SCOPE OF WORK

Sl.	Description	Specification	P&C	HR	HSE/ safety	DOC	CMT	TOTAL
1	Gate pass book small	150 page (50x3 pages with same sl. no. in 3 diff. colours – 1st page white, 2nd page pink, 3rd page yellow) size 20x16cm, paper-60GSM. Print text as per sample	250		1	1		252
2	Convey note	As per sample: 250 page (50 x 5 pages)	75			-		75
3	Store delivery slip book 1st & last page bounded	150 page (50x3 all pages in white colour – 1st page 75 GSM, 2nd & 3rd pages 60 GSM) size 20x16cm. Print text as per sample.	30			-		30
4	Working paper (noting sheet) Green	A-4 (100 nos. sheet per Pkt.) Print text as per sample. Paper-70GSM	4	10 pkts.		3 Packets		17
5	File cover	Size 34x25 Print text as per sample	50	50		100		200
6	Drilling DPR as per sample	Each booklet of 100 pages (50 pages & 50 pages pink, 1 white & pink page makes 1 set) Print text as per sample. Paper-70GSM				45		45
7	Rig Building DPR					12		12
8	Letter head (HR)	A-4 size. Print text as per sample. Paper-70GSM. 500 sheets per pkt. (new address)		20 pkts.		-		20
9	Letter head (DS)	A-4 size. Print text as per sample. Paper-70GSM. 500 sheets per pkt. (new address)	2			3		5
10	Brown envelop, with ongc logo and address	9"x 4" as per sample.	50	500 nos.		-		550
11	Brown envelop, with ongc logo and address.	11"x 5" as per sample.	50	200 nos.		-		250
12	Cloth envelop	11" x 5" as per sample.	50	500 nos.		1 Packet		551
13	Cloth envelop	15" x 10" as per sample.		100 nos.		-		100
14	Cloth envelop	15" x 12" as per sample.		30		-		30
15	Cloth envelop	A4 size. as per sample.		50		1 Packet		51
16	Hot Work Permit	(100 pages in triplicate & tricolor)			20			20
17	Cold Work Permit	(100 pages in triplicate & tricolor)			20			20
18	Form'U'	(100 pages) As per sample			2			2

19	Form A- including Part A & part B	(100 pages) As per sample			10			10
20	Form 'D'	(100 pages) As per sample			10			10
21	Gas monitering	(100 pages) As per sample			10			10
22	Safety Critical Bypass	(100 pages) As per sample			6			6
23	Crane Inspection	(100 pages) As per sample			20			20
24	Tool box talk	(100 pages) As per sample			30			30
25	Shift Hand over Register	(100 pages) As per sample			20			20
26	Daily Checklist 67 Points	(100 pages) As per sample			10			10
27	Daily Checklist 67 Points (Rig SS-1500)	(100 pages) As per sample			2			2
28	Management of Change	(100 pages) As per sample			12			12
29	SIMOPS	(100 pages) As per sample			10			10
30	Transport register	As per sample		2	3			5
31	Material requirement register	As per sample		5				5
32	Appouintment/declaration of competent Person	As per sample in duplicate (100 pages)			15			15
33	Dy Mine Manager Diary	(100 Pages) As per Sample			10			10
34	Mine Manager Register	(100 Pages) As per Sample			5			5
35	Installation Manager Diary	(100 Pages) As per Sample			15			15
36	Spot Inspection Register	(100 Pages) As per Sample			15			15
37	Generic List of Safety Critical Equipment	(100 Pages) As per Sample			15			15
38	Spud Meeting	(120 Pages) As per Sample in duplicate			30			30
39	Entry Permission for Non ONGC	(100 Pages in triplicate and tricolor)			10			10
40	TEED Inspection Register	(100 Pages) As per Sample			15			15
41	Standard operating Procedure	(100 Pages) As per Sample			25			25

Note: Proof reading shall be done by DS-ONGC and only after that the item shall be printed.

1. **Gate Pass Sample.**

ऑयल एण्ड नेचुरल गैस कॉरपोरेशन लिमिटेड
OIL & NATURAL GAS CORPORATION LTD.
DRILLING SERVICES AHMEDABAD

माल देनेवाले के स्थान पर जांच हेतु
(For Consignee's Check Post)

Sr. No. **5551**

गेट पास/GATE PASS

दिनांक / Date.....

स्टेशन / Station

माल किसको दिया / Despatch to.....

ग्रुप / Group - D/S

सं. Item No.	माल का विवरण Articles	मात्रा Quantity	टिप्पणी Remarks
1	2	3	4

Received the above meterials
प्राप्त कर्ता के हस्ताक्षर / Signature of Indentor's Agent

प्रमाणित कर्ता / Authorised by

नाम / Name _____

होदा / Designation _____ Store & Purchase Officer
भंडार एवं क्रय अधिकारी

हस्ताक्षर ईन्चार्ज / स्टोर कीपर
Signature of I/C / Store Keeper
With Seal

2. Convey Note Sample

OIL AND NATURAL GAS CORPORATION LTD.

AHMEDABAD ASSET

DRILLING SERVICES

CONVOY NOTE

Sl. No. Date : _____

From : _____ To : _____

RIG _____ _____

Veh. No. _____ G. P. No. _____ Date _____

Sl. No.	Description	Census No. Asset No.	Qty	Remarks

Distribution :

Consignee Copy _____

Signature of Collector

Name _____

Designation _____

Signature of Despatcher

Name _____

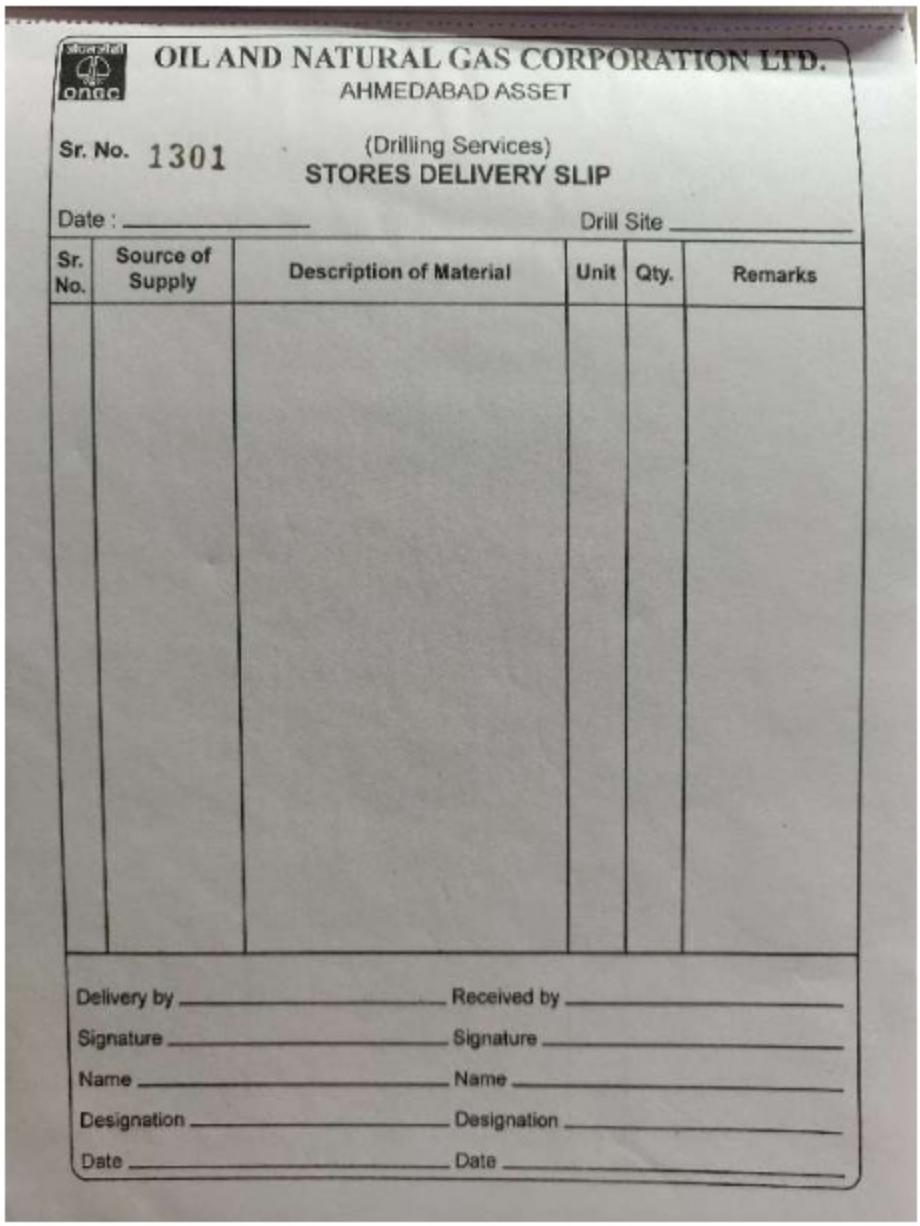
Designation : _____

Signature of DIC. / Incharge receiving material

Name _____

Designation _____

3. **Store delivery slip book**



OIL AND NATURAL GAS CORPORATION LTD.
AHMEDABAD ASSET

Sr. No. 1301

(Drilling Services)
STORES DELIVERY SLIP

Date : _____ Drill Site _____

Sr. No.	Source of Supply	Description of Material	Unit	Qty.	Remarks

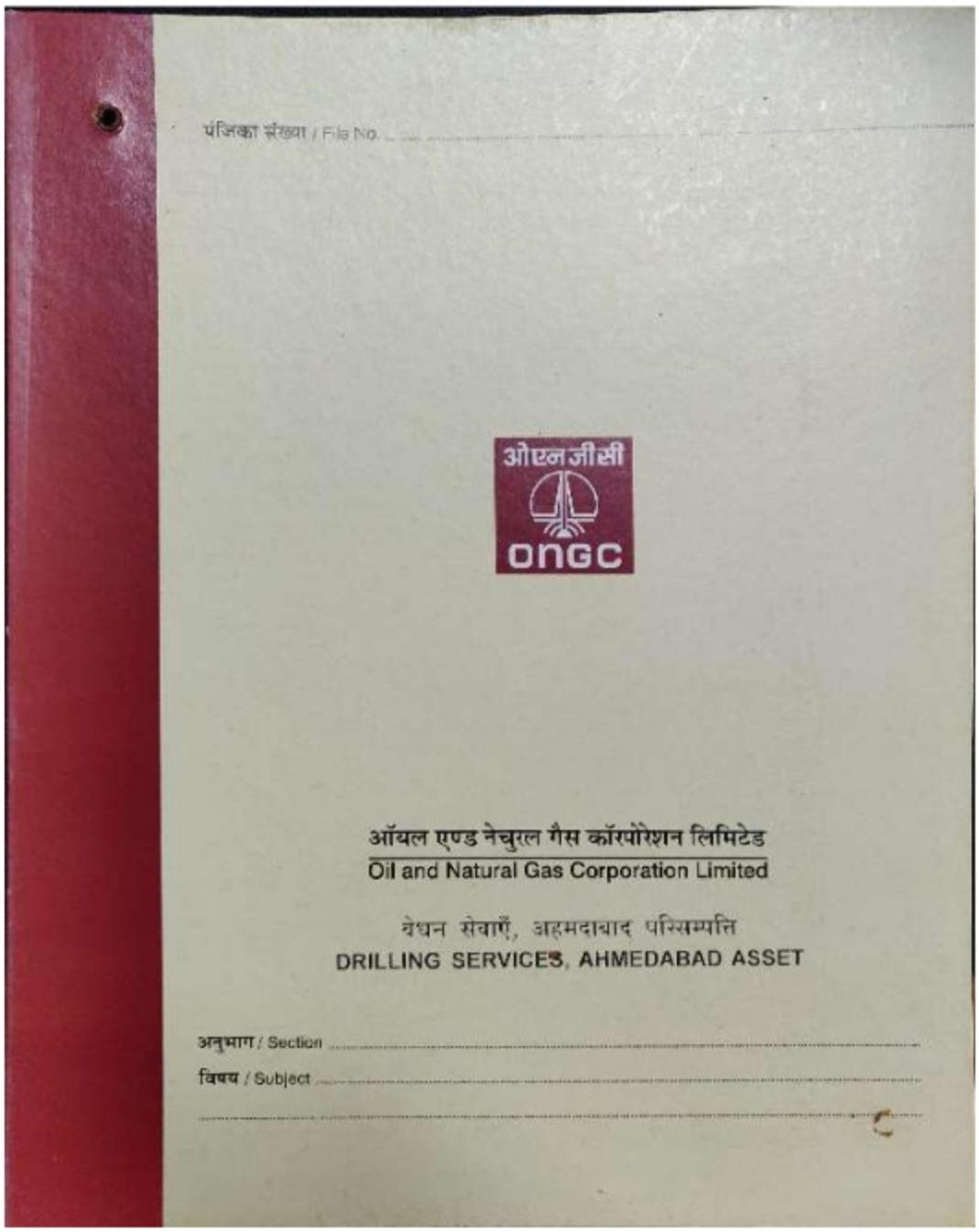
Delivery by _____ Received by _____
Signature _____ Signature _____
Name _____ Name _____
Designation _____ Designation _____
Date _____ Date _____

4. **Working Paper**

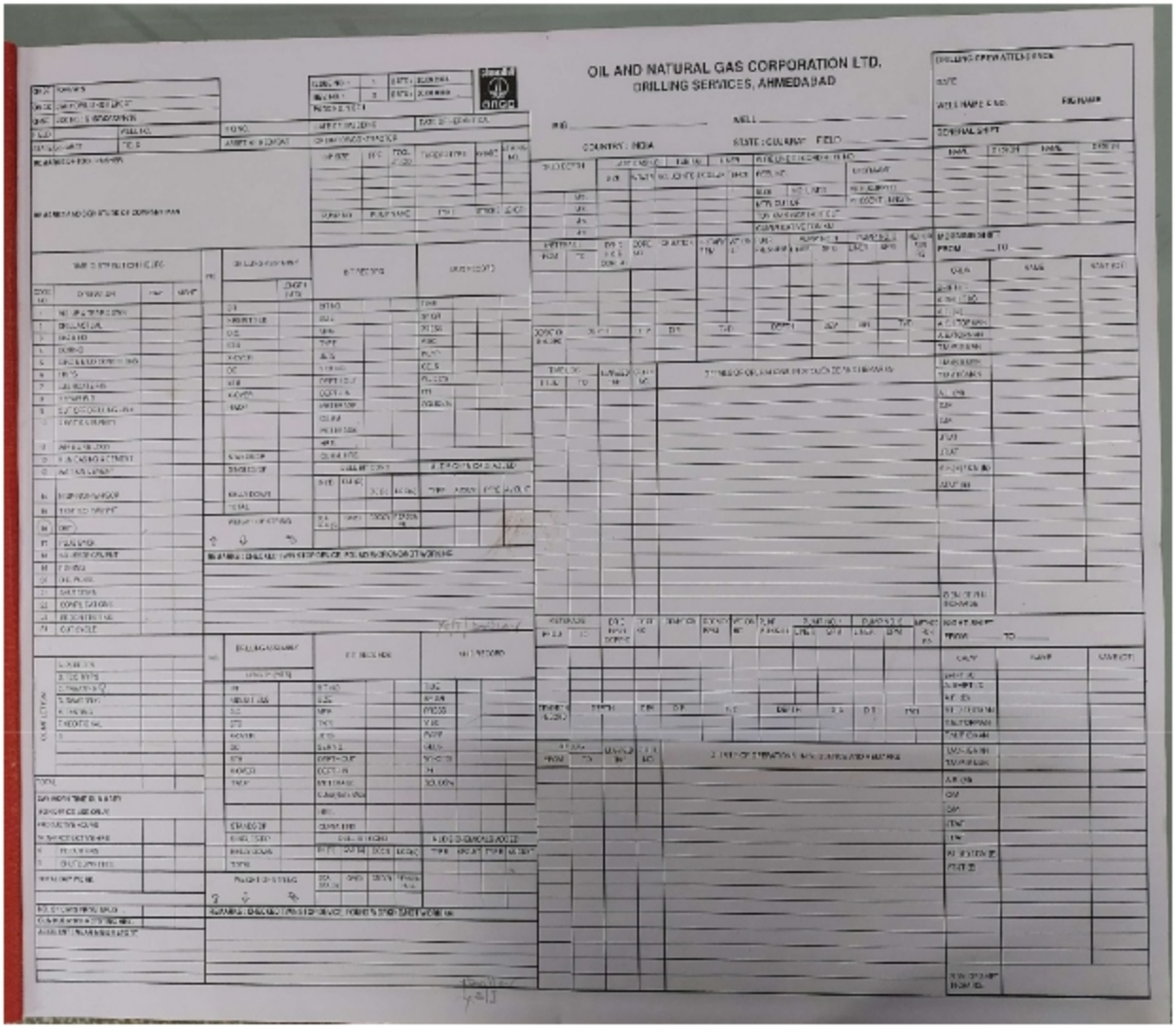
सार्थक पत्र
Working Paper

ओएनजीसी
ONGC

5. **File Cover**


पंजिका संख्या / File No.
ओएनजीसी
ONGC
ऑयल एण्ड नेचुरल गैस कॉरपोरेशन लिमिटेड
Oil and Natural Gas Corporation Limited
वेधन सेवाएँ, अहमदाबाद परिसम्पत्ति
DRILLING SERVICES, AHMEDABAD ASSET
अनुभाग / Section
विषय / Subject

6. **Drilling DPR**



7. **Rig Building DPR**

OIL AND NATURAL GAS CORPORATION LIMITED

DAILY RIG DISMANTLING / TRANSPORTATION / RIG BUILDING PROGRESS REPORT

(DRILLING SERVICES, AHMEDABAD)

QHSE/QPM/RB/08 ISO - 9001 (7-1)

	QHSE FORMATS
QHSE	DOC No.: ( ) QHSE/QF/DPR/38
FIELD	WELL NO.

LOCATION : NEW _____ DATE _____ RIG : _____

OLD _____ DISTANCE BETWEEN OLD & NEW SITE _____ KMS.

DATE & TIME OF RIG RELEASE FROM OLD SITE : _____

	DETAILS OF JOBS DONE	DETAILS OF MATERIAL RECEIVED/DISPATCHED
MORNING SHIFT FROM ____ TO ____		
GENERAL SHIFT FROM ____ TO ____		

RIG CREW	MORNING SHIFT	GENERAL SHIFT
SHIFT I/C		
A.SHIFT I/C		
A.E. (D)		
A.E./TOPMAN		
A.E./TOPMAN		
T.M./RIGMAN		
T.M./RIGMAN		
T.M./RIGMAN		
A.E.(M)		
CM		
JTWT		
JTWT		
AE(E)/CM(E)		
ATWT(E)		
SHIFT I/C		
A. SHIFT I/C		
A.E. (D)		
A.E./TOPMAN		
A.E./TOPMAN		
T.M./RIGMAN		
T.M./RIGMAN		
T.M./RIGMAN		
A.E.(M)		
CM		
JTWT		
JTWT		
AE(E)/CM(E)		
ATWT(E)		

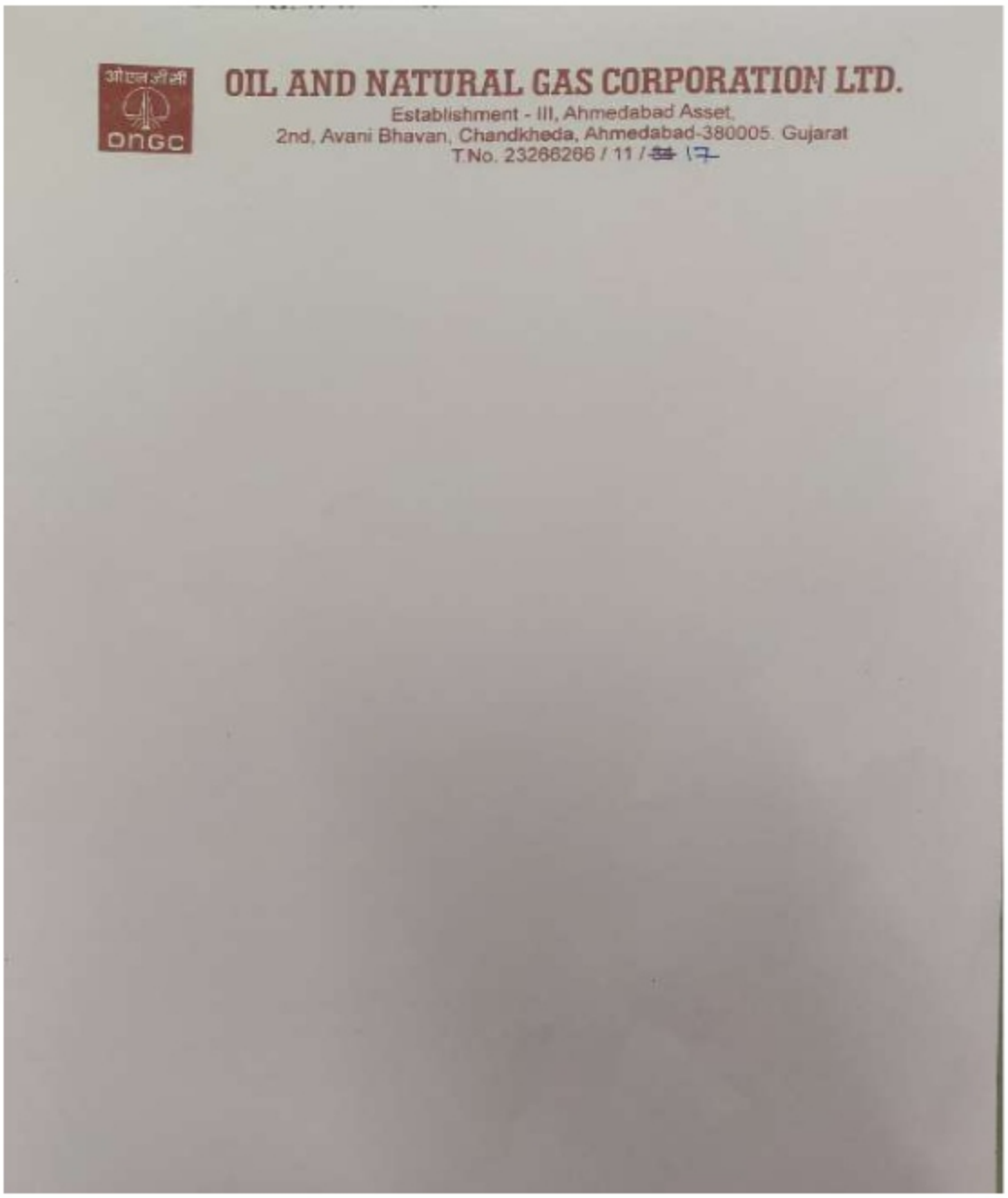
AVAILABILITY OF TRANSPORT FLEET								SHUT-DOWN/HOLD-UPS		
		SITE		MORNING SHIFT		GENERAL SHIFT				
CRANE	CAPACITY	OLD	NEW	FROM	TO	FROM	TO	FROM	TO	REASONS
TURCK	75 T									
	40 T									
	"									
	"									
	"									
	"									
	20 T									
	"									
	9 T									
TRAILER	TYPE									
	L/BED									
	SLIBED									
	HBED									

NAME OF TPT CONTRACTOR

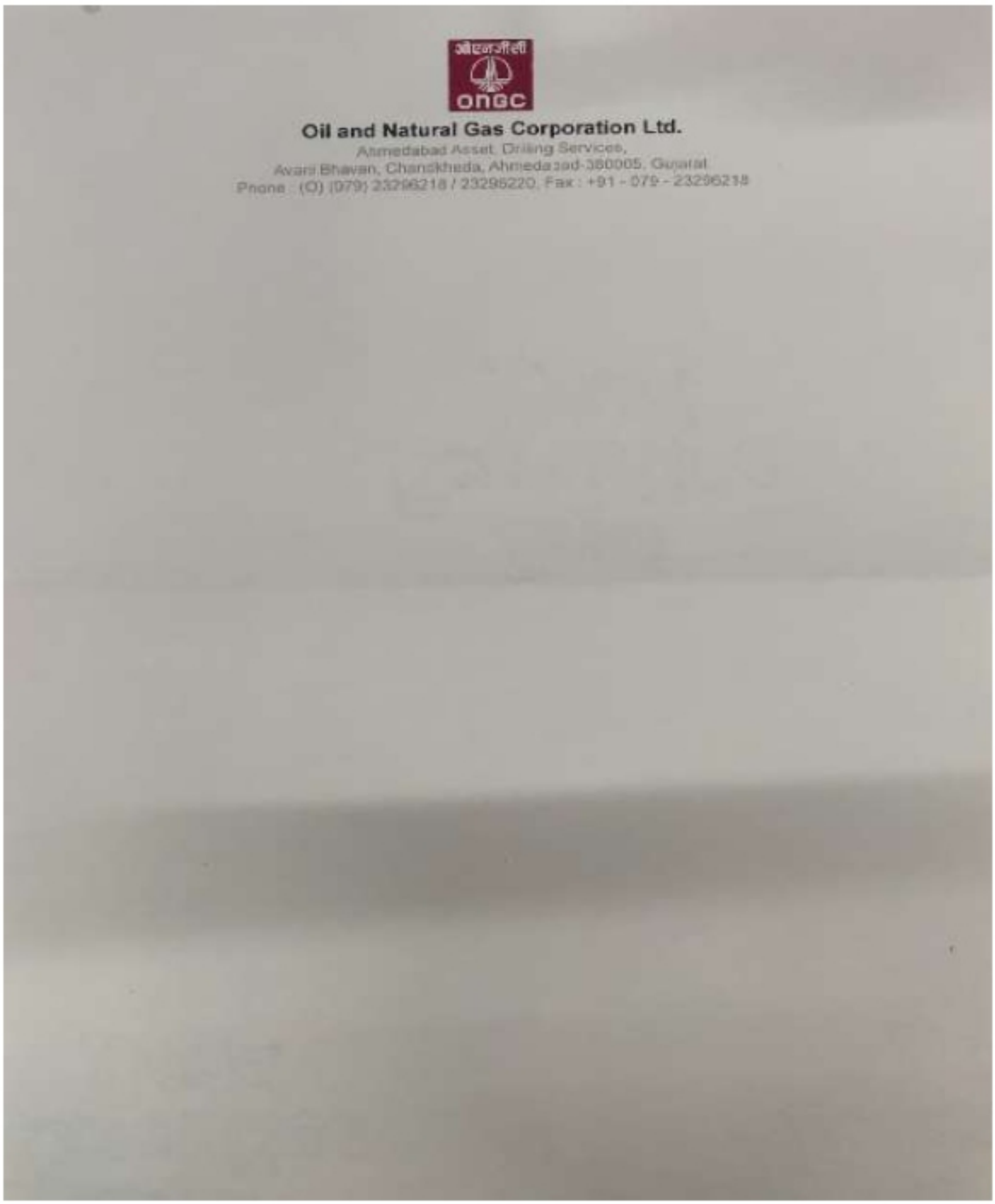
ACCIDENT / NEAR MISS REPORT

STATUS OF CIVIL JOBS	GENERAL REMARKS OF
1. APPROACH ROAD 2. SITE HARDENING 3. FENCING 4. CHEMICAL PLATFORM 5. APPROACH ROAD TO CHEMICAL PLATFORM 6. CHEMICAL STORE HOUSE 7. SECURITY GUARD HUT 8. GROUTING OF ANCHORS FOR TOPMAN ESCAPE DEVICE 9. TOILET & URINAL 10. DRINKING WATER TANK 11. SOAK PIT NEAR DRINKING WATER TANK 12. FIRE TANK 13. WASTE PIT 14. OIL PIT 15. TECHNICAL WATER 16. OTHERS	MORNING SHIFT INCHARGE GENERAL SHIFT INCHARGE INSTALLATION MANAGER
a. b. c.	

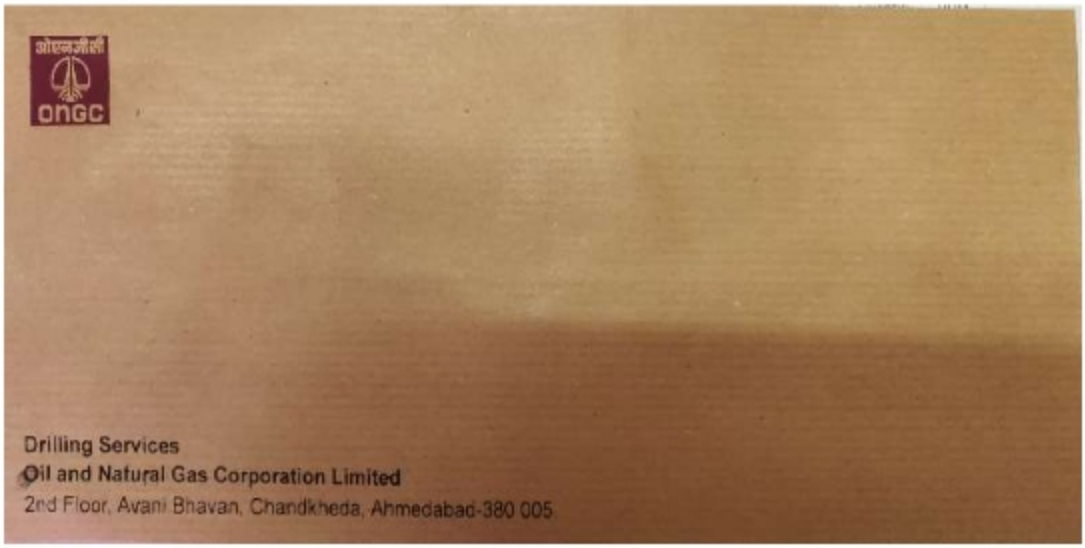
8. **Letter Head (HR)**



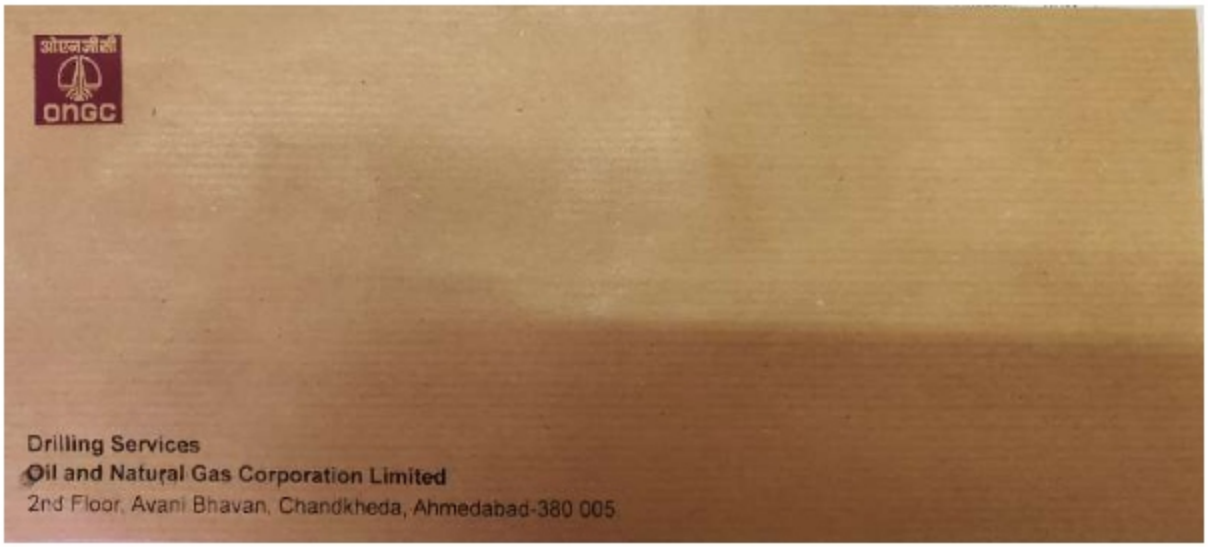
9. **Letter Head (DS)**



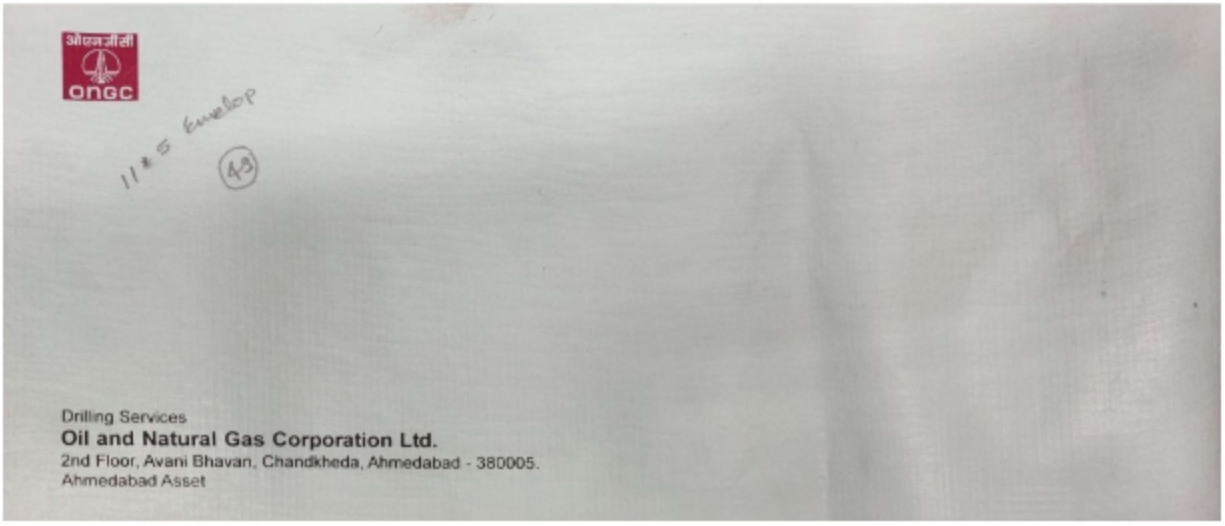
10. Brown Envelop with ONGC logo and Address



11. Brown Envelop with ONGC logo and Address



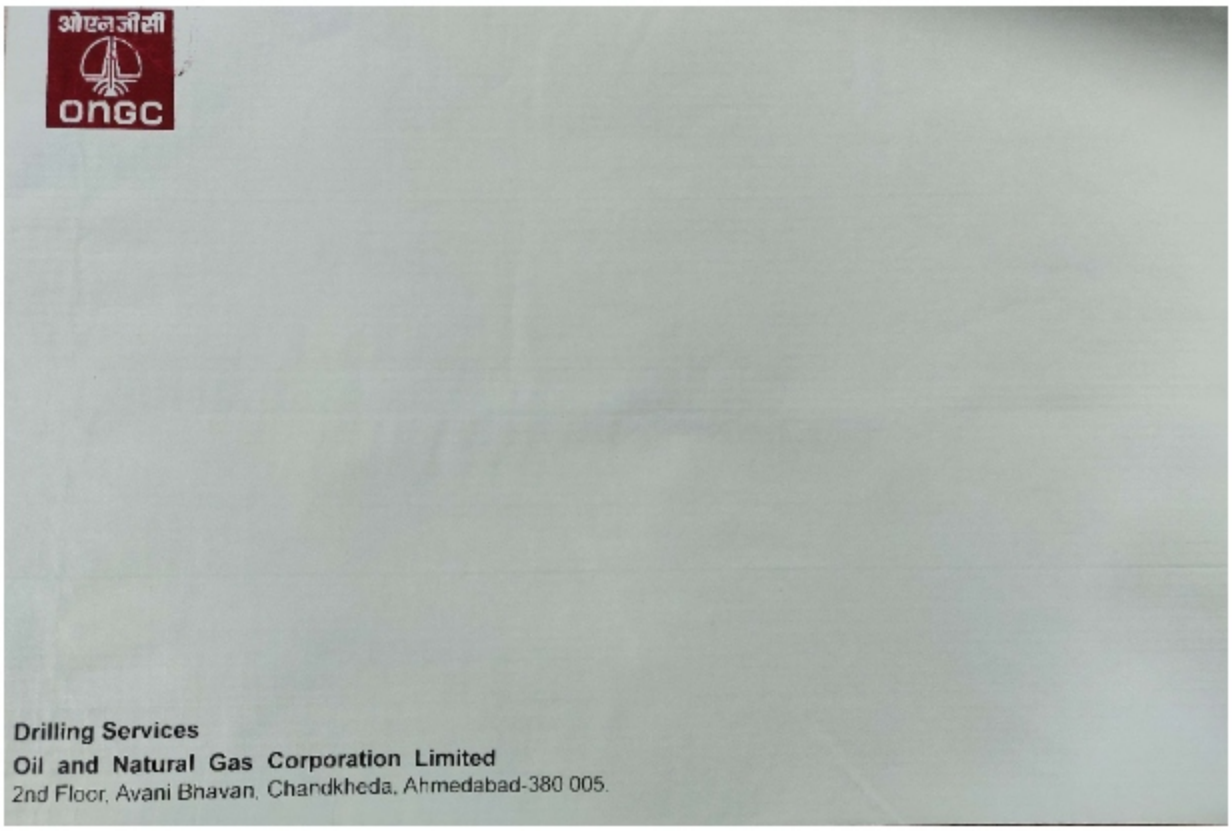
12. Cloth Envelop Sample with ONGC Logo & Address



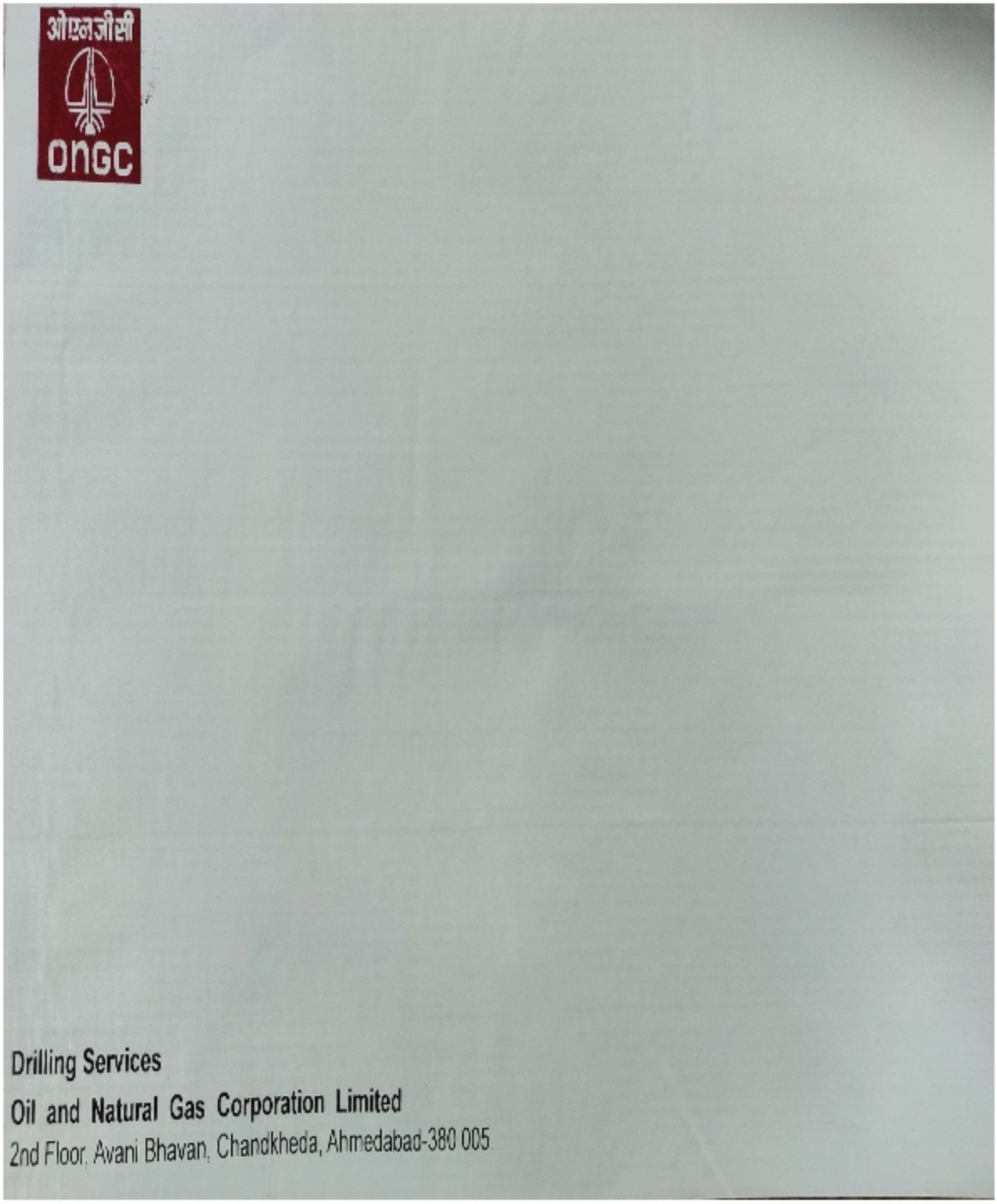
13. Cloth Envelop Sample with ONGC Logo & Address

Write P&C in Place of MPPC in the above Envelope.

14. Cloth Gutter Envelop



15. Cloth Envelop (A4 Size) with ONGC LOGO and Address.



16. Hot Work Permit

Attached in PDF format with file.

Print in Set of three, 1 set of Pink color, 2nd set of Yellow Color and 3rd set of Light Blue color.

17. Cold Work Permit
Page 1 (front)

Attached in PDF format with file.

Print in Set of three, 1 set of Light Blue color, 2nd set of Yellow color and 3rd set of Pink color.

18. Form 'U'

FORM - U

(See Rule 29 R and S)

Name of Mine	Owner	Manager	Place / Installation Inspected
Inspected by	Date	Accompanied by	

Sr. No.	Observation	Remedial measure suggested	Action taken for remedial neasure	Date on which action taken	Remarks if
			PRINT IN SET OF 03 Page - 1. White Page - 2. Pink Page - 3. yellow - Perforate		
	Signature of workmen's Inspector with date	Signature of Manager	Signature of Mine official accompaning the workmen's Inspector		

Print in Set of Three pg. 1 WHITE, Pg. 2 PINK and Pg. 3 YELLOW

19. Form 'A'- including part A and Part B.

SCHEDULE [See rule 2(1)]

FORM A

FORMAT OF EMPLOYEE REGISTER

[Part-A: For all Establishments]

Name of the Establishment _____ Name of Owner _____ LIN _____

SL No.		
1	Employee Code	
2	Name	
3	Surname	
4	Gender	
5	Father's/Spouse Name	
6	Date of Birth*	
7	Nationality	
8	Education Level	
9	Date of Joining	
10	Designation	
11	Category Address *(HS/S/SS/US)	
12	Type of Employment	
13	Mobile	
14	UAN	
15	PAN	
16	ESIC IP	
17	LWF	
18	LWF AADHAAR	
19	Bank A/c Number	
20	Bank	
21	Branch (IFSC)	
22	Present Address	
23	Permanent	
24	Service Book No.	
25	Date of Exit	
26	Reason for Exit	
27	Mark of Identification	
28	Photo	
29	Specimen Signature/Thumb Impression	
30	Remarks	

*(Highly Skilled/Skilled/Semi Skilled/Un Skilled)

*Note: In case the age is between 14 to 18 years, mention the nature of work, daily hours of work and intervals of rest in the remarks Column.

Mine Manager/ Dy Mine Manager Store keeper or Installation Manager

[PART B: FOR THE MINES ACT, 1952 (35 of 1952) ONLY]

Sl.No.		
1	Sl. Number in Employee Register	
2	Name	
3	Token Number Issued	
4	Date of First Appointment with present Owner	
5	Certificate of fage/fitness taken (for 14 to 18 Years)	
6	Place of Employment (Underground/Open cast/Surface)	
7	Certificate of Vocational Training	
8	Number / Date	
9	Nominee	
10	Name	
11	Address	
12	Adult Person to be contacted in case of Emergency	
13	Name and Relationship	
14	Address	
15	Mobile	
16	Remarks	
17	*Signature of Mines Manager	

*Not necessary in case digital form.

Mine Manager/ Dy Mine Manager Store keeper or Installation Manager

20. Form D (Page 1 & 2 are combined)

5

FORM D

ATTENDANCE REGISTER

Name of Establishment _____

For the Period From : _____ To _____

Sl. Number in Employee Register	Name	Relay or sat work	Date		1	2	3	4	5	6	7	8	9	10	11	12
				IN												
				OUT												
				IN												
				OUT												
				IN												
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				IN												
				OUT												

P for Restt. for Paid Leave / A for Absent/D for Weekly Off/C for Establishment Closed

FORM D

ATTENDANCE REGISTER

Name of Owner _____ LIN _____

Place of Work : Surface

13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Summary No. of Days	Remarks No. of hours	*Sign of Register Keeper

21. Gas Monitoring

Gas Monitoring Register

Month Well Rig

Date	Location				HC (LEL-5% and UEL-15% by volume)	H2s (LEL-5% and UEL-15% by volume)	Remarks	sign
	well mouth	shale shaker	old well	derrick floor				

Counter sign by
(Installation Manager)

22. Safety Critical Bypass

ओएनजीसी ONGC	DRILLING SERVICES AHMEDABAD SAFETY CRITICAL EQUIPMENT BYPASS REGISTER	DOC.NO. AMD/DS/QHSE/SCEB/	
		ISSUE NO:05	DATE:15.06.2021
		REVISION NO:00	DATE :15.06.2021

Critical Protection Bypass Register:

S. No.	Date & Time Bypassed	SCE Description	Tag No	Reason for Bypass	Person On Duty	Date & Time Back in Service	Person on Duty	Approving Authority	Suggested mitigation measures if any/	For shift handover, I have reviewed and confirmed that this Bypass Register is correct and updated	Incoming Shift responsible person: I have reviewed bypass

Size.
[illegible]

Finish the
[illegible]

23. Crane Inspection

ओएनजीसी ONGC	DRILLING SERVICES AHMEDABAD CRANE INSPECTION	DOC.NO. AMD/DS/QHSE/CI/	
		ISSUE NO:05	DATE:15.06.2021
		REVISION NO:00	DATE :15.06.2021

Name of Installation:				Well No:
Date:	Crane 1	Crane 2	Crane 3	Crane 4
Contractor (M/s.)				
Vehicle Registration No.				
A. Manpower				
1. Trained Operator (Mr.)				
Driving License Number				
Driving License(valid up to)				
2. Slinger (Mr.)				
(Mr.)				
3. Helper (Mr.)				
4. Kits & Liveries				
4a. Helmet				
4b. Safety Shoes				
4c. Hand Gloves				
4d. Dungaree				
B. Equipment				
1a. RC Book (Valid up to)				
1b. Insurance (Valid up to)				
1c. Road Tax (Valid up to)				
1d. PUC (Valid up to)				
2. Crane Load Certificate (Valid up to)				
3. Sling Certificate(IS 2762)				
3a. Physical Condition Of slings				
4. Belts				
5. D Shackles & Hooks				
6. Safe Load Indicator				
7. Load Radius Indicator				
8. Motion Limit Device to Limit Hoisting, Swinging, and Boom Extending				
9. Audio Visual Alarm for Reversing				
10. Spark arrestor				
11. Wooden Plank/Metal Plate				
12. Fire Extinguisher				
13. First Aid				

Remarks			

INSPECTED BY

SIGN .....

NAME .....

DESIGNATION .....

DATE .....

Size &
ગુજ કોઝરાઝ
ચોંગરા સાઇ ને Two side

(5)

24.Tool Box Talk

ओएनजीसी ONGC	DRILLING SERVICES AHMEDABAD TOOLBOX TALK OISD GDN 207	DOC.NO. AMD/DS/QHSE/TBT/	
		ISSUE NO:05	DATE: 15.06.2021
		REVISION NO:00	DATE: 15.06.2023

Installation : **Well Name :**

Shift : Morning / Night **Shift Incharge :**

Date : **Time : From Hrs To Hrs**

Job Description :

Availability & use of appropriate & adequate PPE for the job :

Work Permit No. (if require for the job along with electrical isolation) :

Identified Risk/Hazards associated with the job :

Risk Mitigation Measure Available/Taken :

Additional Risk Mitigation Measure details (if require) :

SOP discussed :

Shift In charge/Supervisor :

Participants with name and signature :

S.NO.	Name	Signature	S.NO.	Name	Signature
1			7		
2			8		
3			9		
4			10		
5			11		
6			12		

25 Shift Hand Over Register

ओएनजीसी ONGC	**DRILLING SERVICES AHMEDABAD**	DOC.NO. AMD/DS/QHSE/SHT/	
	SHIFT HANDOVER AND TAKEOVER	ISSUE NO:01	DATE: 08.02.2023
	Reg 59(1) OMR-2017	REVISION NO:00	DATE : 08.02.2023

Rig: Asset: Ahmedabad

Well No.: Date:

Operation: Time:

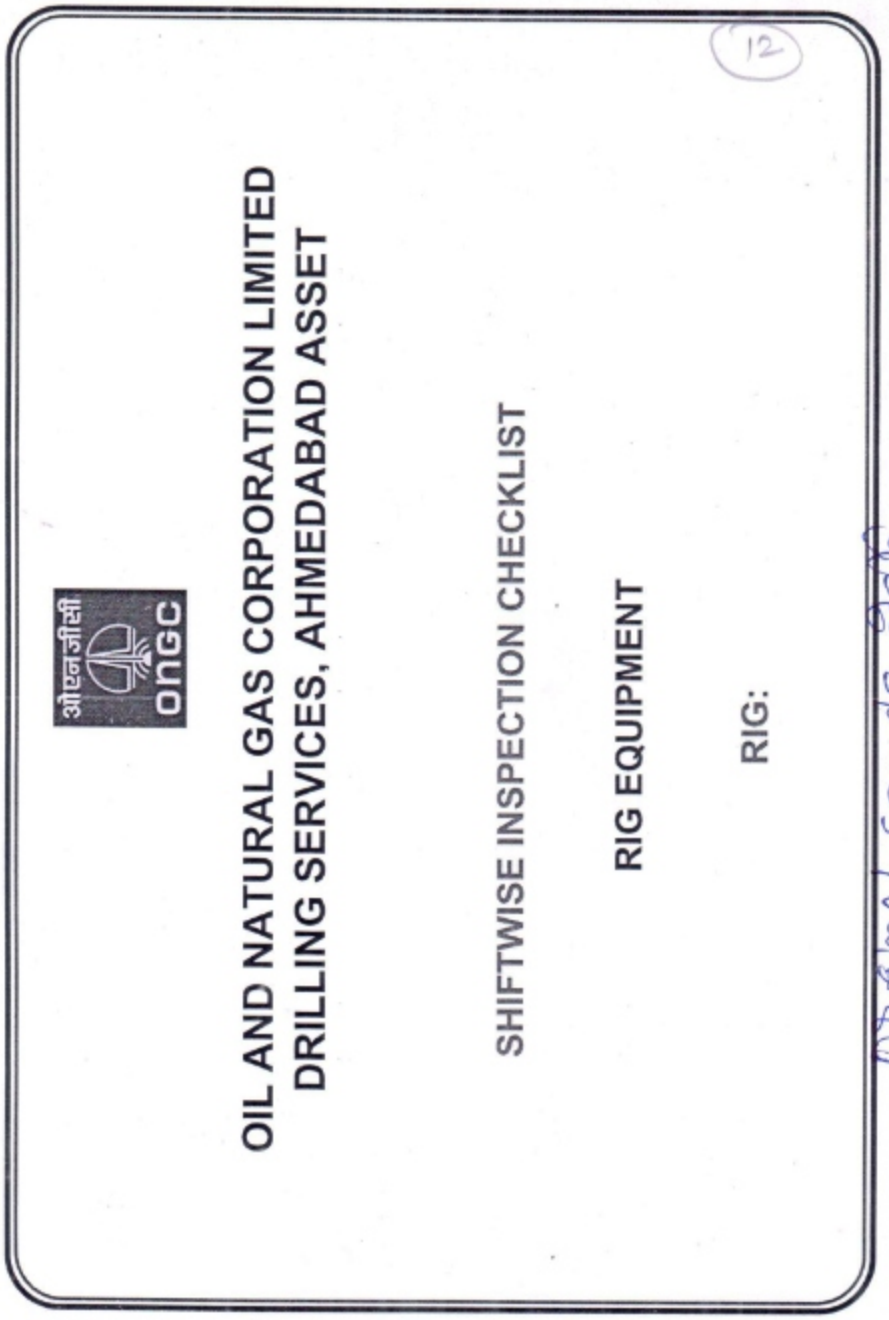
S.No.	Equipment	Status	Remarks
1.	Instruments and controls at Driller's stand (Driller console)	OK/NOT OK	
2.	Draw works	OK/NOT OK	
3.	Mud Pumps	OK/NOT OK	
4.	Sensing and monitoring instruments	OK/NOT OK	
5.	Mud logging	OK/NOT OK	
6.	Casing line	OK/NOT OK	
7.	Cat line	OK/NOT OK	
8.	Blow out preventer assembly	OK/NOT OK	

Any other point(s):

Shift In charge (Hand over)

Shift In charge (Take over)

26. Daily Checklist 67 Points (Page 1 2 & 3)



ओएनजीसी ONGC

OIL AND NATURAL GAS CORPORATION LIMITED
DRILLING SERVICES, AHMEDABAD ASSET

SHIFTWISE INSPECTION CHECKLIST

RIG EQUIPMENT

RIG:

12

Original Sample

Cover page of book

WELL NO.: MONTH

SN	CONDITION	STATUS OK (√), NOT OK (X)																														REMARKS
	DATE:->	1		2		3		4		5		6		7		8		9		10		11		12		13		14		15		
	SHIFT:->	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	
DERRICK FLOOR AREA, DRAW WORKS & AIR WINCH																																
1	Guard on Rotary Chain Drive																															
2	Condition of Controls on Driller's Stand																															
3	Condition of Weight Indicator																															
4	Condition of Pressure Gauge, SPM Meters, RPM Meter, Tong Pull																															
5	Kelly Cock Wrench and Safety Valve accessible?																															
6	Effectiveness of Twin Stop Device & its Function Test																															
7	Condition of Casing Line, Guy Line & Bull Line																															
8	Condition of Foundation bolts of Deadline Anchor with sub base																															
9	Condition of Draw Works Emergency Stop Switch																															
10	Draw Works guard installed and secured?																															
11	Condition of Pins and its Safety Locks on Substructure																															
12	Condition of Mechanical Brakes and Brake Linkages																															
13	Condition of Hydromatic Brake / ECB																															
14	Condition of Air Winch & Brake																															
15	Condition of Air Winch Line																															
16	Condition of Foundation Bolts on Air Winch																															
TOPMAN ESCAPE DEVICE																																
17	Condition of Track Rope & Haulage Rope																															
18	Condition of Pulleys, Sheave Rollers and Brake of Escape Device																															
19	Working condition of Fall Prevention Device																															
POWER, HAND TOOLS & TUBULARS HANDLING EQUIPMENT																																
20	Condition of Makeup and Breakout Tongs																															
21	Condition of Tong Hanging Line, Tong Pull Line and Safety Line with clamps																															
22	Condition of Slips and Dies in use																															
23	Condition of Kelly and Kelly Drive Bushings																															
24	Condition of Rotary Table																															
25	Confirm all the Hoses properly bundled and travel unobstructed in Derrick																															
HOISTING TOOLS, HOOKS, ELEVATORS AND OTHER RELATED EQUIPMENT																																
26	Condition of Traveling Blocks & Sheave Guards																															
27	Condition of Hook & Elevator Links																															
28	Condition of Elevators																															

SN	CONDITION	STATUS OK (√), NOT OK (X)																																REMARKS
	DATE:->	1		2		3		4		5		6		7		8		9		10		11		12		13		14		15			
	SHIFT:->	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N		
29	Rotary Hose secured to Gooseneck and Swivel?																																
MUD PUMPS & AIR COMPRESSOR																																	
30	Pressure Relief Line properly anchored/secured?																																
31	Condition of Pumps, Piping, Hoses, Pressure Relief Valves and other Fittings																																
32	Condition of area around Mud Pumps																																
33	Working condition of Pressure Gauges on Pumps																																
34	Placement of Emergency Stops/ Switch on Pumps																																
35	Condition of Compressors, Drive Belts, Guards and Safety Valve																																
36	Condition of Air and Oil Filters of Engines																																
MUD TANKS & PITS																																	
37	Condition of Walkways and Guardrails																																
38	Condition of Shale Shaker, De-Sander, De-Silter and Degasser Unit																																
39	Condition of Eye Wash facility																																
40	All unused floor holes covered?																																
41	Guard on Agitator Shafts and Couplings ?																																
42	Conditon of Mud Level Transmitter																																
BOP AND CONTROL UNIT																																	
43	Condition of BOP Stack and Accessories																																
44	Condition of Remote Control Panel																																
45	Working condition of Accumulator Unit																																
46	Check for any external leakage in BOP System																																
47	Check N_2 Precharge Pressure																																
48	Required oil level is maintained in Koomey Unit?																																
49	Condition of Pressure Gauges in Accumulator Unit and Remote Control Panel																																
50	Working condition of Pneumatic & Electric Pumps on Accumulator Unit																																
ELECTRICAL LIGHTING																																	
51	Emergency/ Safety Torch is available and properly maintained?																																
52	Condition of Lighting and Earthing System																																
53	Aviation Light fitted at top of the Mast is working?																																
54	Lighting provided at Mast/ Sub-Structure does not cause any glare or eye strain?																																

SN	CONDITION	STATUS OK (√), NOT OK (X)																														REMARKS
	DATE:->	1		2		3		4		5		6		7		8		9		10		11		12		13		14		15		
	SHIFT:->	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	
GENERAL																																
55	Working condition of Wireless																															
56	Condition of Emergency Vehicle with Stretcher																															
57	Working condition of Online & Portable Gas Detector																															
58	Status of Fire Fighting System																															
59	End rests provided on each side of Pipe Racks?																															
60	Condition of Electrical and Welding Cables																															
61	Electrical Mines Log Sheet is filled daily?																															
62	Work Permits being issued?																															
63	Personnel wearing PPE?																															
64	Safety Belt is being used by person working at Monkey Board?																															
65	Preventive/ regular Maintenance of all Equipment in order?																															
66	Condition of Railings & Ladders																															
67	Stairways and Ladders are secured?																															
SIGNATURE:																																
Shift In-charge																																
Installation Manager																																

ACTION TAKEN

SN	DATE	NEED ATTENTION (DETAILS)	ACTION TAKEN	ACTION TAKEN BY NAME, DESIGNATION & SIGNATURE	APPROVED BY NAME, DESIGNATION & SIGNATURE	REMARKS

14

27. Daily Checklist 84 Points (SS-1500-1 & 2)

15

DAILY CHECK LIST

ONGC

RIG : SS-1500-

Well :

Area:

	DESCRIPTION	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
		D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N
1	Access facilities and escape routes (updated lay out)																															
2	Assembly according to rig lay out																															
3	Signalling, notices, safety chain																															
4	Condition and location of the ladders to the rig's sills to get to the trailers																															
5	Condition of walkways - floors, rails																															
6	Condition of floors in pits areas																															
7	Wind sleeve installed (two)																															
8	Condition of connections and low-pressure lines																															
9	Test of high-pressure lines (pumps). Secured lines / flexible pipe / ventilation cowls (with safety slings)(See box 1)																															
10	Condition of electrical installations																															
11	Explosion proof equipment in classified areas																															
12	Earthed equipment, trailers - Earthing measurement																															
13	Quantity and condition of lighting, condition of safety slings. Condition and functioning of emergency lights																															
14	Condition of slips, hoisting devices and other tools to be used in the well																															
15	Condition of compressor, air tanks and safety valves																															
16	Operating condition of Top drive - Annex 5 - Form for parameters and checks																															
17	Condition of the trap clamps of the hydraulic lines of the derrick																															
18	Condition of fall arrest rope and fall-arrest devices T-3 and T-6																															
19	Condition of hydraulic tongs: Power tong - Annex 6 - Form for parameters and checks																															
20	Condition of power tongs (makeup tongs)																															
21	Condition of the Mouse hole - Annex 6 - Form for parameters and checks																															
22	Condition of the floor of the hoisting platform																															
23	Condition of flame arresters and engines emergency stops																															
24	Condition of sieves, nets and three-in-one devices (hydrocyclone)																															
25	Condition of degasser and vertical separator (impact device), floating device, rupture disk, valves																															
26	Condition of pumps (condition of fluid end, cooling jacket system, pistons guards, safety valves, walkways, rails, ladders, sills, clamps adjustment, discard lines, safety slings, cheaser, no fluid leaks, PAT)																															
27	Condition of power pack																															
28	Condition of the welding site. Condition of the welding and oxy-fuel cutting equipment																															
	Remarks																															
	Sign.																															

ONGC

RIG : SS-1500-

Well :

Area:

	DESCRIPTION	1		2		3		4		5		6		7		8		9		10		11		12		13		14		15		16		17		18		19		20		21		22		23		24		25		26		27		28		29		30		31	
		D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N	D	N
29	Condition of the mechanical workshop																																																																					
30	Condition of the valves of the working platform (See box 1)																																																																					
31	Operation of auxiliary crane and anti-collision devices with Top drive blocking sensor																																																																					
32	(Condition of bolts, pins, locks, safety sling of the crane pulley, pins and locks of the control jib of the crane). Not applicable to HH200 rigs																																																																					
33	Condition of the safety slings and clamps of the high-pressure ventilation cowl																																																																					
34	Condition of the catenary line connecting the derrick and the Top drive and the catenary line of the tubing manipulator. Adjustment of the rods of the flexible pipes in catenary line																																																																					
35	Condition of the trap clamps fixed to the N2 pipe (shock absorber) of Top drive and Mouse hole																																																																					
36	Condition of pins, locks and bell cranks of Top drive cables																																																																					
37	Condition of the safety devices of the Top drive dolly (pins and locks)																																																																					
38	Condition of the torque wrench. Safety slings, pins and locks																																																																					
39	Condition of mud centrifugal pumps, wear impeller, tray, mechanical seal (leak proof)																																																																					
40	Condition of the funnel-chemical area, wear of the preparation line. Venturi valve and jet.																																																																					
41	Condition of mixers in mud pits, oil level, no leaks																																																																					
42	Condition of the supply/expulsion line of centrifugal pumps. Condition of blow-down and butterfly valves																																																																					
43	Tubing housings secured to the base, condition of slings, shackles, mouse locks, pivoting pins, lifting tabs. Condition of lifting rod and cables																																																																					
44	Condition of tools and lubricants containers																																																																					
45	Condition of spilling containment trays (ALL OF THEM)																																																																					
46	Condition of GAS-OIL tanks. Non-return valve. Condition of valves and lines, levels, supply																																																																					
47	Condition of the mechanical tensioners of the rig carrier, condition of the stabilizers for the dog house and the rig floor. Functioning of hydraulic pins. Positioning of safety pins and brackets																																																																					
48	Protected production lines/facilities (buried, marked)																																																																					
49	Clean and ordered dog house																																																																					
50	Condition of harnesses for working at height jobs																																																																					
51	Order of containers, warehouses for generators and drilling deposit																																																																					
52	Clean and ordered repository																																																																					
53	Clean and ordered toilets																																																																					
54	SCBA (autonomous devices) available and working. Presence of back-up tubing																																																																					
55	Condition of emergency shower and eye washing fountain																																																																					
56	Condition of eye washing bottles																																																																					
	Remarks																																																																					
	Sign.																																																																					

ONGC

RIG : SS-1500-

Well : **Area:**

	DESCRIPTION	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
		D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N	D N
57	Condition of first-aid kit, stretcher																															
58	MEDEVAC Plan - Roles (updated)																															
59	Working and properly positioned fire extinguishers																															
60	Condition of containers for solid waste																															
61	Condition of the wastewater treatment plant																															
62	Condition of the drinkable water tank																															
63	Worksheet on admission checks, meeting point and parking																															
64	Condition of TOP DRIVE SLINGS - Annexes 32 and 33 for cables																															
65	Condition of the SLINGS of the Top drive tensioners																															
66	Condition of the CRANES SLINGS																															
67	Condition of crane hooks																															
68	Condition of the POWER TONG, pins and locks of the hoisting system, grapple																															
69	Functioning of the IBOP system (See box 1)																															
70	Condition of trusties, slide and trolley for tools Posts																															
71	Protected belts and shafts of the centrifugal pumps																															
72	Condition of the crown wheel marker - Securing the device																															
73	Condition of gas detectors																															
74	Condition of the alarms for the rig and the manipulator (speakers, sirens, light alarm)																															
75	Condition of lifting device - service lift																															
76	General order and cleaning																															
77	Condition of tools and worksheet for non-destructive inspections																															
78	Condition of manipulator: Energpack, no oil leaks, deadlines, catenary lines, hoisting sheave, base fixing system																															
79	Condition of main crane: drum, cable, cable rolling, pulley protection, pins, cotters																															
80	Condition of HPU: flexible pipes, tubing, possible leaks, walkways, rails, slides. Levelling system and wooden pegs																															
81	Condition of the rig carrier: possible oil leaks, hydraulic stabilisers, walkways, rails, ladders and their securing. Functioning of electronic levels, rig up / rig down console																															
82	Condition of the base: presence of all pins and relevant locks, earthing, mechanical tensioners																															
83	Condition of the supports for housings: no deformations, steel slings, shackles, pins and locks																															
84	Check that the safety discard line of the mud pump is secured.																															
	Remarks																															
	Sign.																															

28. Management of change-

18

Management of Change Form					
Step 1 – Initiate					
Initiator / Originator:			MOC Ref #:		
Originated Date:		Duration of Change:	From:	To:	
Type of Change:	Permanent	☐ Time Limited	☐ Emergency	☐	
Nature of change:	Engineering			☐	
	Procedural			☐	
	Organizational			☐	
	Operating Parameters			☐	
Justifications:					
Facility affected by change:					
Location(s) of change:					
Description of change:					
Reason for change:					
MOC Coordinator: (to be assigned by Approval Authority)	*Name:*				
	Position:				
Initiated by:	*Signature:*	*Date:*			
Reviewed and verified by:	*Signature:*	*Date:*			

2 & 3 – Review and Approval		
Change Review Team:		
Technical Assessment Documentation:	*Attach supporting documents*	
Document Title	**Document Reference**	**Version**

Technical Assessment:	
Technical Review on the proposed Change has been performed. Based on this review, the change review team **agrees** with the proposed Change. Attached are the details of this review.	☐
Technical Review on the proposed Change has been performed. Based on this review, the change review team **agrees with the proposed change with additional recommendations**. Attached are the details of this review.	☐
Technical Review on the proposed Change has been performed. Based on this review, the change review team **does not agree** with the proposed Change. Attached are the details of this review.	☐

Change Review Team:		
Name:	*Signature:*	*Date:*
Name:	*Signature:*	*Date:*
Name:	*Signature:*	*Date:*
Name:	*Signature:*	*Date:*
Name:	*Signature:*	*Date:*

Step 4 – Implementation		
Pre-implementation Activities	Completed by	Date
Implementation Activities		
Post-Implementation Activities		

Name:	*Signature:*	*Date:*
Name:	*Signature:*	*Date:*
Name:	*Signature:*	*Date:*

29. SIMOPS

SIMOPS Check List (Onshore)

The following check list should be used as a guidline before the rig moves to cluster location / inside the installation and should be signed by the company man / rig manager & installation manager

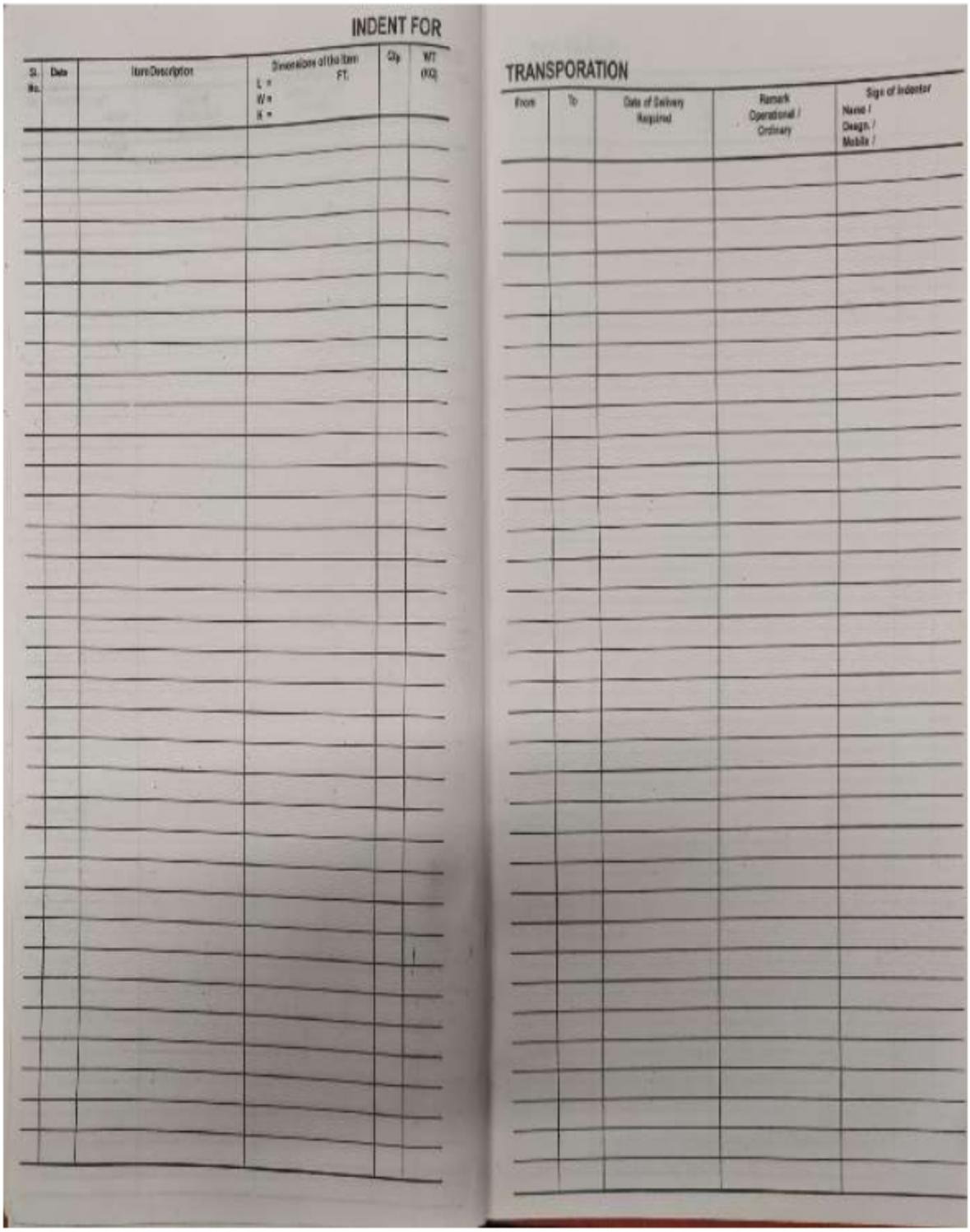
INSTALLATION **WELL NAME :**

Pre-operations checklist			
S.No.	**Action**	**Observations**	**Remarks**
1	A meeting has been held among drilling rig / workover, company man / rig manager, as the case may be, and installation manager for finalizing the SIMOPS programme and accordingly preparatory activities have been carried out before the rig is moved to cluster location / inside installation ?		
2	Ensure the cluster well down is as per 5.1.3. (a)		
3	The Escape routes of drilling rig / workover rig are identified and are free from any obstruction.		
4	Ensure that there is no leakage of oil and gas before the rig is moved and during rig operations. Frequency of gas checking should be established and followed.		
5	The Xmas tree and flow lines / injections line of cluster wells are at safe distance from rig substructure and temporarily phsically protected to prevent from damage due to fall of material during rig transportation, rig building / rig dismantling.		
6	Minimum three 20Kg DCP trolley mounted fire extinguishers have been placed in cluster area,		
7	The Flow lines / injection lines passing through the cluster location have been buried underground.		

SIMOPS Check List (Onshore)			
S.No.	Action	Observations	Remarks
8	Cautions bords mentioning 'High' Pressure well / flow line / injection lines, well on production' have been displayed at cluster wells.		
9	For high pressure well(s), a pneumatic / hydraulic opereated valve has been installed on the Xmas tree with remote control on the rig derrick floor near the driller's console.		
10	Any operation on the cluster wells is to be carried out with permit to work (PTW) and approved by company man / rig manager, as the case may be.		
11	Logistics job safety analysis lay out plan of rig equipment have been finalized and is to be adhered during rig transportation and rig building / rig dismanting.		
12	Ensure that the rig equipment should be placed at safe distance from the process units and storage thanks in case the rig is planned to operate installation.		
13	Only spark arrestor fit vehicle(s) should enter the installation in case rig is planned to operate inside the installation.		
14	firewater network of the installation has been extended to interface with drilling rig / workover rig fire fighting system. If required. when the rig is planned to operate inside the installation.		

Signature Company man / rig manager	Date	Signature installation manager	Date

30.Transport Register (Page 1 & 2 Combined)



INDENT FOR

Sl. No.	Date	Item Description	Dimensions of the Item FT. L = W = H =	Qty	WT (KG)

TRANSPORATION

From	To	Date of Delivery Required	Remark Operational / Ordinary	Sign of Indentor Name / Design. / Mobile /

31. Material Requirement Register

REQUIREMENT OF MATERIAL

Material Description	Qty. Reqd.	Sign.	Qty. Issued	Recd. By	EDP Code	Ind. No.	Remark

32. Appointment/declaration of Competent Person

OIL AND NATURAL GAS CORPORATION LTD
AHMEDABAD DRILLING OIL MINE
ONGC, AHMEDABAD ASSET

20

NO : AMD/DS/HSE/Competent Person Declaration / Date:

APPOINTMENT / DECLARATION OF COMPETENT PERSON

Name of Drilling Oil Mine:

Under regulation No. 21 of OMR 2017, Sh. .....
Designation ..... CPF No. .....is hereby appointed as Competent Person/official at Drilling Rig .....to secure -

(a) Adequate inspection of the installation and the equipment thereof;
(b) A thorough supervision of all operations at the installation;
(c) The installation, running and maintenance, in safe working order, of all machinery in the mine; and
(d) The enforcement of the requirements of the Act and these regulations.

He shall carry out the following duties under regulation No. 26 & 33 of OMR 2017:

1. He shall be subjected to the orders of superior officials and shall perform his duty assigned to him in accordance with the provisions of the Act and of the regulations or the orders made thereunder.
2. He shall comply with the safety directives and conversant with the safety instructions issued from time to time by the manager/deputy manager/installation manager of mine.
3. Before beginning of work, he shall examine his place of work and the equipment that he is to use and shall forthwith report to his superior any dangerous defect that he may discover.
4. He shall make use of all safeguards, safety devices and other appliances provided for his protction or the protection of others.
5. Except in an emergency, unless duly authorised, he shall not interfere with, remove, alter or displace any safety device or other appliance provided for his protection/protection of others or interfere with any method/process adopted with a view to avoid accidents and injuries to health.
6. While on duty, he shall not throw any stone or other missile with intent to cause injury, fight or behave in a violent manner, or obstruct any other person in the discharge of duties.
7. He shall not sleep or rest in a dangerous place such as monkey board/cranes or in the vicinity of dangerous or toxic substances, machinery, vehicle and heavy equipment.
8. He shall wear protective equipment and clothing suited to his duties and to the weather conditions.
9. If he receives injury or notices any injury in the course of his duty, he shall immediately report the same to an official or the competent person in charge of a first aid station, who shall arrange for the necessary first aid to the injured person.
10. He shall not, except with the authority of an official, remove or pass through any fence, guard barrier or gate, or remove any danger signal.
11. He shall not -
    (a) depute another person to perform his work without the sanction of his superior official;
    (b) absent himself without having previously obtained permission from such official for the period of his absence or without having been relieved by a duly competent person; and
    (c) without permission from such official, perform during his shift, any duties other than those for which he has been appointed.
12. He shall, on the occurrence at his place of work any hazardous condition, take prompt corrective measures to eliminate the hazard.

Copy to:

1. Individual
2. Office Copy

( )
Dy. Mines Manager

PERFORATE

33. Dy Mine Manager Diary

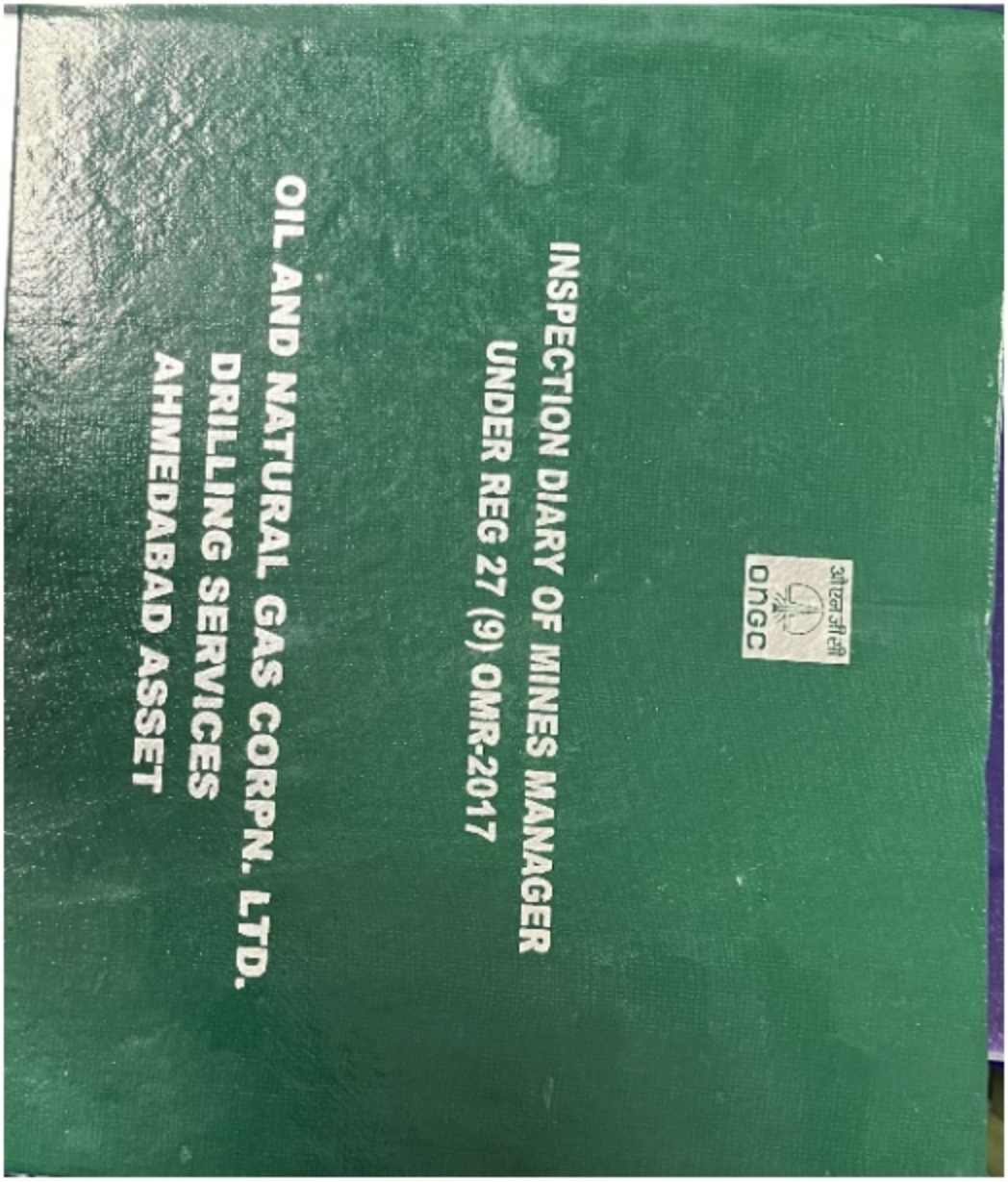
INSPECTION DIARY OF DY. MINES MANAGER
UNDER REG 28 2 (c) OMR-2017

Sr. No. : 011

& Location	Inspection Details		Observation	Action Proposed	Sign	Mines Manager	
	SN	Equipment				Remarks	Sign

Signature of Mines Manager

34. Mine Manager Register



ONGC

INSPECTION DIARY OF MINES MANAGER
UNDER REG 27 (9) OMR-2017

Sr. No. : 047

Date	Contraventions ~~Observation~~		Action taken

Signature of Mines Manager

35. Installation Manager Diary

INSPECTION DIARY OF INSTALLATION MANAGER
UNDER REG 29 (f) OMR-2017

Sr. No. : 012

Name of Ahmedabad Drilling Oil Mine :

& Location	Inspection Details		Observation	Action Proposed	Sign	Dy Mines Manager	
	SN	Equipment				Remarks	Sign

Signature of Dy Mines Manager

36. Spot Inspection Register

FROM VI
SPOT INSPECTION BOOK

(See Regulation 101 of OMR)

Name of Mine _____ Name of Owner _____

Name of Manager _____ Installation / Rig etc. _____

Inspected by _____ Accompanied by Shri (1) _____ On _____ 20 _____

(2) _____

(3) _____

(4) _____

Place Inspected	Mines Act/Oil Mine Regulation/Mines Rules/ Section/ Clause / Number etc.	Contravention observed	Action taken by management to remedy the contravention	Date of rectification of the contravention	Remaks if any

The Contravention mentioned above are not exhaustive a letter giving the details of other contraventions observed may follow in due course.

Signature of Inspecting Officer (I.O.)

Date : .....Designation : .....

– PRINT IN SET OF 02
– PERFORATE

Signature of Mine Official Accompanying (I.O.)

Date : .....

37. Generic List of Safety Critical Equipment

25

Generic List of Safety Critical Equipment – Ahmedabad Drilling Rigs					
SN	Name of SCE	Period of Inspection	Status	Remedial Action	Remarks
1	Twin Stop (Crown-O-Matic and Floor matic stop)				
2	Driller console (Drill Watch)				
3	Hook Load Indicator (Ton-mile (Tonne –Kms) indicator, Drill-o-meter, drill-ograph)				
4	ELCB (Earth Leakage Circuit Breaker) & Relays				
5	Emergency Light & Fixtures (Dog House, PCR Room, DIC Office)				
6	Fire water pump				
7	Mud Level Transmitter				
8	Online Gas detector (HC)				
9	BOP & Control Panel				
10	Pressure Safety Valve (PSV)				
11	Pressure Switch				
12	Top man Emergency Escape Device (TEED)				
13	Bull Line				
14	Casing Line				
15	Communication equipment (Telephone, Walkie Talkie)				
16	Crown Block				
17	Travelling Block & Swivel				
18	Degasser				
19	Fall prevention device				
20	IBOP/ FOSV				
21	Portable Gas detectors (HC & H_2S)				
22	Wind Sock				
23	Aviation lights				
24	PLC				

SHIFT INCHARGE/INSTALLATION MANAGER

38. Spud Meeting

28

OIL AND NATURAL GAS CORPORATION LTD
DRILLING SERVICES, AHMEDABAD ASSET

PRE SPUDDING CONFERENCE CHECKLIST

Rig Name: _____ **Well No:** _____ **Type of well (Dev./Expl.):**_____ **Date:** _____

Village: _____ **Taluka:** _____ **District:** _____

We, undersigned, the members of Pre-Spud Conference, checked the readiness of the Drilling Rig _____ for spudding. Following observations are recorded:

Well Data:

Target depth	M
Maximum mud weight	
BHP	KSC at M

Directional drilling data:

Horizontal drift	M at M
Vertical shortening	M at M
Kick off point	M
Maximum angle	

Casing data:

13 3/8" casing shoe at	M
9 5/8" casing shoe at	M
5 1/2" casing shoe at	M

PRINT IN SET OF 02

- PERFORATE

A)	DRILLING PART	OBSERVATIONS	ACTION TAKEN WITH DATE
1	Whether contingency plan for fire fighting and Blow out displayed **(Reg 31 OMR-2017)**		
2	Whether QHSE policy of ONGC displayed		
3	Availability of Safety Management Plan **(Reg 131 OMR-2017)**		
4	Whether layout plan & prohibitory sign boards displayed **(Reg 72 OMR-2017)**		
5	Whether members of Rig crew provided with PPE & Using **(Reg 122-24 OMR-2017)**		
6	Whether railings & toe boards around derrick floor/engines/mud tanks/walk ways provided **(Reg 35 OMR-2017)**		
7	Availability of GTO **(Reg 69 (2) OMR-2017)**		
8	Availability of First aid box and stretcher **(Reg 23 OMR-2017)**		
9	Availability of Fire Fighting equipment **(Reg 100 OMR-2017)**		
10	Functional status of fire fighting pump **(Reg 100 (2) OMR-2017)**		
11	Availability of Safety belt with life line **(IS 3521, Reg 37 of OMR-2017)**		
12	(a) Condition of Emergency vehicle with spark arrestor **(Reg 96 (3) OMR-2017)**		
	(b) Extra Spark Arrestors (2 Nos)		
13	(a) Availability of portable gas detectors and its functional status		
	(b) Availability of gas detector/ explosimeter at the primary shale shaker and connected to audible or visual alarm near the driller's stand **(Reg 57 (c) OMR-2017)**		
14	Condition of ladders **(Reg 36 OMR-2017)**		
15	Condition of casing line **(Reg 46 OMR-2017)**		
16	Condition of safety lines, jerk lines for tongs & status of fastening clamps **(Reg 44, 45 OMR-2017)**		
17	Condition of handling tools: Elevators, Slips & Power Tongs **(Reg 47 OMR-2017)**		
18	Availability of mechanical twin-stop device and its functional status **(Reg 42 (f) OMR-2017)**		
19	Availability of PLC based twin-stop device and its functional status **(Reg 42 (f) OMR-2017)**		
20	Whether both ends of delivery hoses are secured with safety chain/wireline properly **(Reg 45 OMR-2017)**		
21	Functional status of Topman escape device **(Reg 38 OMR-2017)**		
22	Whether Fall prevention device **(Reg 36 (6) OMR-2017)** and Mast ladder guard provided **(Reg 36 (4) OMR-2017)**		
23	Availability of Trip tank and its functional status **(Reg 52 OMR-2017 & OISD-RP-174)**		
24	Status of BOP control system including remote control system **(Reg 56 OMR-2017 & OISD-RP-174)**		
25	Status of Rig Building **(Reg 47, 49, 50 OMR-2017)**		
26	Whether high pressure pipes fitted with flexible joints suitably anchored **(Reg 59 (7), 74(7), 50(e) of OMR-2017)**		
27	Whether guide lines as per **OISD-186** is followed for **SIMOPS**		
28	Status of Barite at site (MT) **(Reg 52 OMR-2017)**		
29	Whether permit to work system followed **(Reg 99 OMR-2017)**		
30	Whether wind sock provided **(Reg 72(a) OMR-2017)**		
31	Any other point(s):		

B)	MECHANICAL PART	OBSERVATIONS	ACTION TAKEN WITH DATE
1	Condition of Carrier engines	1 2	
2	Condition of Mud pump engines	1 2	
3	Condition of Mud pumps	1 2	
4	Condition of Compressors	1 2 3	
5	(a) Condition of Generators	1 2 3 4	
	(b) Condition of Emergency Generator Set		
6	Condition of Mech/Pneumatic/Hydromatic brakes		
7	Condition of solid control equipments		
8	Whether pressure relief lines of mud pumps are fitted and secured properly **(Reg 51(d) OMR-2017)**		
9	Status of guards on moving parts **(Reg 112, 42 (b), 67(a) OMR-2017)**		
10	Status of auto shut off system		
11	Status of pressure vessels testing & record thereof **(Reg 111 (4) OMR-2017)**		
12	Availability of spark arrestors in the exhaust manifold of engines **(Reg 110 (3) OMR-2017)**		
13	Any other point(s):		

C)	ELECTRICAL PART	OBSERVATIONS	ACTION TAKEN WITH DATE
1	Whether light point provided in the toilet		
2	Whether sufficient illumination provided at the Rig		
3	Whether Aviation warning light provided at Mast top.		
4	Restricted neutral system with fail safe relay **(Reg 100 CEA 2010)**		
5	Flame proof motors **(Reg 110 CEA 2010)**		
6	Flame proof light fitting **(Reg 110 CEA 2010)**		
7	Electrical protective devices **(Reg 100 CEA 2010)**		
8	Power and control cables**(Reg 106 & 107 CEA 2010)**		
9	Any temporary joint in cable**(Reg 106 CEA 2010)**		
10	Whether earthing provided to Advanced Instrumentation System (AIS)		
11	**Display of Caution Boards:**		
	(a) Electrical Caution Board on all electrical equipment. "Do not Operate, Man Working Online" wherever applicable.		
	(b) Notice forbidding entry of unauthorized persons in Electrical PCR / Switch Board Room. " ENTRY OF UNAUTHORISED PERSONS STRICTLY PROHIBITED."		

12	**DISPLAY AT STRATEGIC LOCATIONS:**		
	i) Power flow diagram.		
	ii) Cable lay out and Earthing Drawing.		
	iii) Hazardous area classification of the location.		
	iv) Electrical Shock Treatment Chart.		
	v) Fire Extinguishers for Electrical fire.		
	vi) Do's & Don'ts.		
	vii) Role and responsibility of electrical personnel during emergency.		
	viii) Important / Emergency telephone numbers		
13	**RECORD KEEPING (AS APPLICABLE)**		
	i) Employee's Bio-Data		
	ii) Shift Roster.		
	iii) List of trained MVT, First Aid & Fire fighting personnels		
	iv) List of persons with Electrical License.		
	v) Accident records.		
	vi) Equipment Log Book & Maintenance record.		
	vii) Commissioning Record.		
	viii) Earth Resistance & Insulation Resistance Record.		
	ix) Log sheet **(Annexure-XII of rule no 131 of IER,1956)**		
	x) Work permits.		
	xi) Daily check list of electrical equipment.		
	xii) Periodical check list (including R/up & R/down).		
14	**Earthing:**		
	i) Total No. of earth electrodes/pits.		
	ii) Condition of earth electrodes, G.I. strips & earthen wires.		
	iii) 2 separate & independent earthing exists for all electrical equipments.		
	iv) 2 separate & independent earthing exists for substructure for lightning protection.		
	v) Value of earth resistance.		
	vi) Equipment, cable tray & C.G.I. sheet roof etc. connected to earthing system-Yes/No		
	vii) 2 separate & independent earthing exists for Transformer body.		

	viii) 2 separate & independent earthing exists for neutral.		
	ix) Whether earthing pole with crocodile clamp provided for earthing of diesel tank while loading\unloading of diesel		
15	**PROTECTIVE EQUIPMENT:**		
	i) Emergency tripping system at Drillers console exist & functional		
	ii) Automatic disconnection facility as applicable for drilling motors/main generators and other motors under the fault condition available.		
16	**ELECTRICAL EQUIPMENTS FOR HAZARDOUS AREA APPLICATION:**		
	i) Condition of FLP Equipment.		
	ii) Any modification in the electrical equipment used in hazardous area carried out in approved / suitable manner.		
17	**VOLTAGE RESTRICTION:**		
	230 volts phase to phase and 110 volts phase to earth voltage system for lighting.		
18	**USE OF PERSONAL PROTECTIVE EQUIPMENT:**		
	i) Insulating hand gloves.		
	ii) Insulating mat.		
	iii) Insulated shoes.		
	iv) Helmet, safety belt, googles, masks etc.		
19	**AVAILABILITY OF INSULATED ELECTRICAL TOOLS AND INSTRUMENTS.**		
20	**RECOMMENDED CODE OF SAFE PRACTICES.**		
21	**AVAILABILITY OF THE FOLLOWING AT SITE AS APPLICABLE:**		
	i) Double ladder.		
	ii) First Aid box and stretcher.		
	iii) FLP torch.		
	iv) Emergency lighting inside control room.		
22	Any other point(s):		

D)	INSTRUMENTATION PART	OBSERVATIONS	ACTION TAKEN WITH DATE
1	Whether CCTV installed and functional		
2	Status of instruments and controls **(Reg 69 OMR-2017)**		
3	Status of communication system		
4	Functional status of Instrumentation Display Panel with alarm on Derrick Floor		
5	Functional status of Measurement Sensors at Mud tanks		
6	Any other point(s) :		

E)	CIVIL PART	OBSERVATIONS	ACTION TAKEN WITH DATE
1	Status of hardening and rolling of drill site area		
3	Condition of approach road		
4	Parking area of logging unit		
5	Capacity of waste pit		
6	Whether waste pit provided with impervious HDPE lining.		
7	Capacity of fire water steel tank		
8	Capacity of fire water underground pit		
9	No. of rooms made for storing chemicals		
10	Whether storage tank provided for drinking water and covered properly		
11	Whether toilet provided with water connection		
12	Whether septic tank/ soak pit provided and covered properly		
13	Whether proper drainage system with brick lining provided		
14	Whether dyke wall provided around diesel tank		
15	Whether fencing around drill site provided **(Reg 130 OMR-2017)**		
16	Whether fencing around fire water underground pit provided		
17	Whether door with locking system provided in chemicals store room		
18	Whether sand cushion provided at the landing points of Top-man Emergency Escape Device		
19	Whether fencing / brick wall provided around SRP/Existing well(s)		
20	Whether any spillage around existing well(s), if any		
21	Whether protection of flowing lines of existing wells, if any, provided		
22	Status of levelling of foundation of rig and its equipment		
23	Whether drill-site main entrance gate provided		
24	Any other point(s).		

OPERATOR SIDE		CONTRACTOR SIDE	
Installation Manager	Well site Chemist	Safety cum Fire Officer	Tool Pusher
Fire Officer	Well site Geologist	I/c Mech.	I/c Elect.
I/c Mechanical	I/c Electrical	Rig Superintendent	Project Co-ordinator
I/c Civil	I/c SST/ FB		
Mine Safety Officer/HSE Officer	Area Manager		

39. Entry Permission for Non ONGC

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Oil and Natural Gas Corporation Limited
Ahmedabad Asset

To,
I/C-CISF/ I/C-Security
ONGC,

Date:

ENTRY PERMISSION FOR NON - ONGC PERSONS

Please allow following persons to Drilling Rig_____
Company Name:_____

Entry Purpose:_____

Sl. No.	Name	AGE (Years)	Id proof (Aadharcard/Licence)

Permit the Vehicle No. :_____

Permission Granted from _____ hrs. to _____ hrs.

Signature
Name:
Designation:

PERFORATE
BOTH SIDE
PRINT

SAFETY BRIEFING RIG :- SS-1500#01

ENGLISH

1. This is a Prohibited area. Do not move around other than assigned location.
2. Please show your visitor ID card/pass to security guard. Make entry in visitor register.
3. Follow Covid Appropiate Behaviour.
4. Use of mobile phone, camera, liquor, matchbox/lighter and smoking are strictly prohibited.
5. Use proper PPE.
6. Spark arrestor must be installed on all vehicle entering the installation. Vehicle speed should not be more than 5 Km/ Hr.
7. First aid box is available on site.
8. In case of emergency, please remain calm and assemble at assembly point.
9. If you see any unsafe activity report to the Safety Officer.
10. Follow 10 safety rule displayed on board , SOPs related to the job.

हिन्दी

1. यह प्रतिबंधित क्षेत्र है। नियत स्थान के अलावा अन्यत्र न घूमें।
2. कृपया अपना विज़िटर आईडी कार्ड/पास, सुरक्षा प्रहरी दिखाएं , आगंतुक रजिस्टर में प्रविष्टि करें।
3. कोविड उचित व्यवहार का पालन करें।
4. मोबाइल फोन, कैमरा, शराब, माचिस/लाइटर का उपयोग और धूमपान सख्त वर्जित है
5. उचित पीपीई का प्रयोग करें।
6. स्थापना में प्रवेश करने वाले सभी वाहनों पर स्पार्क अरेस्टर स्थापित किया जाना चाहिए। वाहन की गति 5 किमी/घंटा से अधिक नहीं होनी चाहिए।
7. साइट पर प्राथमिक चिकित्सा बॉक्स उपलब्ध है।
8. आपात स्थिति में, कृपया शांत रहें और सभा स्थल पर एकत्रित हों।
9. यदि आपको कोई असुरक्षित गतिविधि दिखाई देती है तो सुरक्षा अधिकारी को रिपोर्ट करें।
10. बोर्ड पर प्रदर्शित 10 सुरक्षा नियमों का पालन करें, SOPs का पालन करें।

ગુજરાતી

1. આ એક પ્રતિબંધિત વિસ્તાર છે. નિર્ધારિત સ્થળ સિવાય બીજે ક્યાંય ખસેડશો નહીં.
2. 2. કૃપા કરીને તમારું વિઝિટર આઈડી કાર્ડ/પાસ, સિક્યોરિટી ગાર્ડ બતાવો. મુલાકાતી રજીસ્ટર દાખલ કરો.
3. COVID યોગ્ય પ્રેક્ટિસને અનુસરો.
4. મોબાઈલ ફોન, કેમેરા, દારૂ, મેચબોક્સ /લાઈટરનો ઉપયોગ અને ધૂમ્રપાન સખત પ્રતિબંધિત છે
5. યોગ્ય PPE નો ઉપયોગ કરો.
6. ઇન્સ્ટોલેશનમાં પ્રવેશતા તમામ વાહનો પર સ્પાર્ક એરેસ્ટર્સ ઇન્સ્ટોલ કરવા આવશ્યક છે. વાહનની ગતિ 5 કોરસ/ કલાકથી વધુ નથી હોની જરૂર.
7. સાઇટ પર ફર્સ્ટ એઇડ બોક્સ ઉપલબ્ધ છે
8. કટોકટીના કિસ્સામાં, કૃપા કરીને શાંત રહો અને મીટિંગના સ્થળે ભેગા થાઓ.
9. જો તમને કોઈ અસુરક્ષિત પ્રવૃત્તિ દેખાય, તો સુરક્ષા અધિકારીને તેની જાણ કરો.
10 .બોર્ડ પર પ્રદર્શિત 10 સુરક્ષા નિયમોનું પાલન કરો. SOP ને અનુસરો.

40. TEED Inspection Register

Drilling Services Ahmedabad asset

Top Man Emergency Escape Device Maintenance Register

Periodicity for TEED
Wire replacements- once in a year
Inspection- Daily

TEED Model Name - Year of Manufacture - RIG Name-

SL. no.	Well/ Site	Date of Installation	Escape Trolley & sheeves(Check for mechanical & structural damages)	Trolley Track Rope(Check for slackness)	Condition of wire Rope	Condition of Brake(Check for manual brake)	If Part replaced/ Details	Agency person Name	Agency sign	Installation manager Sign	Remarks

41. Standard operating Procedure

It will be a book of approximately 350 pages. Sample Book will be provided at the time of Printing and Binding.

	DRILLING SERVICES AHMEDABAD HOT WORK PERMIT	DOC.NO. AMD/DS/QHSE/HWT/	
		ISSUE NO:05	DATE:15.06.2021
		REVISION NO:00	DATE :15.06.2021

NAME OF MINE: AHMEDABAD DRILLING OIL MINE

NAME OF COMPANY: ONGC **RIG:**

Work clearance from_____hrs. of date_____to_____hrs. of date_____(Valid for the shift unless renewed)
Issued to (Department/Section/Contractor): _____
Exact Location of Work (Area/Unit/Equipment etc.): _____

Description of work: _____

THE FOLLOWING ITEMS SHALL BE CHECKED BEFORE ISSUING THE PERMIT
(Tick mark in the appropriate box. Check list items marked **with asterisk (*) shall be complied by receiver**)

Sr. No.	Item	Done	Not Reqd	Sr. No.	Item	Done	Not Reqd
A	**General points**			B	**For Hot work/Entry to confined Space**		
1	Equipment /Work Area inspected			1	Proper ventilation and lighting provided		
2	Surrounding area checked, cleaned and covered.			2	Proper means of exit/ escape provided		
3	Sewers, manholes, closed blow down (CBD) etc and hot surfaces nearby covered			3	Standby personnel provided from Process / Maint/ Contractor/ Fire/ Safety dept.		
4	SIMOPS (simultaneous operations)			4	Checked for oil and Gas trapped behind the lining in Equipment		
5	Equipment blinded/disconnected/ closed/ isolated/ wedge opened			5*	Shield provided against spark		
6	Equipment properly drained and depressurized			6*	Portable equipment/ nozzles properly grounded		
7	Equipment properly steamed/purged			7*	Standby persons Provided for entry to confined space		
8	Equipment water flushed						
9	Iron sulfide removed/kept wet			C	**For Vehicle Entry**		
10	Equipment electrically isolated and tagged vide permit no.			1*	Spark Arrestor on the Mobile equipment/ vehicle provided.		
11	Gas test: HCs = %LEL Toxic gas: ppm, O2=						
12*	Running water hose/Fire extinguisher provided. Fire water system available.			D	**For Excavation works**		
13*	Area cordoned off and Precautionary tags / Boards provided.			1	Clearance obtained for excavation/ road cutting/Dyke cutting from concerned depart.		
14*	Name of the competent person to watch for Fire _____ Whether the competent person is trained in the use of extinguishing equipment, fire alarm system, and procedures for notifying emergency response. He shall be present at the site till fire is extinguished and for 30 minutes thereafter.						

Issuer Name, Designation and Signature	Receiver Name, Designation and Signature
THE LOCATION CITED HAS BEEN INSPECTED, THE NECESSARY PRECAUTIONS TAKEN AND PERMISSION IS GRANTED FOR THIS WORK. (PAI responsible for cutting and welding authorization) Confined space permit: Enclosed/ N.A. Signature:_____ (Time:_____ Dated:_____) Name:_____ Designation: Manager/Dy. Manager/Installation manager or company authorized person (In writing).	Hot Work Procedures Instructions and Precautions for working in confined space have been explained to me and will be followed: Signature:_____ (Time:_____ Dated_____) Name:_____

Closing of the work permit:

Final Check for Hot Work Area Made At: (time & date)_____(normally ½ hour after hot work) by_____.

Receiver: Certified that the subject work has been Completed / stopped and area cleaned.			**Issuer:** Verified that the job has been completed and area cleaned and is safer from any hazard.		
Date &Time	*Name &Designation*	*Signature*	*Date &Time*	*Name &Designation*	*Signature*

Clearance renewal

Date	Time		Gas Test Values for HC's, Toxic, O2 etc	Additional Precautions if any, Otherwise mention "NIL"	Issuer's Name, Designation & Signature	Receiver Name, Designation and Signature
	From	To				

REMARKS:

1. **The activity has the following expected residual hazards (Tick the relevant items):**
   Lack of Oxygen / H2S, Toxic Gases/ Combustible gases/Pyrophoric Iron/Corrosive Chemicals/Steam–Condensate/Others.
2. **Following PPEs to be used in addition to standards PPEs (Helmet, Safety Shoes, Hand gloves, Boiler suit):**
   Face Shield/ Apron/Goggles/Dust Respirator/Fresh Air Mask/Lifeline/Safety Belt/Airline/Ear muff etc.
3. **Additional precautions if any:** _____

General Instructions:

1. This permit must be posted at work site at all times.
2. PAI should keep original copies of completed Permits on file. Final inspection is usually made ½ hour after the completion of hot work to detect and extinguish possible smoldering fires. The inspector should be alert for circumstances that can require an extension of the final inspection interval. Management, the Permit Authorizing Individual (PAI), or the operator can extend the duration of the fire watch based on fire hazards or work being performed. An additional check, 2-hour after completion is highly recommended.
3. The work permit shall be filled up carefully and accurately in clear hand writing ensuring that complete information is provided in all sections /subsections and none of column is left blank. Sketches should be provided wherever possible to avoid miscommunication.
4. Appropriate safe guards and required personnel protective equipment shall be determined by a careful analysis of the potential hazards and the operations to be performed prior to starting the work.
5. In case of fire alarm/ siren, all work must immediately be stopped.
6. Only certified vehicle /engines and permitted type of electrical equipment and tools are allowed in operating areas.
7. Welding machines should be located in non-hazardous and ventilated areas.
8. No hot work should be permitted unless the explosive meter reading is Zero.
9. When a person is entering confined space, the receiver must keep minimum two standby-designated persons at the man-hole or entry point.
10. Before box up of any vessel manhole cover, ensure that no men / materials are inside the vessel.
11. For renewal of work clearance, the issuer shall ensure that the conditions are satisfactory for the work to continue. If the conditions have changed, it may be necessary to issue a new permit or amend the existing permit.
12. This clearance on the same permit can be renewed /extended up-to a maximum of seven calendar days.
13. On completion of the work, the permit must be closed and kept as record.
14. The industry may add other relevant instructions based on their operating and maintenance practices.

ओएनजीसी ONGC	DRILLING SERVICES AHMEDABAD COLD WORK PERMIT	DOC.NO. AMD/DS/QHSE/CWP/	
		ISSUE NO:05	DATE:15.06.2021
		REVISION NO:00	DATE :15.06.2021

Sl.No: ——

Work clearance from_____hrs of date_____To_____hrs of date_____**(Valid for the shift unless renewed)**

Issued to (Department / Section / Contractor): ——————————————————

Exact Location of work (Area / Unit / Equipment no. ——————————————————

Description of work: ——————————————————

THE FOLLOWING ITEMS SHALL BE CHECKED BEFORE ISSUING THE PERMIT

(Tick mark in the appropriate box. Checklist items marked with asterisk (*) shall be complied by receiver)

Sl. no.	item	Done	Not Reqd.	Sl no.	Item	Done	Not Reqd.
1	Equipment / Work Area inspected			6	Equipment water flushed		
2	Surrounding area checked, cleaned and covered			7	Equipment properly steamed / purged		
3	Equipment blinded/disconnected / closed / isolated / wedge opened			8	Proper ventilation and lighting provided		
4	Equipment properly drained and depressurized			9*	Area cordoned off & caution boards / tags provided.		
5	Equipment electrically isolated and tagged vide Permit no. ----------			10	Gas test: HCs / Toxic etc. HCs = % LEL Toxic gas = ppm Oxygen = %		

Remarks:

1. The activity has the following expected residual hazards (Tick the relevant items): Lack of Oxygen / H2S,

   Toxic Gases / Combustible gases / Pyrophoric Iron / Corrosive Chemicals / Steam – Condensate / Others

   _____

2. Following additional PPE to be used in addition to standards PPE (Helmet, Safety Shoes, Hand gloves, Boiler suit): Face Shield / Apron / Goggles / Dust Respirator / Fresh Air Mask / Lifeline / Safety Belt / Airline / Earmuff etc.

3. Additional precaution if any:——————————————————

Issuer Name & Designation	Issuer Signature	Receiver Name & Designation	Receiver Signature

Closing of the work permit:

Receiver : Certified that the subject work has been completed / stopped and area cleared			**Issuer:** Verified that the job has been completed and area cleaned and is safer from any hazard.		
Date & Time	***Name & Designation***	***Signature***	***Date & Time***	***Name & Designation***	***Signature***

Clearance Renewal:

Date	Time		Additional precautions if any, Otherwise mention "NIL"	Issuer's Name, Designation & Signature	Receiver's Name, Designation and Signature
	From	To			

General Instructions:

1. This permit must be posted at work site at all times.
2. PAI should keep original copies of completed Permits on file. Final inspection is usually made ½ hour after the completion of hot work to detect and extinguish possible smoldering fires. The inspector should be alert for circumstances that can require an extension of the final inspection interval. Management, the Permit Authorizing Individual (PAI), or the operator can extend the duration of the fire watch based on fire hazards or work being performed. An additional check, 2-hour after completion is highly recommended.
3. The work permit shall be filled up carefully and accurately in clear hand writing ensuring that complete information is provided in all sections /subsections and none of column is left blank. Sketches should be provided wherever possible to avoid miscommunication.
4. Appropriate safe guards and required personnel protective equipment shall be determined by a careful analysis of the potential hazards and the operations to be performed prior to starting the work.
5. In case of fire alarm/ siren, all work must immediately be stopped.
6. Only certified vehicle /engines and permitted type of electrical equipment and tools are allowed in operating areas.
7. Welding machines should be located in non-hazardous and ventilated areas.
8. No hot work should be permitted unless the explosive meter reading is Zero.
9. When a person is entering confined space, the receiver must keep minimum two standby-designated persons at the man-hole or entry point.
10. Before box up of any vessel manhole cover, ensure that no men / materials are inside the vessel.
11. For renewal of work clearance, the issuer shall ensure that the conditions are satisfactory for the work to continue. If the conditions have changed, it may be necessary to issue a new permit or amend the existing permit.
12. This clearance on the same permit can be renewed /extended up-to a maximum of seven calendar days.
13. On completion of the work, the permit must be closed and kept as record.
14. The industry may add other relevant instructions based on their operating and maintenance practices.