbox"/> Trainee Slickline Assistant Evaluation Sheet <input checked="" type="checkbox"/> Trainee Slickline Assistant Technical Evaluation Sheet <input checked="" type="checkbox"/> SLS-FORM-150 Slickline Assistant Workbook <input checked="" type="checkbox"/> Job Tracking Record (Verified by FSM) <input checked="" type="checkbox"/> HSE SQ Slide Presentation signed by Safety Officer <input checked="" type="checkbox"/> Technical Inhouse Training Attendance <input checked="" type="checkbox"/> 1ea UAUC per day and signed by Safety Officer <input checked="" type="checkbox"/> SLS-FORM-13 : Slickline Assistant Performance Assessment Feedback <input checked="" type="checkbox"/> HR-FORM-09 : Performance Appraisal & Development Plan | | | | |
| VERIFICATION | | | | |
| I hereby verify that the above paperwork 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 Wireline Assistant program in future. | | | | |
| PREPARED AND SUBMITTED BY | | | | |
|  SIGNATURE NAME : MUHAMMAD AQISH BIN ZAINUDIN POS : TSA DATE : 26/06/2024 | | | | |

DIMENSION BID

ENDORSEMENT

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

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

VERIFIED BY

SIGNATURE

NAME : AMINI FADZLAN ABU ZAMID
POS : PSM
DATE : 14-11-2024

AGREED BY

SIGNATURE

NAME : Allyson Akim
POS : OM
DATE : 14.11.24

FOR HR USAGE

I hereby received this Trainee Slickline Assistant package for processing

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

RECEIVED BY

SIGNATURE

NAME : MUHAMAD AQASH BIN ZAINUDIN
POS : TSA
DATE : 15/11/2024