



Client: CNRL District: Med. Hat - West Field: Taber  
 Facility: 09-17-011-16W4 Unit / Skid #: N/A LSD: 09-17-011-16W4  
 Jurisdiction #: A0429910 Equip Tag #: N/A Serial #: V-2726B  
 CRN #: N7672.2 Nat'l Bd #: N/A Year Built: 1997  
 Manufacturer: Opsco '92 Industries Equipment Description: Test Separator  
 Status: In Service - Date Removed From Service: \_\_\_\_\_ Service: Sour  
 MAWP Shell: 280 Psi @ 100 °F Height/Length: 10 Ft. Code Stamp:  Y  N  
 MAWP Tube: \_\_\_\_\_ @ \_\_\_\_\_ Size/Diameter.: 36 in. O.D. Insulated:  Y  N  
 MDMT: -20 °F RT: RT-1 Volume: \_\_\_\_\_ PWHT:  Y  N  
 Support Type: Skirt Manway:  Y  N  
 C.A.: .125 in. Coated:  Y  N Clad:  Y  N J.E.: N/A (No Remote Access)  - \_\_\_\_\_

Component	Material	Nominal Thk	Diameter	OD/ID	Tube Side	Shell Side
- Shell	SA 516 70N	0.500 in.			<input type="checkbox"/>	<input type="checkbox"/>
- Head	SA 516 70N	0.470 in.			<input type="checkbox"/>	<input type="checkbox"/>
-					<input type="checkbox"/>	<input type="checkbox"/>
-					<input type="checkbox"/>	<input type="checkbox"/>
-					<input type="checkbox"/>	<input type="checkbox"/>

Comments:  
 Nameplate secure & legible

### PSV Static Data

PSV -1 Tag #: \_\_\_\_\_ Serial #: \_\_\_\_\_ CRN: \_\_\_\_\_  
 Model #: \_\_\_\_\_ Capacity: \_\_\_\_\_ Set Pressure: \_\_\_\_\_  
 Manufacturer: \_\_\_\_\_ Service Company: \_\_\_\_\_  
 Inlet Size & Type: \_\_\_\_\_ - \_\_\_\_\_ Last Service Date: \_\_\_\_\_  
 Outlet Size & Type: \_\_\_\_\_ - \_\_\_\_\_ Block Valve: --- - - \_\_\_\_\_  
 Carseal Intact: \_\_\_\_\_ Code Stamp: \_\_\_\_\_  
 Shell Side / Tube Side: \_\_\_\_\_ Location of PSV: \_\_\_\_\_

PSV -2 Tag #: \_\_\_\_\_ Serial #: \_\_\_\_\_ CRN: \_\_\_\_\_  
 Model #: \_\_\_\_\_ Capacity: \_\_\_\_\_ Set Pressure: \_\_\_\_\_  
 Manufacturer: \_\_\_\_\_ Service Company: \_\_\_\_\_  
 Inlet Size & Type: \_\_\_\_\_ - \_\_\_\_\_ Last Service Date: \_\_\_\_\_  
 Outlet Size & Type: \_\_\_\_\_ - \_\_\_\_\_ Block Valve: - - - \_\_\_\_\_  
 Carseal Intact: \_\_\_\_\_ Code Stamp: \_\_\_\_\_  
 Shell Side / Tube Side: \_\_\_\_\_ Location of PSV: \_\_\_\_\_

### PSV Comments

No safe access to PSV. Requires JLG.



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### External Inspection Results - VE

Item	Y	N	N/A	Condition	Comment	NCR	Action Item	Priority
Nameplate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept	Secure & legible	<input type="checkbox"/>	<input type="checkbox"/>	
Foundation and Supports	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept	Supported on skirt	<input type="checkbox"/>	<input type="checkbox"/>	
Anchor Bolts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept		<input type="checkbox"/>	<input type="checkbox"/>	
Grounding	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept	On SE corner of bldg.	<input type="checkbox"/>	<input type="checkbox"/>	
Insulation Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
PSV	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		No safe access	<input type="checkbox"/>	<input type="checkbox"/>	
Shell & Heads	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept	In good condition	<input type="checkbox"/>	<input type="checkbox"/>	
Metal Surfaces (Paint)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept	In good condition	<input type="checkbox"/>	<input type="checkbox"/>	
Aux Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept		<input type="checkbox"/>	<input type="checkbox"/>	
Cathodic Protection	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Alignment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept		<input type="checkbox"/>	<input type="checkbox"/>	
Flange Connections	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept		<input type="checkbox"/>	<input type="checkbox"/>	
Pressure Gauge	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept	60 psi	<input type="checkbox"/>	<input type="checkbox"/>	
Piping from Vessel	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept		<input type="checkbox"/>	<input type="checkbox"/>	
Temperature Gauge	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept	8 C	<input type="checkbox"/>	<input type="checkbox"/>	
Sight Glass	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Accept	In good condition	<input type="checkbox"/>	<input type="checkbox"/>	
Leaks	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>		No leaks noted	<input type="checkbox"/>	<input type="checkbox"/>	
Current UT Survey	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			UT Company: Matrix		
Previous UT Survey	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			UT Company:		

#### LEGEND:

- Priority 0 - General Recommendations
- Priority 1 - Goal date is 30 days from the activity date
- Priority 2 - Goal date is 90 days from the activity date.
- Priority 3 - Goal date is 1 Year from the activity date.
- Priority 4 - Goal date is 5 Years from the activity date.

### External Visual Observations

Manual Review Required By Customer Representative -

This Test Separator is un-insulated and painted.  
 At the time of inspection, the vessel was off-line due to a power outage.  
 Nameplate is secure and legible.  
 Shell, top head, and skirt are in good condition with a few minor paint chips. Negligible corrosion at exposed areas.  
 Limited visual access to bottom head. Appears to have 100% paint loss with less than 0.005" corrosion.  
 All anchor bolts in place and secure.  
 Sight glass in good condition, with no damage or defects. Threaded connections good.  
 Pressure gauge shows no concerns. Reading 60 psi.  
 Temperature gauge also no concerns. Reading 8 C.  
 Vessel is grounded on the SE corner of the building. Ground wire is securely attached with no damage visible.  
 No misalignment visible.  
 No leaks noted at time of inspection.

UT was carried out with GE DMS2 IRISNDT#31098.  
 TML 40 (bottom head) has a low UT reading at .304". Nominal head thickness is .470". Due to limited access to bottom head, only a small portion of the head was included in the scan.

Refer to the attached photos, UT data and drawing for details.

5311 – 86 Street, Edmonton, Alberta T6E 5T8 Phone: (780) 437-2022 Fax: (780) 438-1436  
 Calgary (403) 279-6121  
 Lloydminster (780) 875-6455  
 Barhead (780) 674-3018  
 Nisku (780) 955-7616

Cold Lake (780) 594-1114  
 Fort McMurray (780) 743-1536  
 High Level (780) 956-4094  
 Red Deer (403) 347-1742  
 Medicine Hat (403) 527-6284

Corpus Christi, TX (361) 888-4700  
 Deer Park, TX (281) 476-4444  
 Matrix, Houston, TX (713) 722-7177  
 Texas City, TX (490) 945-2262  
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**Internal Inspection Results – VI N/A (Not Applicable)**

Item	Y	N	N/A	Condition	Comment	NCR	Action Item	Priority
Shell	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Heads	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Manway	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Gasket Surfaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Welds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Refractory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Heating Coils	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Demister Pad	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Vane Pack	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Baffles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Trays	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Filter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Internal Coating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Tubesheet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	
Tube Bundle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	

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**Internal Visual Observations**

Manual Review Required By Customer Representative -

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### Equipment Photographs:

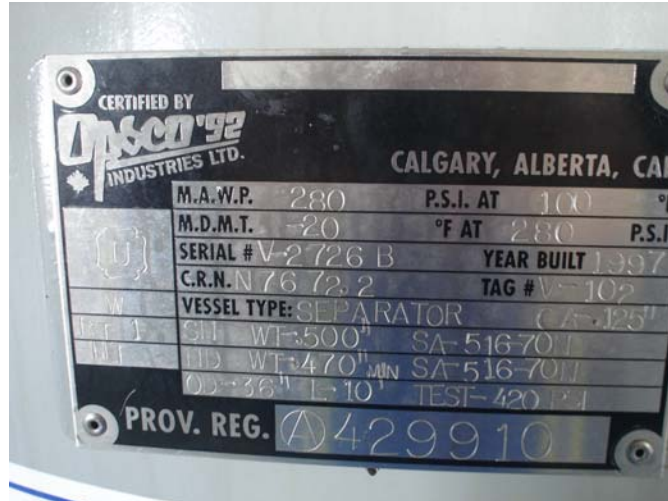


Figure 1\_Nameplate\_16April2010



Figure 2\_Sideview\_16April2010

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**Figure 3\_Bottom Head\_16April2010**