

## SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK

(PART 1: To be completed by Assessor)

Name	MOHAMMAD FAIZ BIN IBRAHIM	COB Date	26/6/2023
Position	SLICKLINE ASSISTANT II	RTB Date	2/7/2023
Client	SEAH	Location	North Sabah
Platform	ST. JOSEPH	Well	SJ-708A, SJ-707N
Assessed By	Name: DZULFADLY Position: WIRELINE OPERATOR		

### 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 ✓ where appropriate)								
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### Safety Awareness (20%)

- a. Usage of Personal Protective Equipment
- b. Participation in ACT
- c. Understanding of PTW System
- d. Worksite House Keeping

STRONG			ADEQUATE			IMPROVEMENT NEEDED		
10	9	8	7	6	5	4	3	2
✓								
✓								
		✓						
✓								


### Work Performance (20%)

- 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:

Handwriting, keep it up

Assessed By [Operator]	
Name	DZULFADLY
Date	1/7/2023

# DIMENSION BID

## SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK

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

Type of Task	Tasks Performed	Assessor Comment								
1. Pre-Job Preparation	a)PERFORM PRE CHECKLIST ON ALL EQUIPMENT b)TO CHECL 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									
	Rating (by Operator)	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
2. Surface Equipment Rig-up	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									
	Rating (by Operator)	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
3. Tools / Equipment Preparation	A)SERVICE & FUCTION 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									
	Rating (by Operator)	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
4. Equipment Problem Troubleshooting <i>[Please state type of equipment and describe troubleshooting job performed]</i>	N/A									
	Rating (by Operator)	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2
5. Downhole Tools Servicing/Redressing/Maintenance	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									
	Rating (by Operator)	STRONG			ADEQUATE			IMPROVEMENT NEEDED		
		10	9	8	7	6	5	4	3	2

Type of Task	Tasks Performed	Assessor Comment																																																																																																																								
6. Tools Inventory & Reporting	A) PRECHECK INVENTORY DOWNHOLE TOOLS EVERY 2 WEEK. B) UPDATE INVENTORY DOWNHOLE TOOL CHECKLIST BORROW AND LEND C) UPDATE AND REPORTING MISSING DOWNHOLE TOOLS.																																																																																																																									
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7. Equipment Operation	[Operator to rate TSA / SA / SSA competency in operating the equipment]																																																																																																																									
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## SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK

(PART 1: To be completed by Assessor)

Name	MOHAMMAD FAIZ BIN IBRAHIM	COB Date	27/6/2023
Position	SLICKLINE ASSISTANT II	RTB Date	25/7/2023
Client	SEAH	Location	North Sabah
Platform	ST. JOSEPH	Well	SJ-708A, SJ-707N, SJ-705L
Assessed By	Name: MOHD JAIDUN Position: WIRELINE OPERATOR		

### 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
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Assessment Criteria	Rating (Please ✓ where appropriate)								
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### Safety Awareness (20%)

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STRONG			ADEQUATE			IMPROVEMENT NEEDED		
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### Work Performance (20%)

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- q. Discipline

			✓					
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		✓						
		✓						

### REMARKS/COMMENTS/FEEDBACK ON PERFORMANCE OR AREAS OF IMPROVEMENT:

- A person who can be relied upon to carry out the tasks assigned  
 - Responsible, good attitude and teamwork.  
 I hope that you can continue your excellent performance in the future.

Assessed By [Operator]	
Name	MOHD JAIDUN
Date	25/7/2023

## SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK

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

Type of Task	Tasks Performed	Assessor Comment									
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	(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>	<b>STRONG</b>			<b>ADEQUATE</b>			<b>IMPROVEMENT NEEDED</b>			
	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										
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	(10)	9	8	7	6	5	4	3	2		





## Job Track Record

<b>Name</b>	MOHAMMAD FAIZ BIN IBRAHIM
<b>Designation</b>	SLICKLINE ASSISTANT II

Job Profile					
No	Client	Platform/Rig/Well	Mob Date	Demob Date	Type of Job (please provide sufficient descriptions of the job)
1.	SEAH	SFDP-A SFJT-B	28/03/2023	25/04/2023	1. RETRIEVE AND SET B7 VALVE 2. SGS 1. FISHING BOTTOM CUTTER SUB, LIB, RUN ARCHER TUBING LEAK. 2. FISHING WIRE 3. SET STRADDLE, INSERT VALVE CHANGE OUT, GLVC.
2.	SEAH	SJJT-G	02/05/2023	30/05/2023	1. RETRIEVE AND SET INSERT SAFETY VALVE, FGS, GLVC ( SJ-710C ) 2. RETRIEVE AND SET B7, SET PLUG ( SJ-704S ) 3. RETRIEVE AND SET B7, WAX CUT, SET PLUG, RETRIEVE PM1, ZOC ( SJ-704L )
3.	SEAH	SJJT-G	27/06/23	25/07/23	1. SGS AND FGS ( SJ-708A ) 2. WAXCUT, GLVC ( SJ-707N ) 3. INSTALL STRADDLE ACROSS LEAKING SSD ( SJ-705L )
4.					
5.					
6.					



## 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 Training & Development System in future.

### PREPARED AND SUBMITTED BY

SIGNATURE



NAME: MOHAMMAD FAIZ BIN IBRAHIM

POST: Slickline Assistant II

DATE: 25/07/2023

## ENDORSEMENT

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

I deem that this document can be use for Training & Development System support document.

### VERIFIED BY

SIGNATURE



NAME: MOHD JAIDUN

POST: Slickline Operator

DATE: 25/07/2023