

Welder Name: Eric Gosselin ID/Mark: EG6260 Test Location: Shrewsbury, MA
☐ Company Welder-Location: Proj Description: 6" 6 month Requal
☒ Contract Welder-Employer: Anderson Welding Proj ID: 13102020

Welding Information	Welding Code: <input checked="" type="checkbox"/> API 1104 <input type="checkbox"/> ASME Sec. 9		Welding Performed: <input type="checkbox"/> Inside <input checked="" type="checkbox"/> Outside		Welding Time: 0:38 hr:min	
	Welding Process: <input checked="" type="checkbox"/> SMAW <input type="checkbox"/> Other		Wldg Proc. #'s: Butt: <u>NGA-SMA-52-B-H-2</u> Branch:		Pipe Diameter: OD 6.625" x 0.280" w.t.	
	(Specify Other):		OD x w.t.		Pipe Spec & Grade: <u>API 5L</u> <u>X52</u>	
	Pass	Rod Dia.	Type	Type of Test		Welding Direction
	Root	1/8"	/ E6010	<input checked="" type="checkbox"/> Butt Weld		<input checked="" type="checkbox"/> Downhill
	Hot Pass	1/8"	/ E6010	<input type="checkbox"/> Branch Weld		<input type="checkbox"/> Uphill
	Filler Passes	5/32"	/ E6010	<input type="checkbox"/> Low Hydrogen		
	Cap	5/32"	/ E6010	<input type="checkbox"/> Multiple Qualification		<input type="checkbox"/> Single Qualification
	Visual Inspection: <input type="checkbox"/> Unacceptable due to: <input checked="" type="checkbox"/> Acceptable					

A. Destructive Test Results

Tensile Test	Coupon Stenciled >		1	2	3	4
	Coupon Width (Orig) - W - inch					
	Coupon Thickness (Orig) - T - inch					
	Orig. Area; Plate (in ²) - WxT					
	Maximum Load (psig) - #					
	Tensile Strength / sq. in. - (# / WxT)					
	Fracture Location (pipe, weld)					
	Comments:					
1 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable						
2 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable						
3 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable						
4 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable						

Test #1

Test #2

Bend Test	Root/Side: 1 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	Root/Side: 1 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable
	Root/Side: 2 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	Root/Side: 2 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable
	Face/Side: 3 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	Face/Side: 3 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable
	Face/Side: 4 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	Face/Side: 4 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable

Butt Weld:

Branch Weld:

Nick Break Test	1 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	1 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable
	2 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	2 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable
	3 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	3 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable
	4 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	4 - <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable

Miscellaneous Remarks on Test and / or Welder:

Pipe in 5G position. CWI witness of all welding in process. Verified adherence to procedure. VT acceptance after root/hot pass. VT acceptance on final weld.


B. Radiographic Test Results (Attach copy of Radiographic Inspection Report)

<input checked="" type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	Report Date: <u>10/21/2023</u>	X-Ray Company: <u>Mistras</u>
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C. Test Result

<input type="checkbox"/> Qualifying	<input checked="" type="checkbox"/> Acceptable
<input checked="" type="checkbox"/> Re-qualify	<input type="checkbox"/> Unacceptable

Tested By: Greg Lundy Date: 10-20-2023
 Signed: Greg Lundy Date: 10-21-2023
 Company Representative 

 **Gregory Hamilton Lundy**
CWI 21080351
QC1 EXP. 8/1/2024



Date: 10-21-23 Page: 1 of 1
 Job Number: 41232177-A88620
 Purchase Order: 13102020
 Reference Number: _____

Part Number:	6" WELDER QUALIFICATION
Code/Specification:	API 1104 20th ED
Procedure:	100-RT-003 Rev 6.1
Acceptance Criteria:	API 1104 20 th ED
Technique:	DWE/SWV

Source	Set-Up
<input checked="" type="checkbox"/> Ir-192 79 Curies <input type="checkbox"/> Co-60 N/A Curies <input type="checkbox"/> X-ray Kv N/A Ma N/A <input type="checkbox"/> Other:	Focal Spot Size: 0.122 Screen Type: PB Source to Film Distance: 6.625 Screen Thickness: F .010" B .010" Film Type: AGFA D7 Size: 4.5X10 Penetrameter : WIRE SET B <input checked="" type="checkbox"/> - Film Side <input checked="" type="checkbox"/> Single Load / <input type="checkbox"/> Double Load / <input type="checkbox"/> : <input type="checkbox"/> - Source Side

[illegible]

Technician & Date: Kenneth Bennett LVL2 10-21-23 Customer (sign): Management Review (sign):

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