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G&D Tank Testing and Repair  
Box 247 Rocky Rapids, AB  
1-780-898-0962  
TC Canada Reg. # TC-25-1247



**HIGHWAY TANK LEAKAGE "K" INSPECTION REPORT**

<b>Account#</b>	41	<b>NEXT REQUIRED INSPECTION</b>	Jul-26
<b>OWNER</b>	Neway Oilfield Services	<b>UNIT#</b>	319
<b>ADDRESS</b>	Rocky Mountain House, Alberta	<b>MFG'S SERIAL#</b>	5HTDL4931E5L26912
<b>DATE</b>	July 2/2025	<b>DATE OF MFG</b>	07/2013
<b>TELEPHONE</b>	403-846-6954	<b>TANK SPECIFICATION</b>	DOT 407 AL
<b>TANK MFG</b>	Heil Trailer International Co	<b>COMPART/CAPACITY</b>	12,200 Gallon's
<b>MEDIUM</b>	Pneumatics	<b>MAWP</b>	30 PSI
<b>VISCOSITY</b>		<b>1 80% OF MAWP</b>	24 PSI
<b>TANK ASSEMBLER</b>	Heil Trailer International Co	<b>TCRN/MDIN</b>	N/A

Areas of Inspection	Pass		
	Yes	No	N/A
Venting that relieves at less than test pressure closed or inoperative	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hose tested to 75 psi or 120% of marked MAWP which ever is greater	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Piping are in place and operative	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Valves are in place and operative	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No leakage detected after pressure maintained for 5 minutes	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Inspector: Greg Mulligan

Disposition Statement: Return to Service

Signature

Repair performed:

Defects observed:

Comments:

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**HIGHWAY TANK THICKNESS TEST REPORT**

**Account#** 41 **NEXT REQUIRED INSPECTION** Jul-30  
**OWNER** Neway Oilfield Services **UNIT#** 319  
**ADDRESS** Rocky Mountain House, **MFG'S SERIAL#** 5HTDL4931E5L26912  
**DATE** July 2/2025 **DATE OF MFG** 07/2013  
**TELEPHONE** 403-846-6954 **TANK SPECIFICATION** DOT 407 AL  
**TANK MFG** Heil Trailer International **COMPART/CAPACITY** 12,200 Gallon's  
**Head Material Thickness** 9.525 M.M. **MINIMAL** 8.331 M.M.  
**Shell Material Thickness** 6.35 M.M. **MINIMAL** 5.892 M.M.  
**Tank Assembler** Heil Trailer International **TCRN/MDIN** N/A  
**Testing Device Serial #** TT0001  
**Testing Device thickness respond** 4.00 MM  
**Calibrated Date / Expiry Date** SELF CALB. / STEP BLOCK

Areas of Inspection	Minimum M.M.	Pass		
		Yes	No	N/A
Head.	8.90 M.M.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shell.	6.25 M.M.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Piping.	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Underside of the tank.	6.25 M.M.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Calibrated Date / Expiry Date.	July 2/2025	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Around Upper Coupler.	N/A.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Nominal Liquid Level Lines.	N/A.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Shell Reinforcements / Repads.	N/A.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Inspector: Greg Mulligan

Disposition Statement: Return To Service

Special Service of Tank : Standard Service

Signature

Repair Performed

Defects Observed

Comment:

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**HIGHWAY TANK EXTERNAL INSPECTION REPORT**

<b>Account#</b>	41	<b>NEXT REQUIRED INSPECTION</b>	Jul-26
<b>OWNER</b>	Neway Oilfield Services	<b>UNIT#</b>	319
<b>ADDRESS</b>	Rocky Mountain House, Alb.	<b>MFG'S SERIAL#</b>	5HTDL4931E5L26912
<b>DATE</b>	July 2/2025	<b>DATE OF MFG</b>	07/2013
<b>TELEPHONE</b>	403-846-6954	<b>TANK SPECIFICATION</b>	DOT 407 AL
<b>TANK MFG</b>	Heil Trailer International Co	<b>COMPART/CAPACITY</b>	12,200 Gallon's
<b>TANK ASSEMBLER</b>	Heil Trailer International Co	<b>TCRN/MDIN</b>	N/A

Areas of Inspection	PASS			Description of Defect	Repaired	
	Yes	No	N/A		Yes	No
Data plate legible and correct	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Accident damage protection (Roll - Over & Bumper etc)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Support Structure (cradle, bolster, frame & sills)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Corrosion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Dents and Cracks	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Welds	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Gaskets	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Flange Retainers	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Fittings/Nozzles	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Valves Operational & Leak Proof	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Devices Operational	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	D/S Second Emergency Shut Down Switth Not Working	<input checked="" type="checkbox"/>	<input type="checkbox"/>
PRV/Vents Tested	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Visual Pass	<input type="checkbox"/>	<input type="checkbox"/>
Tank Identification & Markings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Piping & Hoses voids free of residue, unplugged, no leakage	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Fixed & hard plumbed hoses free of exposed reinforcement, kinks, flatness or permanently deformed wire braids, soft spots, damaged or loose fittings, missing bolts	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Manhole Tightening Devices Operable	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Relief devices tested, reinstalled & operative	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Visual Pass	<input type="checkbox"/>	<input type="checkbox"/>
Manhole Covers Leak Proof	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N/A.	<input type="checkbox"/>	<input type="checkbox"/>
Hose Identification, test markings are legible, test dates, tank markings applied	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	No Hose's on Unit.	<input type="checkbox"/>	<input type="checkbox"/>

Comments

Signature

D/S Plac Card Holder is Loose From Tank

Special Service of Tank:

Standard Service

Inspector: Greg Mulligan.

Disposition Statement: Return To Service