

A 7983

Type of Inspection:		<input type="checkbox"/> INSTALLATION		<input checked="" type="checkbox"/> EXTERNAL		<input checked="" type="checkbox"/> INTERNAL	
Date:	May 19, 2010			Job #:			
Inspected By:	M. Capithec						
Client:	Sigma 3						
Owner:	Trident						
Region:							
Area:	Big Valley						
Facility:	Comp		Location/LSD: 526-35-21 W4				
Service:	<input checked="" type="checkbox"/> Sweet		<input type="checkbox"/> Sour		<input type="checkbox"/> Other:		
Description:	<input checked="" type="checkbox"/> Vessel		<input type="checkbox"/> Exchanger		<input type="checkbox"/> Tank		<input type="checkbox"/> Furnace <input type="checkbox"/> Boiler
Unit:				Equip.:			
Equip. Name:	Inlet Separator						
Jurisdiction #:	516700		CRN: R-9653 2				
Manufacturer:	Pyramid Corp						
Serial No.:	2129		Year Built:		PSV on Vessel <input checked="" type="checkbox"/>		Piping <input type="checkbox"/>
Volume:			PSV Data:		<input type="checkbox"/> Isolation Valve(s) installed		<input type="checkbox"/> Car-sealed open
Zones:	MAWP	Des. T	MDMT	Op.P	Op.T	Set P	Tag #
Shell Side:	285	100	20				
Tube Side:	351	0	F				
Other:	Pulled for service						
Components:	Material	Nominal	CA	Retire t	UT TML	Lowest t	Acc.
Shell:	SA51670	0.500	0.0625				
Head:	SA51670	0.5625					
Nozzles:	<input checked="" type="checkbox"/> Manway/Port		Size: 24"		<input type="checkbox"/> Davit arm present		<input type="checkbox"/> Davit arm greased
	<input checked="" type="checkbox"/> Reinforcement pads used		<input checked="" type="checkbox"/> Weep holes present		Comment:		
	<input checked="" type="checkbox"/> Piping well supported		<input checked="" type="checkbox"/> Joining as per code		Comment:		
Piping:	<input checked="" type="checkbox"/> PSV Piping:		<input checked="" type="checkbox"/> Drains properly		<input checked="" type="checkbox"/> Well-coated		Comment: to US FKO
	<input checked="" type="checkbox"/> Inlet Piping:		<input checked="" type="checkbox"/> Free from leaks		<input checked="" type="checkbox"/> Well-coated		Comment:
	<input checked="" type="checkbox"/> Outlet Piping:		<input checked="" type="checkbox"/> Free from leaks		<input checked="" type="checkbox"/> Well-coated		Comment:
	<input checked="" type="checkbox"/> Drain Piping:		<input checked="" type="checkbox"/> Free from leaks		<input checked="" type="checkbox"/> Well-coated		Comment:
	<input checked="" type="checkbox"/> Instrumentation Piping:		<input checked="" type="checkbox"/> Free from leaks/kinks		Comment:		
	<input type="checkbox"/> Process Fluid Identified:		<input type="checkbox"/> Flow direction marked		Comment:		
Valves:	<input checked="" type="checkbox"/> Manual Isolation Valve:		<input checked="" type="checkbox"/> Free from leaks		Comment:		
	<input checked="" type="checkbox"/> Automated Control Valve:		<input checked="" type="checkbox"/> Free from leaks		Comment:		
	<input checked="" type="checkbox"/> Vents and Drains Plugged		Comment:				
Gauges:	<input checked="" type="checkbox"/> Pressure		Condition: OK				
	<input type="checkbox"/> Temperature		Condition: OK				
Sight Glass:	<input type="checkbox"/> Fluid Level		Condition: OK		Reading:		OK
Orientation:	<input checked="" type="checkbox"/> Horizontal		<input type="checkbox"/> Vertical		Foundation:		<input type="checkbox"/> Concrete <input type="checkbox"/> Gravel <input type="checkbox"/> Timber <input checked="" type="checkbox"/> Steel <input type="checkbox"/> Other:
	<input checked="" type="checkbox"/> Saddle		<input type="checkbox"/> Seal-welded		<input type="checkbox"/> Free to move		Condition: Good
	<input type="checkbox"/> Skirt		<input type="checkbox"/> Free of debris		Comment:		Condition:
	<input type="checkbox"/> Hangers		<input type="checkbox"/> Secure		Comment:		Condition:
	<input type="checkbox"/> Other		Specify:		Condition:		
Overall:	General Condition: Good no deformation		<input type="checkbox"/> Dead Leg(s)		Electrical Grounding: <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Indirect <input type="checkbox"/> None		
Ext. Surface:	<input checked="" type="checkbox"/> Painted		<input type="checkbox"/> Insulated		<input type="checkbox"/> Fire-proofed		<input type="checkbox"/> Cladded <input type="checkbox"/> Other
Ext. Fixtures:	<input type="checkbox"/> Ladder		<input type="checkbox"/> Platform(s)		<input type="checkbox"/> Other		
Int. Surface:	<input type="checkbox"/> Coated		<input type="checkbox"/> Lined		<input type="checkbox"/> Thermal sprayed		<input type="checkbox"/> Cladded <input type="checkbox"/> Welded overlay
Int. Fixtures:	<input checked="" type="checkbox"/> Baffle		<input type="checkbox"/> Float		<input checked="" type="checkbox"/> Impingement plate		<input checked="" type="checkbox"/> Weir <input checked="" type="checkbox"/> Vortex Breaker
Recommended Actions:							NCR #:
Summary Comment:							

Additional notes on continuation page:
 Equipment is suitable for continued service:
 Inspector Certificate No.: ABSA ISBU 000159
 Terms and Conditions: Refer to opposite side for scope of services and standard of care.

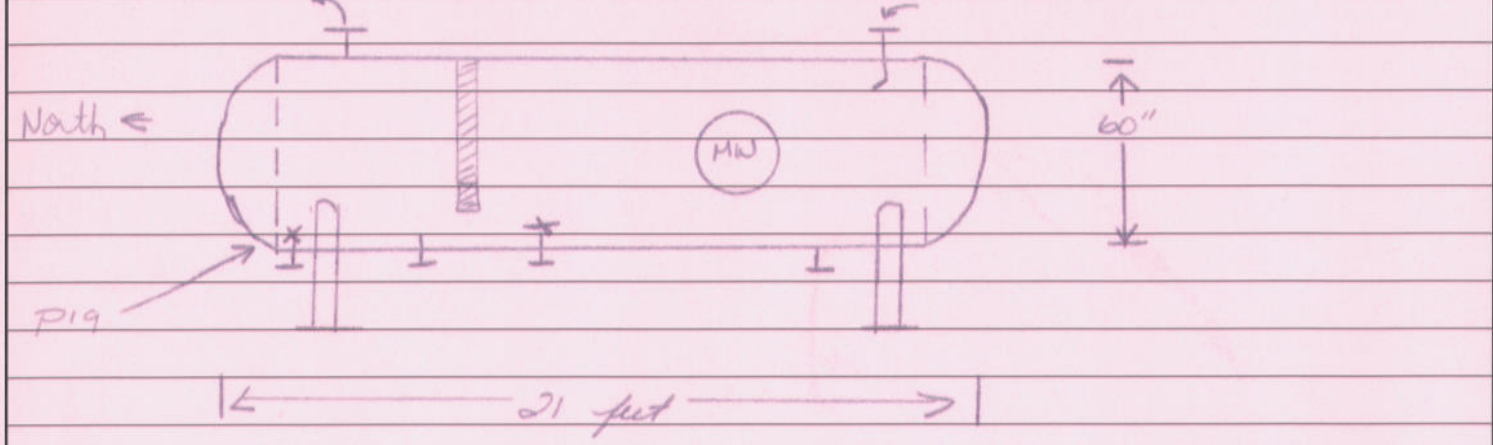
Quality Check:
 Signature of Inspector: [Signature]
 Received by: (print) Chal Greco
 Received by: (sign) _____

CONTINUATION PAGE of Report No. A - 7983

Report No.	B - 2349
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Installation External Internal Page 2 of 2.

A#: 516700 S/N#: 2129 or Other:



Interior of vessel is in as new condition. There is no internal coating. Fabrication markup is evident. No deformation, distortion, no pitting, no general metal loss is noted.

The demister is clean flexible in position & secure.

The Vortex breakers are secure.

The diverter is secure.

A 6" pig was removed from north 4" drain. All other pigs are open.

Recommended Actions:	NCR#

Additional notes on continuation page: Report No. B - _____ Signature of Inspector: [Signature]

Equipment is suitable for continued service: Received by: (print) Clot Greise

Received by: (sign) _____