

# DIMENSION BID

## COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

PART 1: To be completed by Assessor [WEIGHT: 40%]

Name	FIRMAN LAKSANA	COB Date	9-Dec-23
Position	GENERAL EQUIPMENT OPERATOR	RTB Date	29-Dec-23
Client	PETRONAS CARIGALI	Location	ANGSI
Platform	ANGSI E	Well	E-02, E-05S, E-14L and E-07S
Assessed By	MUHAMAD TAUFIQ ISMAIL	Position:	COILED TUBING SUPERVISOR


### 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 V 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 UAUC		✓							
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:

Able to Stand alone Supervise Pump Operation.

Assessed By [Supervisor]	
Name	MUHAMAD TAUFIQ ISMAIL
Date	29-Dec-2023

Doc.Ref.No.: CTS-FORM-90

Revision No.: 01

Effective Date: 21/08/2023

(Rev.00,Dated:22/09/19-OBSOLETE)

CONTROLLED COPY

## COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

PART 2: To be completed by Employee and Assessor (WEIGHT: 60%)

Type of Task	Tasks Performed	Assessor Comment																		
1. Pre-Job Preparation	1. Attend toolbox and morning meeting with CSR. 2. Attend pre job meeting with client PCSB 3. Pre-check/EMC1 all Pumping equipment before job.	Done.																		
	Rating (by SUPERVISOR) <table border="1"> <tr> <td colspan="3">STRONG</td> <td colspan="3">ADEQUATE</td> <td colspan="3">IMPROVEMENT NEEDED</td> </tr> <tr> <td>10</td><td>9</td><td>8</td> <td>7</td><td>6</td><td>5</td> <td>4</td><td>3</td><td>2</td> </tr> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2	
STRONG			ADEQUATE			IMPROVEMENT NEEDED														
10	9	8	7	6	5	4	3	2												
2. Surface Equipment Rig-up	1. Perform rig up pumping surface line from Pump to well (bulkhead) 2. Set Up all equipment on deck 3. Rig up hydraulic hose all equipment 4. Rig Up hose 4" from BMX to Pump 5. Rig Up well injection to FST 6. Preparation wilden pump for mixing acid 7. Rig up wilden pump, 2" spring hose and air hose from sea deck to main deck	Done																		
	Rating (by SUPERVISOR) <table border="1"> <tr> <td colspan="3">STRONG</td> <td colspan="3">ADEQUATE</td> <td colspan="3">IMPROVEMENT NEEDED</td> </tr> <tr> <td>10</td><td>9</td><td>8</td> <td>7</td><td>6</td><td>5</td> <td>4</td><td>3</td><td>2</td> </tr> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2	
STRONG			ADEQUATE			IMPROVEMENT NEEDED														
10	9	8	7	6	5	4	3	2												
3. Tools / Equipment Preparation	1. Perform EMC1 on Pumping unit and BMX 2. Prepare chemical for tubing pickling	Done.																		
	Rating (by Operator) <table border="1"> <tr> <td colspan="3">STRONG</td> <td colspan="3">ADEQUATE</td> <td colspan="3">IMPROVEMENT NEEDED</td> </tr> <tr> <td>10</td><td>9</td><td>8</td> <td>7</td><td>6</td><td>5</td> <td>4</td><td>3</td><td>2</td> </tr> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2	
STRONG			ADEQUATE			IMPROVEMENT NEEDED														
10	9	8	7	6	5	4	3	2												
4. Equipment	4.1 Batch Mixer 1. Perform EMC1 on Pumping unit and BMX	Done.																		
	Rating (by SUPERVISOR) <table border="1"> <tr> <td colspan="3">STRONG</td> <td colspan="3">ADEQUATE</td> <td colspan="3">IMPROVEMENT NEEDED</td> </tr> <tr> <td>10</td><td>9</td><td>8</td> <td>7</td><td>6</td><td>5</td> <td>4</td><td>3</td><td>2</td> </tr> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2	
STRONG			ADEQUATE			IMPROVEMENT NEEDED														
10	9	8	7	6	5	4	3	2												
	Employee was able to OPERATE the equipment:	<table border="1"> <tr> <td>Under Supervision</td> <td></td> </tr> <tr> <td>Standalone</td> <td></td> </tr> </table>	Under Supervision		Standalone															
Under Supervision																				
Standalone																				

Doc.Ref.No.: CTS-FORM-90

Revision No.: 01

Effective Date: 21/08/2023

(Rev.00,Dated:22/09/19-OBSOLETE)

CONTROLLED COPY



## COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

PART 2: To be completed by Employee and Assessor [WEIGHT: 60%]

Type of Task	Tasks Performed	Assessor Comment																		
	<b>4.2 Pump Unit</b> 1. Perform EMC1 on Pumping unit and BMX	Done.																		
	Rating (by SUPERVISOR) <table border="1"> <tr> <th colspan="3">STRONG</th> <th colspan="3">ADEQUATE</th> <th colspan="3">IMPROVEMENT NEEDED</th> </tr> <tr> <td>10</td> <td>9</td> <td>8</td> <td>7</td> <td>6</td> <td>5</td> <td>4</td> <td>3</td> <td>2</td> </tr> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2	
STRONG			ADEQUATE			IMPROVEMENT NEEDED														
10	9	8	7	6	5	4	3	2												
	Employee was able to OPERATE the equipment:	Under Supervision Standalone																		
	<b>4.3 Nitrogen Pump unit &amp; Nitrogen Tank</b>																			
	Rating (by SUPERVISOR) <table border="1"> <tr> <th colspan="3">STRONG</th> <th colspan="3">ADEQUATE</th> <th colspan="3">IMPROVEMENT NEEDED</th> </tr> <tr> <td>10</td> <td>9</td> <td>8</td> <td>7</td> <td>6</td> <td>5</td> <td>4</td> <td>3</td> <td>2</td> </tr> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2	
STRONG			ADEQUATE			IMPROVEMENT NEEDED														
10	9	8	7	6	5	4	3	2												
	Employee was able to OPERATE the equipment:	Under Supervision Standalone																		
	<b>4.4 Power Pack</b>																			
	Rating (by SUPERVISOR) <table border="1"> <tr> <th colspan="3">STRONG</th> <th colspan="3">ADEQUATE</th> <th colspan="3">IMPROVEMENT NEEDED</th> </tr> <tr> <td>10</td> <td>9</td> <td>8</td> <td>7</td> <td>6</td> <td>5</td> <td>4</td> <td>3</td> <td>2</td> </tr> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2	
STRONG			ADEQUATE			IMPROVEMENT NEEDED														
10	9	8	7	6	5	4	3	2												
	Employee was able to OPERATE the equipment:	Under Supervision Standalone																		
	<b>4.5 Control Cabin</b>																			
	Rating (by SUPERVISOR) <table border="1"> <tr> <th colspan="3">STRONG</th> <th colspan="3">ADEQUATE</th> <th colspan="3">IMPROVEMENT NEEDED</th> </tr> <tr> <td>10</td> <td>9</td> <td>8</td> <td>7</td> <td>6</td> <td>5</td> <td>4</td> <td>3</td> <td>2</td> </tr> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2	
STRONG			ADEQUATE			IMPROVEMENT NEEDED														
10	9	8	7	6	5	4	3	2												
	Employee was able to OPERATE the equipment:	Under Supervision Standalone																		

# DIMENSION BID

## COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

PART 2: To be completed by Employee and Assessor [WEIGHT: 60%]

Type of Task	Tasks Performed	Assessor Comment								
	4.6 CT Reel									
	Rating (by SUPERVISOR)	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
	Employee was able to OPERATE the equipment:				Under Supervision					
					Standalone					
	4.7 Injector Head									
	Rating (by SUPERVISOR)	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
	Employee was able to OPERATE the equipment:				Under Supervision					
					Standalone					
	4.8 Pressure Control Equipment									
	Rating (by SUPERVISOR)	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
	Employee was able to OPERATE the equipment:				Under Supervision					
					Standalone					
	4.9 Basic BHA Components									
	Rating (by SUPERVISOR)	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
	Employee was able to OPERATE the tools:				Under Supervision					
					Standalone					

Doc.Ref.No.: CTS-FORM-90

Revision No.: 01

Effective Date: 21/08/2023

(Rev.00,Dated:22/09/19-OBSOLETE)

CONTROLLED COPY

3

# DIMENSION BID

## COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

PART 2: To be completed by Employee and Assessor [WEIGHT: 60%]

Type of Task	Tasks Performed	Assessor Comment																		
<b>5. Job Supervision</b> (if applicable) Please complete this section if you perform any supervisory role during operation	I stand alone for pumping job tubing pickling on well E-02, E-055, E-14L and E-07	Done																		
	<table border="1"> <tr> <th colspan="3">STRONG</th> <th colspan="3">ADEQUATE</th> <th colspan="3">IMPROVEMENT NEEDED</th> </tr> <tr> <td>10</td> <td>9</td> <td>8</td> <td>7</td> <td>6</td> <td>5</td> <td>4</td> <td>3</td> <td>2</td> </tr> </table>	STRONG			ADEQUATE			IMPROVEMENT NEEDED			10	9	8	7	6	5	4	3	2	
STRONG			ADEQUATE			IMPROVEMENT NEEDED														
10	9	8	7	6	5	4	3	2												
	Please ✓ accordingly to confirm the role of the employee during operation	<table border="1"> <tr> <td>Full Supervisor</td> <td></td> </tr> <tr> <td>2nd / Night Supervisor</td> <td></td> </tr> </table>	Full Supervisor		2nd / Night Supervisor															
Full Supervisor																				
2nd / Night Supervisor																				

Doc.Ref.No.: CTS-FORM-90

Revision No.: 01

Effective Date: 21/08/2023


(Rev.00,Dated:22/09/19-OBSOLETE)

CONTROLLED COPY

# DIMENSION BID

## COILED TUBING PERFORMANCE ASSESSMENT FEEDBACK

PART 3: To be completed by Employee and Assessor

DATE	Assignment/Summary Job/Duration	Supervisor's Feedback (Please indicate if employee is able to execute the job <u>UNDER SUPERVISION</u> or <u>STANDALONE</u> )
9-Dec-23 29-Dec-23	<p>Acidizing and Tubing Pickling well E-02, E-05S, E-14L and E-75</p> <p>Mobilization pump equipment from KSB to Angsi Echo, Discuss with WSS for Set up equipment and PTW for job. Set Up Pump Unit and BMX equipment. Function test BMX, Pump and wilder pump prior job. Rig up pumping line and water injection to FST. Pressure test pumping line 300 PSI. Bleed off pressure PCP until below 400 PSI. Perform mixing tubing pickling refer to program and pump to well E-02, E-05S, E-14L and E-75. Always monitor return from well and pump soda ash for neutralize to production line until PH 7. Hand over to DPIC after finish the job.</p> <p>Demob all crew cause bad weather and all equipment stay at Angsi Echo platform</p>	<p>Able to stand alone to execute the Job</p> <p> Tuti Q. Lamsu L</p>

Please tick (✓) category of services performed:

### Standard Services:

Wellbore Cleanout	<input type="checkbox"/>
CT Cementing	<input type="checkbox"/>
Nitrogen Operations	<input type="checkbox"/>
Pumping Services	<input checked="" type="checkbox"/>

### Advanced Services

CT Fishing	<input type="checkbox"/>
CT Milling	<input type="checkbox"/>
CT Logging	<input type="checkbox"/>
CT Perforation	<input type="checkbox"/>

Doc.Ref.No.: CTS-FORM-90

Revision No.: 01

Effective Date: 21/08/2023

(Rev.00,Dated:22/09/19-OBSOLETE)

CONTROLLED COPY