

Report #: **124515-BV-08** IRISNDT Job #: **124515** Date: **MAY 21, 2008** Page **1** of **1**
 Client: **CNRL** PO/Job #: _____ Contact: **MIKE STREET**
 Job location: **PRINCESS EAST, ALBERTA** Tel: **(403) 502 5920**
LSD 09-16-020-11W4M Fax: _____
 Procedure(s): **UT THICKNESS**
 Code(s): **ASME SECTION V111**

Item Inspected: **A0137252 Glycol Contactor** Material: **C.S.**
 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: **Good**

Instrumentation: Manufacturer: **Krautkramer** Type: **DMS-2** Instrument Ser. #: **31530**
 Calibration: Date: **Jan 10, 2008** Reference Flaw Size: _____ IRISNDT #: **31530**
 Calibration Block(s): Type: **Step Wedge - I** IRISNDT #: **32560** Type: _____ IRISNDT #: _____
 Type: _____ IRISNDT #: _____ Type: _____ IRISNDT #: _____
 Couplant: Brand: **Echogel** Type: **971** Cable: Type: **Coaxial** Length: **36"**

PROBE						SETTINGS - dB			RANGE - <input type="checkbox"/> INCHES <input type="checkbox"/> MM		
Manufacturer	Type	Serial #	Angle	Frequency	Size	Reference Level	Scanning Level	Transfer Value	Screen Size	Skip Value	Beam Travel
Krautkramer	Dual	01F988	0	8.0 MHz	0.250	55dB	+6 dB				

INSPECTION DETAILS

Scope: **Carry out UT Examination of the A0137252 Glycol Contactor. Check for corrosion of the Shell, and Head to verify the integrity for service and identify any areas of concern . Examination revealed the following:**

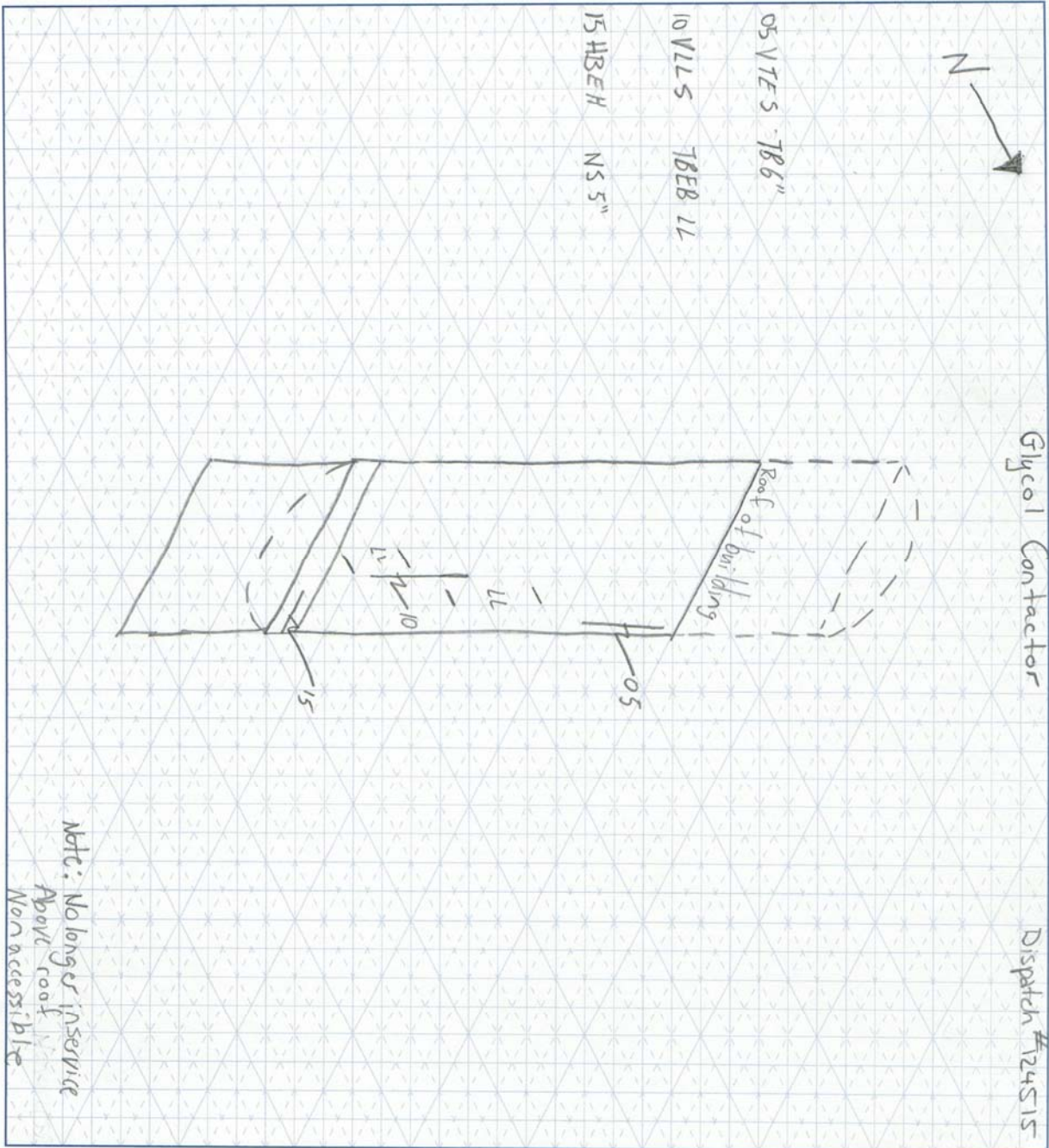
Results: **UT examination was carried out; all readings taken were 10"band scans with three readings per band/location. Minimum, Maximum and Average readings were taken in each location and recorded.**

All readings were found to be above nominal on the Shell and bottom Head.
No areas of concern were found at time of inspection.

Recommendations: Continue to carry out Visual External inspection at the next opportunity and also continue to carry out UT Corrosion survey at the required frequency.

See Attached Drawing, pictures and UTM file for Locations and thicknesses recorded.
Final Comment:
A0137252 Glycol contactor is fit for continued service.

Assistant: TRACY BARS <input type="checkbox"/> CGSB <input type="checkbox"/> SNT UT Level: <input type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III No.#: _____	Technician: BLAIR VERGE <input checked="" type="checkbox"/> CGSB <input type="checkbox"/> SNT UT Level: <input checked="" type="checkbox"/> I <input type="checkbox"/> II <input type="checkbox"/> III No.#: 5586
Unit: 393 Km: _____ Travel Time: _____ Start: _____ Stop: _____ Work hrs: _____ <input type="checkbox"/> OT Meal <input type="checkbox"/> Subsistence required Total hrs: _____ Consumables: _____	Signature: _____ Client Name: _____ Signature: _____



CUSTOMER: CNRL FACILITY: Princess East LSD: 9-16-020-11 W4m
 P & ID: _____ DRAWN BY: T. Barsi DATE: May 21/08 DRAWING NO. _____

VESSEL INFORMATION:
 Equip. No. _____ Pro. Reg. No (A) 0137252 C.R.N. 63446.2 Serial No. 15-1523 Yr. Inst. _____
 Code/Div. _____ Size: 20" ID / OD X _____ Manufacturer: Natco Ltd Yr. Blt. 1974
 C. Stamp _____ Service: _____ PWHT: _____ J.E.: _____ Radiography: RT-2 Insulated: _____

HEAD:
 Top Mat'l A-516 Top Nom. .937 Top C.A. _____ SHELL: Material A-53B Nominal 1.031 C.A. _____
 Btm Mat'l _____ Btm Nom. _____ Btm C.A. _____

BOOT:
 Head Mat'l _____ Head Nom. _____ Head C.A. _____ CHANNEL: Top Mat'l _____ Top Nom. _____ Top C.A. _____
 Shell Mat'l _____ Shell Nom. _____ Shell C.A. _____ Btm Mat'l _____ Btm Nom. _____ Btm C.A. _____

MAWP Shell side: 1400 psi @ Temp. 100°F MAWP Tube Side: _____ @ Temp. _____

PIPING INFORMATION:
 Circuit. No. _____ Line No. (s) (PLEASE PUT LINE NUMBERS ON APPLICABLE LINES ON THE DRAWING)
 Piping Class _____ Service: _____ Yr. Blt. _____
 MAWP: _____ @ Temp. _____ Size & Schedule of Piping (PLEASE PUT APPROPRIATE SIZES AND SCHEDULES OF PIPING ON DRAWING)