

Procedures: MT 2V Code: ASME Section VIII Div. 1 App 6	Job / P.O. #: Client: CNRL Location: Britnell LSD: 12-09-081-22W4 Item Inspected: Treater A#0403456	IRISNDT #: 137922 Date: 22-Aug-09
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Surface Condition: Painted <input type="checkbox"/> Sandblasted <input type="checkbox"/> Machined <input type="checkbox"/> As Cast <input type="checkbox"/> As Forged <input type="checkbox"/> Weldment <input type="checkbox"/> Other <input checked="" type="checkbox"/>
Magnetizing Equipment: Yoke <input checked="" type="checkbox"/> Coil <input type="checkbox"/> Prod <input type="checkbox"/> Bench: Headshot <input type="checkbox"/> Central Conductor <input type="checkbox"/> Coil <input type="checkbox"/> IRISNDT #: 40194 Mfg: Parker Calibration Date: 02-Jun-09
Blacklight: <input type="checkbox"/> IRISNDT #: Mfg: Calibration Date: - -
Whitelight: Battery Powered Min. 3V <input type="checkbox"/> Held within 30cm (12in) of the inspection surface 110V Power Min. 60W Bulb <input checked="" type="checkbox"/> Held within 30cm (12in) of the inspection surface
Method of Magnetization: AC <input checked="" type="checkbox"/> DC <input type="checkbox"/> Continuous <input checked="" type="checkbox"/> Residual <input type="checkbox"/>
Magnetic Particles: Dry <input type="checkbox"/> Wet <input checked="" type="checkbox"/> Red <input type="checkbox"/> Grey <input type="checkbox"/> Black <input checked="" type="checkbox"/> Fluorescent <input type="checkbox"/> Batch #: 909 Mfg: Magnaflux Type: 8A
Background: <input checked="" type="checkbox"/> Batch #: 949 Mfg: Ardrex Type: 8901W

Scope: Perform a wet black magnetic particle inspection (MPI) on the following items for the fire tube from Treater A#0403456:

- All external welds on the product side of the tube sheet.

Results: No relevant indications were found, all items inspected are acceptable to code.

Inspection Limitation(s):		
Unit #: 432 In: Out: Hrs: In: Out: Hrs: Personnel:	Kilometers: Consumables:	Interpretation by: SNT-TC-1A II Wes Farquhar C.G.S.B. II C.G.S.B. # 10477 _____ (Signature) I am in full agreement with report contents: Client Representative: _____