

FACILITY INSTALLATION / READINESS CHECKLIST

☒ Installation Inspection
 ☐ Start-up Readiness
☐ Relocation
 ☐ Return from Idle

REPORT #

Shop Inspector

Date

Field Inspector

Date

N/A

N/A

Greg Guenette

March 5, 2014

FACILITY INFORMATION

FACILITY:	Minehead/Ansell		LSD :	13-33-50-19W5	
Facility Description	☐ Gas Plant	☐ Oil Battery	☐ Compressor Station	☐ Satellite	☒ Sweet
	☐ Wellhead Compressor	☒ Single Well Battery	☐ Booster Compressor	☐ Sour	
Business Unit	FH-AN		Superintendent	Harold Norberg	
			Foreman	Steve Melnyk	
Facility Status	☒ New	☐ In-Service	☐ Acquired	- Previous Owner	
	☐ Moved From Other Site - Name & LSD				
General Age of Facility / Equipment	0 yrs		Winter Access Only	☐ Yes	☒ No
Facility Flow Rate	Design		Normal Operating	143 e3m3	
Facility Max Pressure	Design	9650	Normal Operating	3500 Kpa	
Facility Max Temp	Design	46 Deg C	Normal Operating	22 Deg C	
Facility Min Temp	Design	-29 Deg C	Normal Operating		

EQUIPMENT INFORMATION (Identify number at facility)

Separator	1	Glycol Contactor		Fired Heater		Meter Run	1
Pulsation Dampner		Scrubber	1	Boiler			
Treater		S & T Heat Exchanger		Storage Tank	13		
Free Water Knockout		Air Cooled Exchanger		Safety Valves	2		

INSPECTION CHECK LIST (To be completed for all new installations, Start-up, Relocation & idle equip returned to service)

Task	Sub Task	Shop Accept		Field Accept	
		Yes	No	Yes	No
Readiness Checklist (Not req'd for relocation in same operating area)	Punch-out checklist complete			X	
	Category A items resolved			X	
	Category B items action planned			X	
	License to Operate / Certificate of Inspection rec'd			N/A	N/A
Design Check (location and type verification) For relocation verify no changes have been made	Relocation - no changes made			N/A	N/A
	Equipment Layout matches Plot Plan	N/A	N/A	X	
	Pressure Equipment matches P & ID	N/A	N/A	X	
	Pressure Relief Devices match P & ID	N/A	N/A	X	
	Piping & Valves match P & ID	N/A	N/A	X	
	Instrumentation matches P & ID	N/A	N/A	X	
Inventory Check (equipment is entered in SEIM - identify any corrections or missing items on page 3 & 4 For relocation or idle return to service check SEIM against equipment,	Relocation - no changes made, all items in SEIM			X	
	Pressure Equipment	N/A	N/A	X	
	Safety Relief Devices	N/A	N/A	X	
	Storage Tanks	N/A	N/A	X	
	Press Equip reconciled to Jurisdiction list			N/A	N/A
	Inspection intervals reviewed and accepted			X	
	Jurisdiction notified of new equipment			N/A	N/A
	Relocation - all docs transferred to new site			N/A	N/A
Documentation For relocation verify all docs are transferred to new site	Shop Vendor QC Data available on site			X	
	Field Construction QC Data complete			X	
	P & ID , Piping Line List on site			X	
	Equipment & PSV Data Sheets on site			X	
	Regulatory Inspection Certificate received			X	DATA Integrity working on it
	Operating Procedures on site			X	
	PSV isolation valve log established			N/A	N/A
	Blinds and blanks removed			X	
Commissioning For relocations address items with * only	Operating gaskets in place			X	
	Start-up strainers and screens in place			X	
	* Flushing , draining & purging complete			X	
	Instrumentation calibration complete			X	
	* PSVs serviced per interval & set press correct			X	
	* PSV & other CSO valves verified			X	
	* Shutdowns & Control Logic tested & OK			X	
	* Safety Equipment in place			N/A	N/A
Integrity Readiness (See page 2 for details)	Inspections per page 2 complete & accepted			X	
	Inspection history reviewed & SEQA intervals set			X	
	PSV isolation valve procedure in place			X	
	Corrosion Inhibitors installed			X	
	Cathodic Protection system installed			X	
	Low temp start-up procedure in place			N/A	N/A
Training & Awareness (Not req'd for relocation in same operating area)	PEIM program orientation complete			N/A	N/A
	NCR process training complete			N/A	N/A
	PSV isolation valve procedure training complete			N/A	N/A
	Low temp start-up training complete			N/A	N/A

REPORT #

FACILITY INSTALLATION / READINESS CHECKLIST

DETAILED INSPECTION CHECK LIST (Not required for relocation in same operating area)

Task	Sub Task	Field Accept		Comments
		YES	NO	
Equipment Nameplate (verify in place and clearly legible) Identify any missing or incorrect SEIM data on page 3 or 4	Verified to Data Sheet	X		
	Prov. Reg Number assigned	X		
	Correct CRN for Prov. of install	X		
	Serial Number	X		
	Design Pressure	X		
	Max & Min Design Temp	X		
	Manufacturer's Name	X		
Concrete Foundation	Year Built	X		
	Deterioration Condition			
Steel Supports	Anchor Bolts Sound			
	Mechanical / Weld Condition	X		
	Paint Condition	X		
	Fireproofing condition	X		
Grounding Connections	Skirt Opening for Inspection	X		
	In Place , Secure & Condition	X		
Vessel & Nozzles Internal & External Surface	UT Thickness Survey complete	X		Date of last inspection
	Pitting / Corrosion	X		
	Scaling	X		
	Blisters & Bulges	X		
	Hot Spots	X		
	Mechanical Damage	X		
	Paint	X		
	Insulation	X		
Piping	UT Thickness Survey complete	X		Date of last inspection
	Internal / External Corrosion	X		
	Supports	X		
	Insulation	X		
	Gaskets (Type, Rating)	X		
	Bolting (Short, grade, Size)	X		
Ladders & Platforms	Leaks Present	X		
	Mechanical Condition			
	Paint / Corrosion Condition			
Pressure Relief Devices	Attachments			
	Seals in Place	X		
	Installed in Correct Location	X		
	Installed in Upright Position	X		
	PSVs serviced per Interval & set press correct	X		
	Isolation Valves Carsealed Open	X		
	No pipe stresses on inlet or outlet	X		
Instrumentation	No evidence of leakage	X		
	Installed in Correct Location	X		
	Calibration Verified	X		
Compressors	No evidence of leakage	X		
	Vibration levels (if running)			☐ High ☐ Med ☐ Low
	Dampener UT/MT Complete			Date of Last Inspection
	Bottles adequately supported			
	Piping adequately supported			
	PSVs adequately supported			

Summary of findings and recommendations: (Add page if required)

DEFICIENCIES IDENTIFIED

DEFICIENCY	Ref. IDR/NCR
1.	
2.	
3.	
4.	
5.	
6.	

SIGN-OFF

Inspector/Construction Rep	Operations Rep
Signature	Signature
Agency	Date
Date	Lead Inspector
	Signature
	Date

Greg Genneth Cert # 334
March 17/14

REPORT #
FACILITY INSTALLATION / READINESS CHECKLIST
Pressure Equipment Data To be completed only if equipment not identified in SEIM or if SEIM data is incorrect

Tag #	Item # 1	Item # 2	Item # 3	Item # 4	Item # 5	Item # 6	Item # 7	Item # 8	Item # 9
Description	3 phase sep	Fuel Gas Scrubber							
<u>SAP #</u>	66226779	66226780							
Provincial Reg #	629058								
Serial #	12878	12910							
CRN	W0947.21	F6388.231							
Manufacturer	RJV	RJV							
Year Built	2013	2013							
Shell MAWP	9928 Kpa	1035 Kpa							
Shell Max Temp	56 Deg C	38 Deg C							
Shell Min Temp	-29 Deg C	-29 Deg C							
Tube MAWP									
Tube Max Temp									
Tube Min Temp									
Shell Sweet or Sour	SWEET	SWEET							
Tube Sweet or Sour									
<u>Date of Last Inspect</u>	March 4, 2014	March 4, 2014							
<u>Req'd Interval</u>	5 YEAR	5 YEAR							

Storage Tank Data

Tag #	Tank # 1	Tank # 2	Tank # 3	Tank # 4	Tank # 5	Tank # 6	Tank # 7	Tank # 8	Tank # 9
<u>SAP #</u>	66229774	66229763	66229773	66229775	6229765	66229764	66229769	66229768	66229766
Manufacturer	HIGHLAND	HIGHLAND	HIGHLAND	HIGHLAND	HIGHLAND	HIGHLAND	HIGHLAND	HIGHLAND	HIGHLAND
Serial #	4982	4983	4984	4991	41-6164	41-6165	41-6166	41-6167	4985
Volume	400 BBL	400 BBL	400 BBL	400 BBL	400 BBL	400 BBL	400 BBL	400 BBL	400 BBL
Internal coating	YES	YES	YES	YES	YES	YES	YES	YES	YES
Insulation	YES	YES	YES	YES	YES	YES	YES	YES	YES
Firetube	NO	NO	NO	NO	NO	NO	NO	NO	NO
<u>Date of Last Service</u>	March 6, 2014	March 6, 2014	March 6, 2014	March 6, 2014	March 6, 2014	March 6, 2014	March 6, 2014	March 6, 2014	March 6, 2014
<u>Req'd Interval</u>	5	5	5	5	5	5	5	5	5

NOTE : items in *italics* to be completed by Lead Inspector



REPORT #
INSPECTOR
DATE

Storage Tank Data	Tank # 10	Tank # 11	Tank # 12	Tank # 13	Tank # 14	Tank # 15	Tank # 16	Tank # 17	Tank # 18
Tag #									
SAP #	66229771	66229767	66229770						
Manufacturer	HIGHLAND	HIGHLAND	HIGHLAND						
Serial #	4986	4987	4988						
Volume	400 BBL	400 BBL	400 BBL						
Internal coating	YES	YES	YES						
Insulation	YES	YES	YES						
Firetube	NO	NO	NO						
<i>Date of Last Service</i>	March 6, 2014	March 6, 2014	March 6, 2014						
<i>Req'd Interval</i>	5	5	5						

Security Valve Data									
Tag #	PSV # 1	PSV # 2	PSV # 3	PSV # 4	PSV # 5	PSV # 6	PSV # 7	PSV # 8	PSV # 9
<u>SAP #</u>	66226789	66226790							
Manufacturer	TAYLOR	TAYLOR							
Serial #	027393-28	026758-250							
Model #	82G12551311	82E4351311							
CRN	See Attached Report	See Attached Report							
Set Pressure									
Capacity									
Orifice Size									
Sweet or Sour									
Installed On									
<u>Date of Last Service</u>									
<u>Req'd Interval</u>	5 YEAR	5 YEAR							

[illegible]



Wizard

VALVE SERVICES LTD.

PSV Final Inspection Test Report

5811 - 2nd Ave Edson, AB. P.O. Box 7903 Edson, AB, T7E 1V9

Phone: (780) 712-4055 Fax: (780) 723-5979

INITIAL INSPECTION	REFERENCE DATA	Date: <u>12-Dec-13</u> W.O.: <u>20348</u> ID: <u>3</u> Customer: <u>Husky Oil</u> Location: <u>SURF 01-33-50-19 W5M</u> Field: <u>D.H13-33-50-19 W5M ANSEL</u> Make: <u>TAYLOR</u> Model: <u>82G12551311</u> S/N: <u>027393-28</u> Other S/N: _____ Inlet: <u>Threaded</u> Size: <u>2.00 in.</u> Outlet: <u>Threaded</u> Size: <u>2.00 in.</u> Orifice: <u>G</u> Tag: _____ Set Pressure: <u>1440</u> PSI <u>9929</u> KPA Back Pressure: _____ PSI _____ KPA Cold/Diff Set Press: _____ PSI _____ KPA Cap Assembly: <u>Closed</u> Lift Lever: <u>No</u> Capacity: <u>10.781</u> SCFM Temp: _____ Tag G: _____ Code Symbol: <u>UV</u> CRN: <u>0G01316.2C</u> Vessel ID: <u>Separator</u> Vessel No: _____ Customer Instructions: <u>Pretest and Repair</u> Reset Required: ☐ New Pressure: _____ PSI KPA: _____ New Capacity: _____																																																																																																								
	CONDITION RECEIVED	Pretest: <u>Simmer</u> : <u>1439</u> PSI <u>9,922</u> KPA Set Pressure : <u>1444</u> PSI <u>9956</u> KPA Reseat : <u>1270</u> PSI <u>8756.65</u> KPA Test Gauge ID: <u>Dig 1</u> <u>1-3000</u> Tested By: <u>SM</u> Leakage: <u>17</u> BPM Comments: _____ Visual Condition: <u>Used</u> Other: _____ Data Plate: <u>OK</u> Seal Condition: <u>Top: Intact</u> <u>Bottom: NA</u> Insignia: <u>I</u> Date of Last Service: <u>07/13</u> Indicate Fouling: <u>Carbon</u> INLET ☒ OUTLET ☒ BODY ☒ BONNET ☐ Blow Down Ring Setting (Upper): _____ No. of Notches: (Lower): _____																																																																																																								
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FINAL TEST	MEDIUM: <u>Air</u> SET PRESSURE DEFINITION: <u>Pop</u> FINAL TEST Simmer: <u>1437</u> PSI <u>9908</u> KPA Set Press: <u>1444</u> PSI <u>9956</u> KPA Reseat: <u>1369</u> PSI <u>9439</u> KPA Leakage: <u>0</u> BPM BACK PRESSURE TEST: <u>60</u> PSI <u>414</u> KPA ADJ. RING SETTING (NOTCHES) UPPER: _____ LOWER: _____ Test Gauge ID: <u>Dig 1</u> <u>1-3000</u> Tested By: <u>SM</u> Date Tested: <u>12-Dec-13</u>																																																																																																									
FINAL INSPECTION	SEAL INSTALLED: TOP ☒ BOTTOM ☐ FLANGE/ THREAD PROTECTORS INSTALLED: ☒ PRIMED / PAINTED: ☒ COMMENTS: _____ FINAL INSPECTION: <u>SM</u> CUSTOMER/INSPECTION: _____																																																																																																									



Wizard

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PSV Final Inspection Test Report

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	Ring Pin(s)	Rust			☒	☐																																																																																																				
	Bellows	NA			☒	☐																																																																																																				
	Gaskets/Seals	Rust			☒	☐																																																																																																				
Connection Ends	Rust			☒	☐																																																																																																					
Studs and Nuts	Rust			☒	☐																																																																																																					
Other	Rust			☒	☐																																																																																																					
DISMANTLE: <u>MJ</u> INSPECTION: <u>MJ</u> REASSEMBLY: <u>MJ</u>																																																																																																										
FINAL TEST	MEDIUM: <u>Air</u> SET PRESSURE DEFINITION <u>Pop</u> FINAL TEST Simmer <u>148 PSI</u> <u>1020 KPA</u> Set Press <u>152 PSI</u> <u>1048 KPA</u> Reseat <u>137 PSI</u> <u>945 KPA</u> Leakage <u>0 BPM</u> BACK PRESSURE TEST <u>60 PSI</u> <u>414 KPA</u> ADJ. RING SETTING (NOTCHES) UPPER _____ LOWER _____ Test Gauge ID: <u>Dig 1</u> <u>1-300</u> Tested By: <u>SM</u> Date Tested: <u>12-Dec-13</u>																																																																																																									
	SEAL INSTALLED: TOP ☒ BOTTOM ☐ FLANGE/ THREAD PROTECTORS INSTALLED ☒ PRIMED / PAINTED ☒ COMMENTS: _____																																																																																																									
	FINAL INSPECTION: <u>SM</u> CUSTOMER/INSPECTION _____																																																																																																									