

## ASSESSMENT CHECKLIST

Unit: CAP 1.2 PLAN FOR WELL SERVICES OPERATIONS

Element: CAP 1.2.1 Plan Operational Requirements

| PC | Description of Performance Criteria  | Description of Evidence   | Source of evidence |    |     | Competence | Remarks |
|----|--|---|--------------------|----|-----|------------|---------|
|    |  |   | On                 | SD | O/A |            |         |
| a  | Operation programs are prepared in accordance with objective plan.                     | Examine evidence on operation program (work action plan) against the Well Services objective programs.<br><br>Check via questioning (oral/written) for under-pinning knowledge on the Well Services objective programs (include related procedures) | /                  |    |     | C          |         |
| b  | Difficulties in carrying out the operations are clarified with the relevant personnel. | Check via questioning (oral/written) for candidate's understanding on the process to go about an unclear objective programs.<br><br>(Third Party feedback will be helpful and supportive i.e. from immediate supervisors, OIM, WS)                  | /                  |    |     | C          |         |

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|----|---|--|--------------------|------------|---------|
| On | SD  | Q/A  | C / NYC            |            |         |
| c  | Permit to Work is obtained in accordance with organisational and statutory requirements.            | Confirm via the evidence (e.g. PTW forms) submitted.   |                    |            |         |
| d  | Third party utilities are verified in accordance with operational and statutory requirements.       | Check via questioning (oral/written), the under-pinning knowledge on the process of applying a PTW.  | /                  | C          |         |
| e  | Required quantities and types of materials and equipment are sourced timely.                        | Check understanding on PTW procedures.   |                    |            |         |
| f  | Errors, omissions, and shortages of equipment are identified and appropriate remedial action taken. | Check evidence on valid equipment passport.  | /                  | C          |         |
|    |   | Check via questioning (oral/written) for candidate's understanding on the objective programs. Tools and materials required for a particular job. |                    |            |         |
|    |   | To provide evidence on materials and equipment checklist (materials requisition, inventory checklist and equipment checklist).                   | /                  | C          |         |
|    |   | Check candidate's under-pinning knowledge and awareness via questioning (oral/written).  | /                  | C          |         |

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| PC | Description of Performance Criteria   | Description of Evidence  | Source of evidence | Competence |    |     | Remarks |
|----|---|--|--------------------|------------|----|-----|---------|
|    |   |  |                    | On         | SD | Q/A |         |
| c  | Permit to Work is obtained in accordance with organisational and statutory requirements.            | Confirm via the evidence (e.g. PTW forms) submitted.<br>Check via questioning (oral/written), the under-pinning knowledge on the process of applying a PTW.<br>Check understanding on PTW procedures.  | /                  | /          | /  | C   |         |
| d  | Third party utilities are verified in accordance with operational and statutory requirements.       | Check evidence on valid equipment passport.  | /                  | /          | /  | C   |         |
| e  | Required quantities and types of materials and equipment are sourced timely.                        | Check via questioning (oral/written) for candidate's understanding on the objective programs. Tools and materials required for a particular job.<br>To provide evidence on materials and equipment checklist (materials requisition, inventory checklist and equipment checklist). | /                  | /          | /  | C   |         |
| f  | Errors, omissions, and shortages of equipment are identified and appropriate remedial action taken. | Check candidate's under-pinning via knowledge and awareness via questioning (oral/written).  | /                  | /          | /  | C   |         |

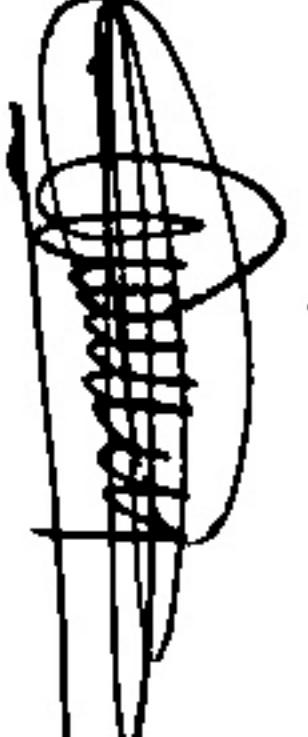
**Legend:**

**Source of Evidence:**  O/I Observation / Interview  
 C Competent

SD Supporting Document  
 NYC Not Yet Competent

Q/A Written Questions & Answers

| OVERALL SCORE | STRONG |   |   | ADEQUATE |   |   | IMPROVEMENT NEEDED |   |   |
|---------------|--------|---|---|----------|---|---|--------------------|---|---|
|               | 10     | 9 | 8 | 7        | 6 | 5 | 4                  | 3 | 2 |

|   |   |   |
|---|---|---|
| <b>Assessed by:</b><br>(Operator)   | <b>Agreed by:</b><br>(TSO)  | <b>Verified by:</b><br>(FSM)  |
| (Name)<br><b>LARRY RUMA</b>   | (Name)<br><b>Henry Anyen</b>  | (Name)<br>AMINI FADZLAN ABU ZAMIR   |
| <b>Signature</b><br> | <b>Signature</b><br> | <b>Signature</b><br> |
| <b>Date</b><br><b>20 / 11 / 2024</b>  | <b>Date</b><br><b>21 / 11 / 2024</b>  | <b>Date</b><br><b>17-DEC-24</b>   |

## **SITE OBSERVATION CHECKLIST**

**Unit: CAP 1.2 PLAN FOR WELL SERVICES OPERATIONS**

**Element: CAP 1.2.1 Plan Operational Requirements**

| PC   | Description   | Yes | No |
|------|---|-----|----|
| a    | Objective programs listed in the well access plan are available on site   | ✓   |    |
| f    | Request made on programs that are not available on site (if any)  | ✓   |    |
| b, f | Potential problems related to the operation are highlighted and clarified/discussed with the relevant parties. (evidence: hard copy if any) | ✓   |    |
| a, d | Operations are planned before hand (weekly plan/activities plan)  | ✓   |    |
| e, f | Materials required for the operations are available or have been requested. (evidence: hard copy if any)                                    | ✓   |    |
| e, f | Equipment required for the operations are on site   | ✓   |    |
| d, e | Surface equipment used has valid inspection/test dates  | ✓   |    |
| e    | Lifting chain blocks, slings and shackles are inspected and with updated colour codes   | ✓   |    |
| e    | Inventory listing available   | ✓   |    |
| c, d | A valid PTW is in place prior to start of operation   | ✓   |    |