

Report #:	137854-UT-WF-01	IRISNDT Job #:	137854	Date:	28MAY09	Page	1	of	1
Client:	CNRL	PO/Job #:		Contact:					
Job location:	FROG LAKE			Tel:					
	LSD: 06-32-055-03W4			Fax:					
Procedure(s):	UT-1								
Code(s):	ASME SEC VIII Div 1								

Item Inspected:	Treater - A#0218208 - SN: 26978A	Material:	CS
Method:	☒ Contact ☐ Immersion ☐ Other: _____	Surface Temp (C):	☐ < 5° ☒ > 5° / < 60° ☐ > 60°
Type:	☐ P/E ☐ T/T ☒ Dual ☐ Automated ☐ TOFD	Scanning Surface:	☐ OD ☒ ID ☐ Other: _____
Application:	☒ Laminar ☐ Shear Wave ☐ Volumetric ☐ Thickness	Surface Condition:	Smooth

Instrumentation:	Manufacturer:	Krautkramer	Type:	DMS 2	Instrument Ser. #:	01TWCC
Calibration:	Date:	06Jul09	Reference Flaw Size:		IRISNDT #:	31098
Calibration Block(s):	Type:	Step Wedge - I	IRISNDT #:	33331	Type:	
	Type:		IRISNDT #:		Type:	
Couplant:	Brand:	UTX	Type:	Echo Gel	Cable:	Type:
						Coaxial
					Length:	25in

PROBE						SETTINGS - dB			RANGE - ☒ INCHES ☐ MM		
Manufacturer	Type	Serial #	Angle	Frequency	Size	Reference Level	Scanning Level	Transfer Value	Screen Size	Skip Value	Beam Travel
Krautkramer	Dual	01TMJ6	0	5.0 MHz	0.250	58	+2 dB		1.5		

INSPECTION DETAILS

Scope:	Perform a lamination scan on the following item prior to welding to ensure no laminar flaws are in the future weld zone:
	-The area of top shell where the internal piping support bracket was removed.

Results:	No laminar flaws were noted. All areas inspected are acceptable to code.
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Assistant:	Technician:	WES FARQUHAR
☐ CGSB ☐ SNT UT Level: ☐ I ☐ II ☐ III No. #:	☒ CGSB ☐ SNT UT Level: ☒ I ☐ II ☐ III No. #:	10477
Unit: _____ Km: _____ Travel Time: _____	Signature: _____	
Start: _____ Stop: _____ Work hrs: _____		
☐ OT Meal ☐ Subsistence required Total hrs: _____	Client Name: _____	
Consumables: _____	Signature: _____	