



FIELD INSPECTION REPORT
16770 HEDGECROFT DR, SUITE 710
HOUSTON, TX 77060

281-741-1347

Customer Name:		Job Site:	Reports Included:
Customer Number:		Job #:	Inspection Date:
Address:		PO:	Ordered By:
City:	State:	Zip:	Rig:
Inspection Method:			Lease:
Charge to:			Well Name:

[illegible]

White Light: _____
Calibration Date: _____
White Light Intensity: _____
Profile gauge: _____
Calibration Date: _____

Penetrant Brand: _____ Batch: _____
Developer Brand: _____ Batch: _____
Dwell Time: _____
Drying Time: _____
Drying Method: _____

Magnetic Particle Inspection [] Liquid Penetrant Inspection [] Visual Inspection [] Ultrasonic Inspection []

Summary: _____

CUSTOMER SIGNATURE: _____ LEVEL II INSPECTOR: _____

Magnetic Particle Inspection [] Liquid Penetrant Inspection { } Visual Inspection { } Ultrasonic Inspection { }

Summary: _____

CUSTOMER SIGNATURE

LEVEL II INSPECTOR