



INSPECTION REPORT

REPORT # _____ INVOICE# _____

LOCATION Broussard, La

RIG _____

CUSTOMER Mayo Consulting

NO.	SER. #	TYPE EQUIP.	PIN DIMENSIONS				BOX DIMENSIONS				ACC. REJ.	TONG SPACE	CBORE DEPTH	TONG SPACE	ACC. REJ.	LENGTH	FULL LENGTH	
			PIN OD	PIN ID	BEV DIA.	PIN LTH	TONG SPACE	ACC. REJ.	CONN. TYPE	BOX OD								BEV DIA.
1.	MT-8141	Test Piece. LPI																
2.																		
3.																		
4.																		
5.																		
6.																		
7.																		
8.																		
9.																		
10.																		
11.																		
12.																		
13.																		
14.																		
15.																		

Indication found 2 3/4" down weld an was 1/2" in length an 1/16" width running longitudinal with weld.

- (1) Bodies F/L Bidirectional Wet Dry
- () Bodies F/L Transverse Wet Dry
- () Connections Comments _____

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

INSPECTOR: *[Signature]* LEVEL II

DATE: 3/20/19