



**PRESSURE VESSEL
VISUAL INSPECTION
REPORT**

Report #: **91590-MD-05**
 Inspect Date: 06/29/2011
 Page: 1 of 10
 Insp. Co. Job #: 91590

Criticality Designation:



Insp. Comp: Matrix_Inspection District: St Albert - South Field: Morrin 1327
 Location: 11-16-031-20W4 Unit / Skid #: Group Inlet Bld LSD: 11-16-031-20W4
 Jurisdiction #: A0431756 Equip Tag #: _____ Serial #: 96-8771-1
 CRN #: M2318.21 Nat'l Bd #: _____ Year Built: 1997
 Manufacturer: WELLS-HALL FABRICATION LTD Equipment Description: Other: INLET SEPARATOR
 Status: In Service - Equip. Type: Vessel: Separator Service: Sweet
 MAWP Shell: 720 Psi @ 100 °F Volume: _____ Code Stamp: Y N
 MAWP Tube: _____ Psi @ _____ °F Height/Length: 114.17 in. Insulated: Y N
 MDMT: -20 °F RT: RT-1 Size/Diameter.: 36.00 in. PWHT: Y N
 Support: Skirt Vessel on Original CNRL Inventory List: Y N Manway: Y N
 C.A.: _____ in. Coated: Yes Clad: No J.E.: N/A Remote Access: - _____

| Component | Material | Nominal Thk | Diameter | OD/ID | Tube Side | Shell Side |
|----------------|----------|-------------|------------|-------|--------------------------|-------------------------------------|
| 1 Main - Shell | | 0.875 in. | 36.000 in. | OD | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 2 - Head | | 0.960 in. | 36.000 in. | OD | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 3 - Head | | 0.960 in. | 36.000 in. | OD | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 4 - | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 - | | | | | <input type="checkbox"/> | <input type="checkbox"/> |

Static Data: Confirmed Changed (See Comments)

Comments:

static data updated

PSV Static Data

PSV -1 Tag #: PSV431756 Serial #: CE-3914-KD CRN: 0G254.5C
 Model #: 2741U Capacity: 5609 SCFM Set Pressure: 720 psi
 Manufacturer: Farris Service Company: Power Comm
 Inlet Size & Type: 2.00 in. - Threaded Last Service Date: 5/05/2009
 Outlet Size & Type: 2.00 in. - Threaded Block Valve: N/A - -
 Carseal Intact: Yes Code Stamp: Yes
 Shell Side / Tube Side: Shell Side Out for Service During Insp.: N Location of PSV: On Vessel

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: _____ Out for Service During Insp.: _____ Location of PSV: _____

PSV Comments

Proper venting and set pressure



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External Inspection Results – VE External Inspection Performed

| Item | N/A | Condition | Comment (Check Status Bar or Press F1 for Help) | NCR | Action Item Integrity | Action Item Maintenance |
|-------------------------|-------------------------------------|-----------|--|--------------------------|--------------------------|----------------------------|
| Nameplate | <input type="checkbox"/> | Accept | sure and legible | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Foundation and Supports | <input type="checkbox"/> | Accept | skid foundation with skirt support | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Anchor Bolts | <input type="checkbox"/> | Accept | no evidence of damage | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Grounding | <input type="checkbox"/> | Accept | grounded by skid | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Insulation Condition | <input checked="" type="checkbox"/> | | vessel is not insulated | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| PSV | <input type="checkbox"/> | Accept | proper venting and set pressure | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Shell Heads & Nozzles | <input type="checkbox"/> | Accept | condensation noted during inspection | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Metal Surfaces (Paint) | <input type="checkbox"/> | Accept | well adhered with a scratch | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Aux Equipment | <input type="checkbox"/> | Accept | adequately supported | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Cathodic Protection | <input checked="" type="checkbox"/> | | no anodes for inspection | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Alignment | <input type="checkbox"/> | Accept | level with skid | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Flange Connections | <input type="checkbox"/> | Accept | correct bolting and thread engagement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Pressure Gauge | <input type="checkbox"/> | Accept | 0 - 1000 pi | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Temperature Gauge | <input type="checkbox"/> | Accept | -40-160 °F | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Sight Glass | <input type="checkbox"/> | Accept | clean and intact | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Ladder / Platform | <input checked="" type="checkbox"/> | | no ladders or platforms | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Leaks | <input type="checkbox"/> | No | evidences of previous leaks noted | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Piping from Vessel | <input type="checkbox"/> | Accept | secure and well supported | | | |
| Previous UT Survey | <input checked="" type="checkbox"/> | No | N/A | | | UT Company: N/A |

External Visual Observations

The overall condition of the separator is good. It should be noted that the separator was not in use during the inspection; the sight glass was empty and pressure was 0.

There is evidence of previsions leaks noted at the flange connections to the sight glass piping.

Condensation was observed on the inside building portion of separator at the time of inspection.

There in minor corrosion in the tell-tale holes of the reinforcement pads on the vessel.

A UT corrosion Survey was performed using a DMS 2 with no significant wall lose noted at the time of inspection

There is a scratch on the shell (north side ~ 7' from grade) extending upwards ~ 19". the depth was not mensurable due to how tight it is. This should be verified to be free of non-linear or crack-like indication prior to operating.

Recommendations:

Buff off paint to perform MT examination to determine if any indication has propagated into the shell, or perform shear wave ultrasonic examination to determine if there is any depth to this suspect area.

Maintain regulatory inspection to ensure safe operation and continued use.



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Internal Inspection Results – VI N/A (Not Applicable)

| Item | N/A | Condition | Comment (Check Status Bar or Press F1 for Help) | NCR | Action Item Integrity | Action Item Maintenance |
|------------------|-------------------------------------|-----------|--|--------------------------|--------------------------|--------------------------|
| Shell | <input type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Heads | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Manway | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Gasket Surfaces | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Welds | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Refractory | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Heating Coils | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Demister Pad | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Vane Pack | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Baffles | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Trays | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Filter | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Internal Coating | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tubesheet | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tube Bundle | <input checked="" type="checkbox"/> | | No Internal Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Internal Visual Observations

No Internal Inspection Carried Out

Recommendations:

No Internal Inspection Carried Out



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Firetube Static Data N/A (Not Applicable)

Diameter: Not Applicable Nom Thickness: Not Applicable Bend: Not Applicable
 Length: Not Applicable Firetube Description: Not Applicable
 Firetube NDE Performed: UT Report#: Not Applicable ET Report#: Not Applicable
 MT Report#: Not Applicable RT Report#: Not Applicable
 PT Report#: Not Applicable Other Report#: Not Applicable

Firetube Inspection Results

| Item | N/A | Condition | Comment (Check Status Bar or Press F1 for Help) | NCR | Action Item Integrity | Action Item Maintenance |
|-----------------|-------------------------------------|-----------|--|--------------------------|--------------------------|--------------------------|
| Burner | <input type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Stack | <input checked="" type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Flange (Throat) | <input checked="" type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Tube Sheet | <input checked="" type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Hot Side | <input checked="" type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Miter | <input checked="" type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Return Bend | <input checked="" type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Supports | <input checked="" type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Butt Welds | <input checked="" type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Fillet Welds | <input checked="" type="checkbox"/> | | No Firetube Inspection Carried Out | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Firetube Visual Observations

No Firetube Inspection Carried Out

Recommendations:

No Firetube Inspection Carried Out



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Vessel NDE and Final Summary:

NDE Performed: UT Report#: _____ ET Report#: _____
MT Report#: _____ RT Report#: _____
PT Report#: _____ Other Report#: _____

Maxi-Trak Observations Summary (Summarize inspection results Max 255 Characters):

There is a scratch on the shell (north side ~ 7' from grade) extending upwards ~ 19". the depth was not mensurable due to how tight it is.

Maxi-Trak Recommendations Summary (Summarize Recommendations Max 255 Characters):

Buff off paint to perform MT examination to determine if any indication has propagated into the shell, or perform shear wave ultrasonic examination to determine if there is any depth to this suspect area

Actions Corrected at Time of Inspection: (If actions were corrected at the time of Inspection – note the corrected actions here.)

None

Additional Visual Observations

None

Any other safety concerns or observations from associated equipment: (for example associated piping, buildings, pumps etc...)

None



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Thickness and Remaining Life Evaluation “ Must be Completed”

MUST BE COMPLETED AND RESOLVED WITH CNRL IMMEDIATELY UPON DISCOVERY OF LOW WALL THICKNESS AREAS

Step 1: Was any thickness measurement location found to be less than (Nominal WT – Corrosion Allowance)?: **No**

If YES, proceed to Step 2; if NO, proceed to “Crack Evaluation” and “CNRL Criticality Designation”.

Step 2: Which component(s) were found below (Nominal WT – Corrosion Allowance)?

Components found below Nom - CA:

| Components |
|------------|
| N/A - N/A |
| N/A - N/A |
| N/A - N/A |
| N/A - N/A |
| N/A - N/A |

Perform Steps 3 – 8 for each component with actual thickness less than (Nominal WT – Corrosion Allowance).

Step 3: Describe Location and Extent of Corrosion:

| Components | Location and Extent of Corrosion |
|------------|------------------------------------|
| N/A - N/A | Not Applicable for this Inspection |
| N/A - N/A | Not Applicable for this Inspection |
| N/A - N/A | Not Applicable for this Inspection |
| N/A - N/A | Not Applicable for this Inspection |
| N/A - N/A | Not Applicable for this Inspection |

Notes:
 Not Applicable for this Inspection

Step 4:

- For shells and nozzles, calculate minimum required thickness (T-min) as per ASME Section VIII UG-27.
- For heads, calculate minimum required thickness (T-min) as per ASME Section VIII UG-32.

| Components | T-Min |
|------------|-------|
| N/A - N/A | N/A |
| N/A - N/A | N/A |
| N/A - N/A | N/A |
| N/A - N/A | N/A |
| N/A - N/A | N/A |



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Thickness and Remaining Life Evaluation (Continued)

Step 5: Is any measured thickness less than calculated minimum required thickness (T-min)? **N/A**

*If YES, complete Step 6
If NO, proceed to Step 7..*

Step 6: Is nature and extent of pitting acceptable as per API 510? **N/A**

Step 7: Calculate Remaining Life as per API 510. How? (Find last reading; use nominal thickness if nothing available). Short Term Corrosion Rates and Long Term Corrosion Rates.

| Components | Remaining Life (Yrs) |
|------------|----------------------|
| N/A - N/A | N/A |
| N/A - N/A | N/A |
| N/A - N/A | N/A |
| N/A - N/A | N/A |
| N/A - N/A | N/A |

Step 8: Contact CNRL Integrity Coordinator to discuss above results.

- Name of CNRL contact: Not Applicable for this Inspection
- Date and time of conversation: Not Applicable for this Inspection

Summary/results of conversation:
Not Applicable for this Inspection

Crack Evaluation by Magnetic Particle or Alternative Inspection “Must be Completed”

MUST BE COMPLETED AND RESOLVED WITH CNRL IMMEDIATELY UPON DISCOVERY OF CRACK-LIKE INDICATIONS

Were any indications found to suggest the vessel contained cracks? **N/A**

If NO, proceed to “CNRL Criticality Designation”.

If YES, Contact CNRL Integrity Coordinator to discuss results.

- Name of CNRL contact: Not Applicable for this Inspection
- Date and time of conversation: Not Applicable for this Inspection

Summary/results of conversation:
Not Applicable for this Inspection



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CNRL Criticality Evaluation - MUST BE COMPLETED

The CNRL In-Service Pressure Vessel Inspector MUST answer all the following questions

- 1. Is the vessel fit-for-service? : Yes
2. Was the measured thickness less than the calculated minimum required thickness (T-min) for any component?: No
3. Were MT indications found?: N/A
4. Was the remaining life less than 6 years for sour service vessels or less than 10 years for sweet service vessels?: No
5. Were NCR's or Action Items generated as a result of the inspection? : No
6. Were UT readings below (Nominal WT - Corrosion Allowance) found? : No

Information on CNRL Owner User Program - Criticality Designation and Required Review

RED - Vessel Inspection Results are deemed RED if one of the following occurred:

- The measured thickness was less than the calculated minimum required thickness (T-min) for any component.
MT indications were found.
The remaining life was calculated to be less than 6 years for sour-service vessels or less than 10 years for sweet-service vessels.

RED inspection reports must be signed off by the CNRL Chief Inspector.

YELLOW - Vessel Inspection Results are deemed YELLOW if one or more of the following occurred:

- The vessel was declared NOT fit-for-service by the 3rd Party In-Service PV Inspector.
NCR's or Action Items were generated as a result of the inspection.
UT readings below (Nominal WT - Corrosion Allowance) were found.

YELLOW inspection reports must be signed off by the CNRL Pressure Equipment Integrity Coordinator.

GREEN - Vessel Inspection Results are deemed GREEN if all of the following are true:

- The vessel was declared fit-for-service by the 3rd Party In-Service PV Inspector.
UT readings below (Nominal WT - Corrosion Allowance) were NOT found.
MT indications were NOT found.
NCR's or Action Items were NOT generated as a result of the VE inspection.

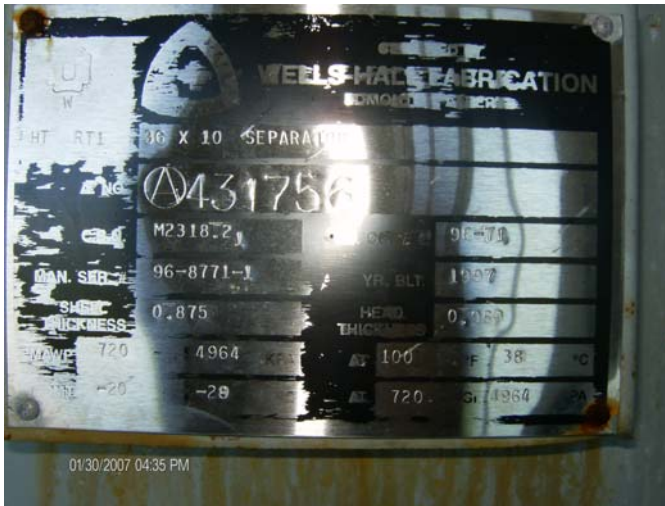
GREEN inspection reports must be signed off by the 3rd Party In-Service Pressure Vessel Inspector.

Criticality Designation [Red] [Yellow] [Green]

Vehicle #: Kms:
Time In: 00:00 Time Out: 00:00 Hrs
Personnel:
Billing Info:

Inspector (Name): Matthew B Dickinson PESL:
Inspector (Signature): API: 39483
CNRL Coordinator (Name):
CNRL Coordinator (Signature):
CNRL Chief Inspector (Signature): (I am in full agreement with report contents)

Equipment Photographs:



01 nameplate



02 overview



02.1 outside overview



03 previous process leak



04 gouge like scratch



05 PSV overview



06 condensation on tank



Pic 043