



**SLICKLINE ASSISTANT PERFORMANCE ASSESSMENT FEEDBACK**

(PART 1: To be completed by Assessor)

Name	Henry Anyan Ak Timban	COB Date	19/04/2024
Position	Tr. Slickline Operator	RTB Date	26/04/2024
Client	Vestigo	Location	Vestigo KMSE (Naga 2)
Platform	KMSE	Well	
Assessed By	Collin Justine Position: SLICKLINE OPERATOR		

**Assessment Criteria**

**Rating (Please ✓ where appropriate)**

**Safety Awareness**

- |   |   |                                    |                               |                                       |                               |
|---|---|------------------------------------|-------------------------------|---------------------------------------|-------------------------------|
| a. Usage of Personal Protective Equipment | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| b. Participation in ACT                   | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| c. Understanding of PTW System            | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| d. Worksite House Keeping                 | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |

**Work Competency**

- |  |   |   |                               |                                       |                               |
|--|---|---|-------------------------------|---------------------------------------|-------------------------------|
| a. Pre-job Preparation                             | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| b. Surface Equipment Rig-up Process                | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| c. Tools/Equipment Preparation                     | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| d. Equipment Problem Trouble Shooting Capability   | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| e. Downhole Tools Servicing/Redressing/Maintenance | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| f. Initiative and Creativity                       | <input type="checkbox"/> Excellent            | <input checked="" type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| g. Decision Making Capability                      | <input type="checkbox"/> Excellent            | <input checked="" type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| h. Understanding of Job Scope                      | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| i. Tools Inventory Preparation & Reporting         | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| j. Work Quality                                    | <input type="checkbox"/> Excellent            | <input checked="" type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| k. Reporting                                       | <input type="checkbox"/> Excellent            | <input checked="" type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |

**Others**

- |   |   |   |                               |                                       |                               |
|---|---|---|-------------------------------|---------------------------------------|-------------------------------|
| a. Punctuality and Time Keeping                 | <input type="checkbox"/> Excellent            | <input checked="" type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| b. Teamwork                                     | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| c. Communication                                | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| d. Leadership Skills                            | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| e. Adaptability to Work Environment/Surrounding | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| f. Attitude                                     | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
| g. Discipline                                   | <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good            | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |

**OVERALL PERFORMANCE**

- |   |                                    |                               |                                       |                               |
|---|------------------------------------|-------------------------------|---------------------------------------|-------------------------------|
| <input checked="" type="checkbox"/> Excellent | <input type="checkbox"/> Very Good | <input type="checkbox"/> Good | <input type="checkbox"/> Satisfactory | <input type="checkbox"/> Poor |
|---|------------------------------------|-------------------------------|---------------------------------------|-------------------------------|

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

- Good Communication and team work.  
- Have a leadership skill.

Assessed By :   
Name : Collin Justine  
Date : 26/06/2024

Agreed By :   
Name : Henry Anyan Ak Timban  
Date : 26/06/2024



## TRAINEE SLICKLINE OPERATOR PERFORMANCE ASSESSMENT FEEDBACK

(To be completed by Employee and Assessor)

Name	Henry Anyan Ak Timban	COB Date	19/04/2024
Position	Tr. Slickline Operator	RTB Date	26/04/2024
Client	VESTIGO	Location	Vestigo KMSE (Naga 2)
Platform	KMSE	Well	

A. PROCESS, PREPARATION & PLANNING		
<b>CONTROL AND MANAGE CRITICAL SITUATION</b> <i>* well barrier issue - please highlight. If none, please explain well barrier for the operation</i> <i>* Well control issue</i> <i>* Equipment failure</i> <i>* Failure of Well Control Equipment</i>	For well control issue well barrier Primary barrier - Stuffing Box Secondary barrier - BOP	
Assessor's Evaluation:	Level of Skill & Knowledge <input type="checkbox"/> Broad <input type="checkbox"/> Detailed <input checked="" type="checkbox"/> Full Understanding	
<b>OPERATION PLANNING</b> <i>* what did you do and what was your involvement in preparing Job Program / Job Planning, Inventory, crew briefing etc.</i>	1. Prepare PTW/JHA and review programme. 2. Make sure all tools and equipment tally with inventory and crew must update any tool damage and tool lend to other location. 3. Before proceed the job, we do the toolbox talk among crew to make sure the crew know the task and responsibility.	
Assessor's Evaluation:	Level of Skill & Knowledge <input type="checkbox"/> Broad <input type="checkbox"/> Detailed <input checked="" type="checkbox"/> Full Understanding	
<b>WELL SERVICES EQUIPMENT</b> <i>* Equipment line-up</i> <i>* Testing of equipment - what did you do? Any pre-job checking / testing (please provide evidence)</i>	1. Position all surface equipment - RSU, Power Pack, Control Panel, Tool House 2. Test run power pack to make sure no leak and test safety shutdown system. 3. Test run RSU to make sure brake, AA valve, gear, direction lever, odometer and weight indicator in good condition. 4. Test CP to make sure check valve in good condition. 5. Before do testing equipment, we refer to job check list and equipment check list.	
Assessor's Evaluation:	Level of Skill & Knowledge <input type="checkbox"/> Broad <input type="checkbox"/> Detailed <input checked="" type="checkbox"/> Full Understanding	
<b>WIRELINE RIG-UP</b> <i>* was there any anticipated risk for the operation, if yes, what did you do to mitigate the risk / the impact</i> <i>* described verifications and checks performed to ensure a safe rig-up operation</i>	1. While wireline rig up risk is: - Drop object, swing lubricator, pinch point, slip and trap hazard and hoisting failure. - For mitigate the risk is: Do proper housekeeping, use tag line, secure losses object and visual check lifting gear.	

Learning Objectives	Activity / Procedure	Assessment / Evidence
<b>PRE-DEMOBILIZATION</b> <i>* explain your pre-demob preparation</i>	1. Prepare hand over to incoming crew content in handover note: -Inventory list, consumable spare -Last operation surface equipment (PCE/DHT) -Planing for equipment movement and remarks. 2. Customer service survey. 3. Personnel service ticket. 4. Wire utilization record and surface equipment running hours.	
Assessor's Evaluation: <b>Level of Skill &amp; Knowledge</b> <input type="checkbox"/> Broad <input type="checkbox"/> Detailed <input checked="" type="checkbox"/> Full Understanding		
<b>B. OPERATIONS</b>		
<b>ENTER AND EXIT WELLBORE</b> <i>* explain activity involved</i> <i>* risk and mitigation</i>	1. Before and during enter well: -Check all wireline surface equipment -Rig up and check wire and tool string. -Prepare and service tool for next run. 2. During POOH -Standby for close swab valve -Standby tool for next run	
Assessor's Evaluation: <b>Level of Skill &amp; Knowledge</b> <input type="checkbox"/> Broad <input type="checkbox"/> Detailed <input checked="" type="checkbox"/> Full Understanding		
<b>MANIPULATING TOOLSTRING DOWNHOLE</b> <i>* explain activity involved</i> <i>* risk and mitigation</i>		
Assessor's Evaluation: <b>Level of Skill &amp; Knowledge</b> <input type="checkbox"/> Broad <input type="checkbox"/> Detailed <input type="checkbox"/> Full Understanding		
<b>C. ONSITE MAINTENANCE</b>		
<b>SURFACE EQUIPMENT (SE)</b> <i>* please provide evidence</i>	1. Perform surface equipment pre-job daily check list. 2. Before start up make sure check engine oil, diesel and hyd oil. 3. Monitor temperature and hose connection during wireline operation.	
Assessor's Evaluation: <b>Level of Skill &amp; Knowledge</b> <input type="checkbox"/> Broad <input type="checkbox"/> Detailed <input checked="" type="checkbox"/> Full Understanding		
<b>PRESSURE CONTROL EQUIPMENT (PCE)</b> <i>* please provide evidence</i>		
Assessor's Evaluation: <b>Level of Skill &amp; Knowledge</b> <input type="checkbox"/> Broad <input type="checkbox"/> Detailed <input type="checkbox"/> Full Understanding		
<b>DOWNHOLE TOOLS (DHT)</b>  <i>* please provide evidence</i>	A) FUNCTION TEST AND PINNING 2.313" X-LINE RUNNING TOOL. B) FUNCTION TEST AND PINNING 2.5" GS PULLING TOOL. C) PINNING AND FUNCTION TEST 2" SB PULLING TOOL. E) FUNCTION TEST 142BO. F) FUNCTION TEST AND PINNING 42BO.	
Assessor's Evaluation: <b>Level of Skill &amp; Knowledge</b> <input type="checkbox"/> Broad <input type="checkbox"/> Detailed <input checked="" type="checkbox"/> Full Understanding		

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*\* please describe the problems and how you tackled / managed them*

Assessor's Evaluation: **Level of Skill & Knowledge** ☐ Broad ☐ Detailed ☐ Full Understanding

### E. CREW MEMBERS' ASSESSMENT

**SLICKLINE ASSISTANT**  
Name: Lennon Chung

He can do the job independent and hard working. Pro active in tool preparation, services and maintainance, He can perform surface preparation with proper technique and skill. Understand Vestigo PTW system and active participate in UAUC.

*\* please describe their roles, their involvement, their skill & knowledge and their overall performance during the operations*

Assessor's Evaluation:	Level of Skill & Knowledge	<input type="checkbox"/> Broad	<input type="checkbox"/> Detailed	<input checked="" type="checkbox"/> Full Understanding
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**TRAINEE SLICKLINE ASSISTANT**  
Name:

*\* please describe their roles, their involvement, their skill & knowledge and their overall performance during the operations*

Assessor's Evaluation: **Level of Skill & Knowledge** ☐ Broad ☐ Detailed ☐ Full Understanding

## JOB DETAIL:

[illegible]

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

Assessed by:

**Agreed by:**

Name:

Collin Justine (W/L Operator)

Name: \_\_\_\_\_

Date:

26/04/2024

Date: