



INSPECTION REPORT

REPORT #
TEST (PT)

INVOICE #
TEST

CUSTOMER TEST		RIG		LOCATION PRO MAG				INVOICE # TEST												
NO.	SER. #	TYPE EQUIP.	PIN DIMENSIONS			BOX DIMENSIONS				FULL LENGTH										
			PIN OD	PIN ID	BEV DIA.	PIN LTH	TONG SPACE	ACC REJ.	CONN. TYPE		BOX OD	BEV DIA.	CBORE DIA.	CBORE DEPTH	TONG SPACE	ACC REJ.				
1.	8146	STEEL PLATE	1 REJECTABLE LINEAR INDICATION FOUND. (SEE WORKSHEET)																	
2.																				
3.																				
4.																				
5.																				
6.																				
7.																				
8.																				
9.																				
10.																				
11.																				
12.																				
13.																				
14.																				
15.																				

RBP

SPECIFICATIONS:
 PRO-MAG SOP 100 200 300 400 500 600 800
 DSI 3 to 5 DSI OTHER

() Bodies F/L Bidirectional Wet Dry
 () Bodies F/L Transverse Wet Dry
 () Connections Comments PT _____
 INSPECTOR: _____ DATE: 8/15/17