



INSPECTION REPORT

EQUIPMENT NO: 750VS507 B

FACILITY: Harlan Robb

PROV. REG. NO: A 497953

EQUIPMENT NAME: Water Boot

TAG NO: 50-0507-V-801

| | SHELL | | TUBE | |
|---------|--------------|------|--------------|------|
| MAWP | <u>kpag@</u> | °C | <u>kpag@</u> | °C |
| MDMT | <u>kpag@</u> | °C | <u>kpag@</u> | °C |
| PSV Tag | <u>set@</u> | kpag | <u>set@</u> | kpag |

ITEM INSPECTED: _____ MANWAY YES NO

SERVICE: SOUR SWEET CRYOGENIC

FLUID: _____

| SCOPE OF INSPECTION | TYPE OF INSPECTION: | CLEANING: | ACCESS: |
|--|--|-------------------------------------|--|
| <input checked="" type="checkbox"/> PRECOMMISSIONING | <input type="checkbox"/> AE <input type="checkbox"/> MT <input type="checkbox"/> RT | <input type="checkbox"/> GOOD | <input type="checkbox"/> FULL |
| <input type="checkbox"/> INITIAL | <input type="checkbox"/> ET <input type="checkbox"/> MFL <input type="checkbox"/> UT | <input type="checkbox"/> FAIR | <input type="checkbox"/> PARTIAL |
| <input type="checkbox"/> REINSPECTION | <input type="checkbox"/> LT <input type="checkbox"/> PT <input checked="" type="checkbox"/> VT | <input type="checkbox"/> INADEQUATE | <input checked="" type="checkbox"/> EXTERNAL |
| | <input type="checkbox"/> OTHER | | |

ADD PAGES AND SKETCHES AS NEEDED (TURN OVER FOR CHECK LISTS)

OBSERVATIONS: EXTERNAL INTERNAL

~~There are 6 2" - 300 Blind flanges tapped~~

There are 6 2" - 300 Blind flanges tapped
1" NPT without Hub

MCR 04-09

RECOMMENDATIONS: Replace with Proper flanges before start-up

SUITABLE FOR

REMEDIAL ACTION

FURTHER SERVICE: YES NO

PRIORITY: HIGH MEDIUM LOW

INSPECTION PERFORMED BY: Brian Paulson

DATE OF INSPECTION June 8/04

FOLLOW-UP INSPECTION REQ'D: YES NO

BY DATE: _____



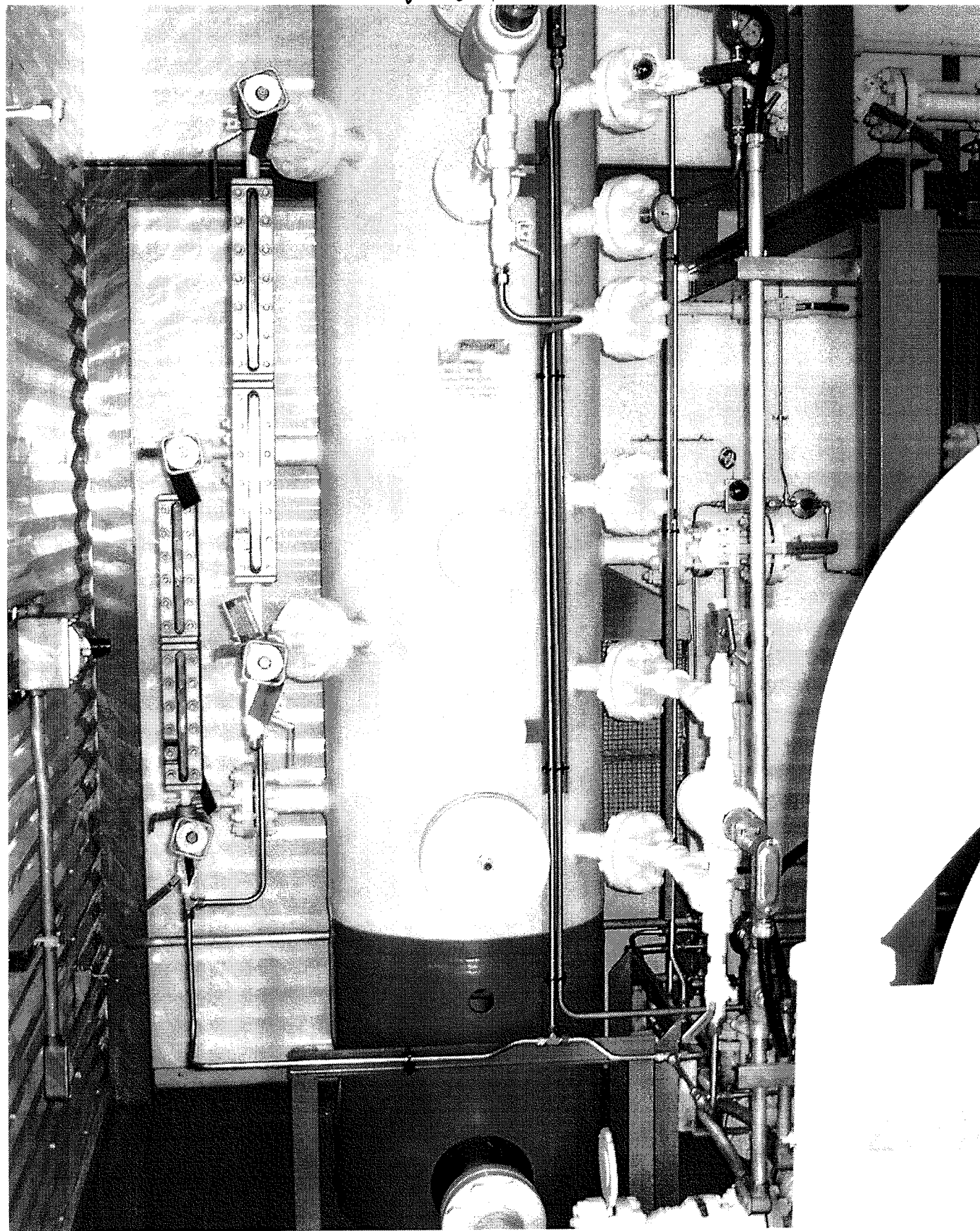
INSPECTION REPORT

EQUIPMENT NO:

| External Inspection Check List | | | |
|--|-----|----|----------|
| Item | N/A | OK | Comments |
| 1. Ladders, platforms | ✓ | | |
| 2. Foundation and supports | | ✓ | |
| 3. Dyke | ✓ | | |
| 4. Double floor/wall, interstitial space | ✓ | | |
| 5. Nozzles | | ✓ | |
| 6. Ground connections | | ✓ | Skr |
| 7. Protective coatings and insulation | | ✓ | |
| 8. External metal surfaces | | ✓ | |
| 9. Pressure relief devices | | ✓ | |
| 10. Name plate | | ✓ | |
| 11. Leak test | ✓ | | |
| 12. Cathodic protection | ✓ | | |
| 13. | | | |
| 14. | | | |
| 15. | | | |

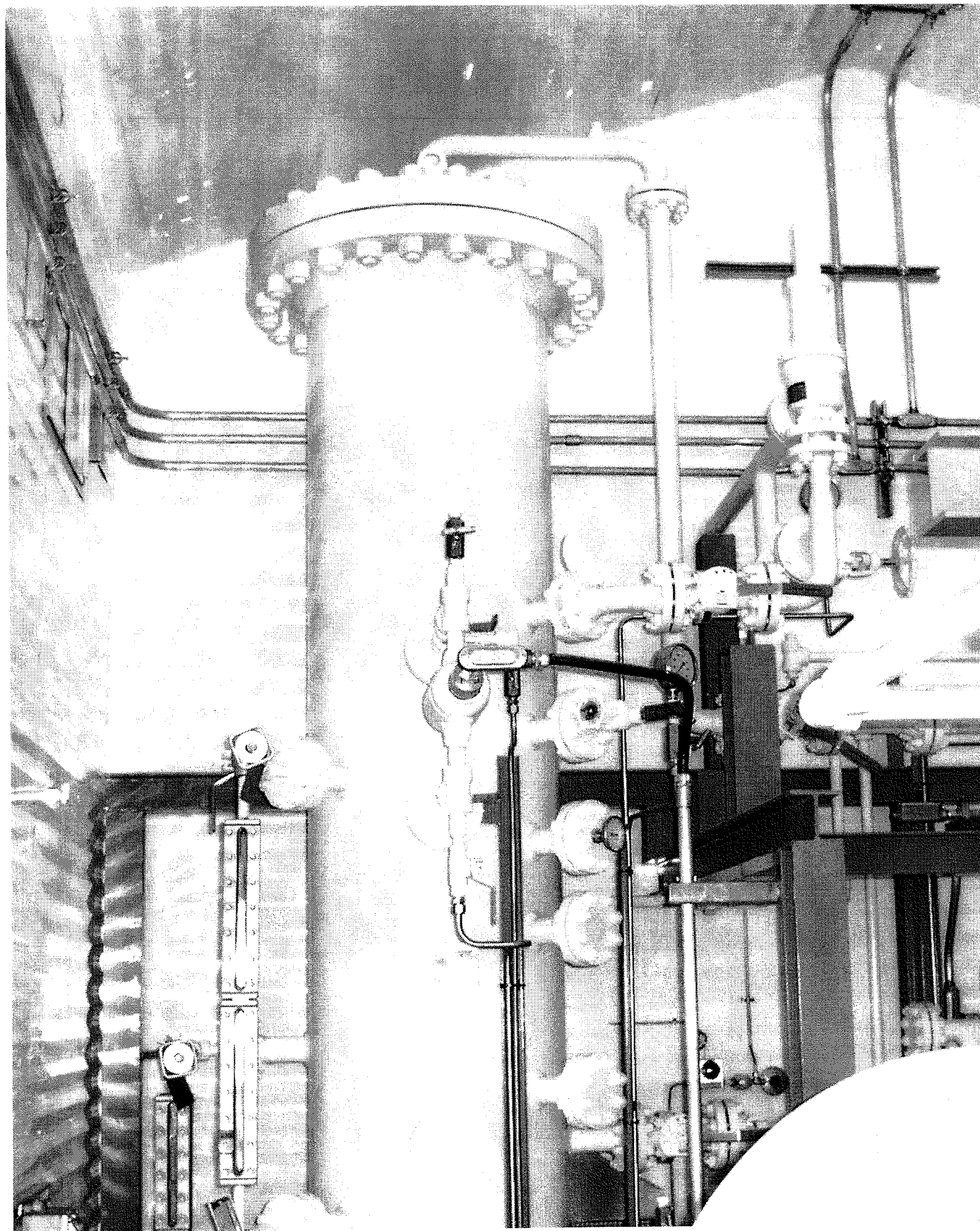
| Internal Inspection Check List | | | |
|---|-----|----|----------|
| Item | N/A | OK | Comments |
| 1. Safe vessel entry secured | | | |
| 2. Cleaning adequate for VT | | | |
| 3. Fouling before cleaning including tubes | | | |
| 4. Internal equipment checked (trays/baffles/etc) | | | |
| 5. Condition of internal surfaces | | | |
| 6. Protecting coating | | | |
| 7. Welds checked for defects | | | |
| 8. Tubes: ends/ligaments/joints/walls/fins | | | |
| 9. Tubes: thinning/pitting (internal/external) | | | |
| 10. Nozzles | | | |
| 11. Burner | | | |
| 12. Refractory | | | |
| 13. Damage marked for further inspection/nde | | | |
| 14. Cleaning for nde adequate | | | |
| 15. Nde completed | | | |
| 16. Condition of anodes | | | |
| 17. Leak test | | | |
| 18. | | | |
| 19. | | | |
| 20. | | | |

V-801



50-0507 WELLSITE JUNE 2004

V-801



V-801

CERTIFIED

Presson

REGISTERED AND PATENTED

| | | | |
|----------------|------|----------------|----------|
| NAME | 1001 | SERIAL NO. | 1001-24 |
| INCH TEMP | 1001 | WEIGHT | 15.5 LBS |
| YEAR BUILT | 1001 | DESIGN | 1001 |
| COIL ALLOWANCE | 1001 | WATER | 1001 |
| END NO. | 1001 | SHELL MATERIAL | 1001 |
| HEAD THK | 1001 | HEAD MATERIAL | 1001 |

2004/06/08