



Certificate of Thorough Examination & NDT of Lifting Equipment

This Certificate complies with the requirements of the Lifting Equipment Operations and Lifting Equipment Regulations

Table with client details: Client Name: Hilong Oil Services & Engineering, Rig Number: HL-100, Job Number: ATS-06-24-3466

Table with examination details: Date of Examination: 08-06-2024, Date of Report: 08-06-2024, Certificate No: ATS-06-24-3466- MPI-001

Main table with columns: Pad Eyes S/N, QTY, Description, SWL, Date of last Thorough examination. Includes images of pad eyes.

Reference Standard: LEEA DOC 048:2015. Inspection questions and answers regarding examination frequency and safety.

Defect identification section: Identification of any part found to have a defect... IS THIS EQUIPMENT SAFE TO OPERATE?

NDT Equipment Details table listing standards (API RP 4G, ASTM E709), viewing conditions, and due dates for various equipment.

NDT Results section: Visual and MPI carried out for the above description and found free of surface defects at the time of inspection.

Inspector and authenticator information: Name of Inspector: Abdullah Mofeed, Name of person authenticating this report: Meysam Minaei.





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Client Name: Hilong Oil Services & Engineering, Rig Number: HL-100, Job Number: ATS-06-24-3466

Date of Examination: 08-06-2024, Date of Report: 08-06-2024, Certificate No: ATS-06-24-3466- MPI-002

Table with columns: Pad Eyes S/N, QTY, Description, SWL, Date of last Thorough examination. Includes image of a pad eye.

Reference Standard: LEEA DOC 048:2015

Table with inspection questions and checkboxes regarding examination frequency and safety.

Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none State NONE) NONE

Is the above a defect which is of immediate danger to persons: YES NO

Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when) N/A

Particulars of any repair, renewal or alteration required to remedy the defect identified above: NONE

IS THIS EQUIPMENT SAFE TO OPERATE? YES NO

Table with columns: Standard, Viewing Condition, Colored Media, Method, WET. Lists equipment like Yoke, Vernier Caliper, etc.

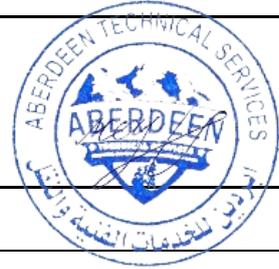
NDT Results

Visual and MPI carried out for the above description and found free of surface defects at the time of inspection

Identification of any part found to have a defect and a description of the defect: NONE

Particulars of any repair, renewal or alteration required to remedy the defect identified above: NONE

Table with columns: Name of Inspector, Name of person authenticating this report, Signature & Stamp, Latest date by which next thorough examination must be carried out.





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<b>Client Name:</b>	<b>Hilong Oil Services &amp; Engineering</b>	<b>Rig Number:</b>	<b>HL-100</b>	<b>Job Number:</b>	<b>ATS-06-24-3466</b>
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<b>Date of Examination:</b>	<b>08-06-2024</b>	<b>Date of Report:</b>	<b>08-06-2024</b>	<b>Certificate No:</b>	<b>ATS-06-24-3466- MPI-003</b>
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Pad Eyes S/N:	QTY	Description	SWL	Date of last Thorough examination
B5 B6 B7 B8	04	<b>Fabricated Pad Eyes</b>  <b>Pad Eye Dimension</b>  <b>Thickness: 26 mm</b> <b>Pin Hole: 36 mm</b> <b>Height: 95 mm</b> <b>Length: 177 mm</b> <b>Location: CEMENT BLOCK</b> <b>SN: CBHL100-2</b>	4.75 Ton	Jan-2024

**Reference Standard:** LEEA DOC 048:2015

Is this the first examination after Installation or assembly at a new site or location?	YES	NO	√	Was the examination carried out: Within an interval of 6 months? With an interval of 12 months?	YES	NO	√
					YES	NO	√
If the answer to the above question is YES has the equipment been installed correctly?	YES	NO		In accordance with an examination scheme? After the occurrence of exceptional circumstances?	YES	NO	√
					YES	NO	√

Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none State NONE) **NONE**

Is the above a defect which is of immediate danger to persons: YES  NO

Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when) N/A

Particulars of any repair, renewal or alteration required to remedy the defect identified above: **NONE**

**IS THIS EQUIPMENT SAFE TO OPERATE?** YES  NO

NDT Equipment Details					
Standard	API RP 4G & ASTM E709	Viewing Condition:	Colored Media	Method	WET
Yoke	AC	Serial No:	201504044	Due Date	04-07-2024
Vernier Caliper	Digital	Serial No:	8914	Due Date	04-07-2024
White Contrast	FLUXO: WCP-4	Batch No:	L230523/1	Due Date	23-05-2028
Black Ink	FLUXO: Black magnetic ink-3	Batch No:	L230125/3	Due Date	25-1-2025

**NDT Results**

Visual and MPI carried out for the above description and found free of surface defects at the time of inspection

Identification of any part found to have a defect and a description of the defect: **NONE**

Particulars of any repair, renewal or alteration required to remedy the defect identified above: **NONE**

<b>Name of Inspector:</b>	<b>Name of person authenticating this report:</b>	
Abdullah Mofeed	Meysam Minaei	
	<b>Signature &amp; Stamp:</b>	
<b>Latest date by which next thorough examination must be carried out: 07-12-2024</b>		



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<b>Client Name:</b>	Hilong Oil Services & Engineering	<b>Rig Number:</b>	HL-100	<b>Job Number:</b>	ATS-06-24-3466
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<b>Date of Examination:</b>	08-06-2024	<b>Date of Report:</b>	08-06-2024	<b>Certificate No:</b>	ATS-06-24-3466- MPI-004
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Pad Eyes S/N:	QTY	Description	SWL	Date of last Thorough examination
B502	01	<b>Fabricated Pad Eyes</b>  <b>Pad Eye Dimension</b> <b>Thickness:</b> 20 mm <b>Pin Hole:</b> 45 mm <b>Height:</b> 125 mm <b>Length:</b> 97 mm <b>Location:</b> CEMENT BLOCK SN: CBHL100-2	3.25 Ton	Jan-2024



**Reference Standard:** LEEA DOC 048:2015

Is this the first examination after Installation or assembly at a new site or location?	YES	NO	✓	Was the examination carried out: Within an interval of 6 months?	YES	NO	✓
					With an interval of 12 months?	YES	NO
If the answer to the above question is YES has the equipment been installed correctly?	YES	NO		In accordance with an examination scheme? After the occurrence of exceptional circumstances?	YES	NO	✓
					YES	NO	✓

Identification of any part found to have a defect which is or could not become a danger to persons and a description of the defect: (If none Sate NONE) **NONE**

Is the above a defect which is of immediate danger to persons: YES  NO

Is the above a defect which is not yet but could become a danger to persons (If YES state the date by when) N/A

Particulars of any repair, renewal or alteration required to remedy the defect identified above: **NONE**

**IS THIS EQUIPMENT SAFE TO OPERATE?** YES  NO

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<b>Name of Inspector:</b>	<b>Name of person authenticating this report:</b>
Abdullah Mofeed	Meysam Minaei
	<b>Signature &amp; Stamp:</b>
<b>Latest date by which next thorough examination must be carried out: 07-12-2024</b>	

