|  |  |  |
| --- | --- | --- |
| **REPORTE DE SERVICIO** | | |
| 1 | | 2025-06-14 {{ HORA}} |
| Quesqui 4 | PM-206 | Cardenas |
| **SERVICIOS SOLICITADOS** | | |
| Tipo de servicio: ☐ Programado ☐Preventivo ☐ Correctivo ☐Inspección ☐ Formación | | |
| **DETALLES DEL COMPONENTE** | | |
| Top-Drive Canrig 1275AC865 1431 | | |

{{DESCRIPCION}}

**{{NOTAS}}**

|  |
| --- |
| **CERTIFICADOR (CLIENTE): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CATEGORIA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **FICHA / NO. ID:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **FIRMA\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **ESPECIALISTA TEC:**  **FIRMA\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **COORDINADOR ESPECIALISTA / SUPERVISOR DE TALLER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ FIRMA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |