

ULTRASONIC EXAMINATION REPORT

Customer: CNRL Rpt. No.: UT- 350-01
 Location: NATCO LEDUC FAB. SHOP Job #: 350
 Examination of: FIRE TUBE Date: MAY 07/08
 Part/Serial Number: A0102602 P.O.: _____
 Acceptance Standard: ASME VIII DIV.1 APPX.6 Page: 1 of 1
 Examination Standard: ASME V ART.7

Ultrasonic Equipment:

Make: KRAUTKRAMER Model: USN 58L Serial No.: 001N9JT Cal Date: MAY/07
 Cal Due Date: MAY/08 Cal Blocks: STEP WEDGE Couplant: UTX T.V. _____
 Scanning Limitations: _____

Transducer Angle	Frequency (MHZ)	Crystal Size (mm)	Primary Response (db) (%)	Scanning Sensitivity (dB)	Calibration Range (mm)
0	5	.5"	80 FSH	AS NEEDED	25mm

EXAMINATION RESULTS:


SCOPE: TO CARRIE OUT UT THICKNESS MEASUREMENTS ON THE ABOVE LISTED FIRE TUBE. THE MEASUREMENTS WERE TAKEN AT THE 12, 3, 6, 9 O'CLOCK POSITION ON THE FIRE TUBE AND MITER ENDS.

RESULTS: PLEASE SEE THE FOLLWING ATTACHED FIRE TUBE REPORT FOR UT READINGS.

Note: Root welds were confirmed using internal visual inspection methods.

VISUAL INSPECTION PERFORMED PRIOR TO ULTRASONIC EXAMINATION.
 INTERPRETATION IS DONE IN ACCORDANCE WITH THE ABOVE MENTIONED STANDARDS, TO THE BEST OF MY PROFESSIONAL ABILITY.

Technicians:

Print: PETER SMITH CGSB/ASNT Level: II Reg. #: 6417 Sign: 
 Ass't: AARON COWIE CGSB/ASNT Level: II Reg. #: 11597 Sign: _____

THE ABOVE REPRESENTATION IS A PROFESSIONAL OPINION, FINAL INTERPRETATION IS THE RESPONSIBILITY OF THE CUSTOMER. I HAVE REVIEWED AND AM IN FULL AGREEMENT WITH THIS REPORT.

Customer representative: _____ Date: _____

Total Hours: _____ S.T. _____ O.T. _____ Time In: _____ Time Out: _____ KM. _____ Subs. _____

Consumables used: _____