

DWP / JSA - HIGH SPEC RIGS
Location

Submitted By  [Jose A. Jimenez](#)

Location was not collected for this report.

Surrogate  [Jose A. Jimenez](#)

Started On August 23 2024, 7:04am

Submitted On August 23 2024, 7:55am (an hour)

Weather NaN°,

Version V2 (latest)

Updated August 23 2024, 10:06am

Report No. 45211676

DWP / JSA - HIGH SPEC RIGS
JOB DETAILS

Date August 23rd 2024 6:04 AM MDT ✓

Did Supervisor Participate in today's DWP/JSA? YES

Did RES QHSE Team Member Participate in today's DWP/JSA? NO

Did the Manager / VP Participate in today's DWP/JSA? NO

Is this a Joint DWP/JSA including a Customer Representative? YES

Customer Representative Name: Craig East

Location [Milliken, CO \(807\)](#)

Line of Business [High Spec Rigs \(01\)](#)

Rig / Asset # [BW1543](#)

Location Type Customer

Customer [Chevron](#)

Customer Location Name MCKENNEY 14-12

Heat Index 91° to 103°: Moderate

Cold Index 0° Low

JOURNEY MANAGEMENT (COMPLETED BEFORE DRIVING TO LOCATION)

Weather & Road Conditions Good and clear

Planned Route & Mitigation Plan	Cr 57 and Cr 70
Driver Name	Jose A. Jimenez
Driving Start Time	5:30am
Pre-Trip Inspection Completed	Yes
DOT Regulated Drivers: Hours of Service Driving Hours Available Today	<i>None</i>
Valid Drivers License & current medical card on person	Yes

EAP & SITE ASSESSMENT

Truck #	P180032
Emergency Phone #	911
Closest City / Hospital	Greeley
Customer Name	Chevron
Supervisors Name	Alfredo Carrillo
GPS (Latitude & Longitude)	40°29'33" N 104°30'59" W
Wind Direction at 6:00 am	W
Wind Direction at 12:00 pm	<i>None</i>
Site Hazards	Uneven ground and slick surfaces
Designated Derrick Rescue	Aidan Beck
Emergency Backup Driver	Daniel T. Hinrichs

EVALUATIONS

Equipment Spacing from Ignition Source (100' Minimum when location allows)	Yes
If less than 100 feet, list the steps that have been taken to mitigate the hazard.	
Pump	No
Open Top Tank	No
Power Swivel	No
Light Plant(s)	No
Accumulator	No
Flare Stack	No
Vehicles	No
Laydown Machine	No
Other	No
Power Line Distance (Contact Supervisor if <25')	Yes
Have controls been put in place?	Yes
H2S Pre Job Test (Contact Superintendent if ANY H2S is present)	Yes
Ground Conditions Acceptable	Yes
Evaluations Notes	<i>None</i>

SHORT SERVICE EMPLOYEES

of SSE's 0

CRITICAL ACTIVITY

Simultaneous Operations No

DWP includes treatment of non-routine task? No

Meet and Greet with Vendor Performed? Yes

Supervisor On Location? Yes

Company Representative on Location? Yes

Certification of Equipment Verified? Yes

Roles and Responsibilities Established? Yes

Communication Techniques Verified? Yes

Specialized PPE Needed? No

Indicate Specialized PPE None

Working With Vendors None

Workover Activities Tripping Tubing, Wireline Operations

Major Maintenance None

Road Side Emergency None

Other Non-Routine Tasks Not Listed: None

Third Party Tools & Equipment Passed Pre Job Inspection Yes

PRE-TASK DROPS ASSESSMENT

Static Drops - Objects that falls from its original position under its own weight like a tool falling from a worker's hand

of Overhead Tools and Potential Drops Secured? 0

Dynamic Drops (Swing/Fall Hazards) - Objects that breaks free from its fastenings due to the applied force of another object.

COFO/POSI Stop Functioning and Set (Note: Contact supervisor immediately if COFO/POSI Stop is not functioning) Yes

Lift Plan Needed? N/A

PRE-TASK HEAVY EQUIPMENT ASSESSMENT

Heavy Equipment to be operated onsite? No

LOCATION DIAGRAM

Location Diagram

Site Diagram (ERP)	None
--------------------	------

JOB STEPS

# of Steps	3
------------	---

1	Describe Job Step	Tubular handling
	Injury Risk (Describe How we could be injured)	Working at heights Pinch points in tongs Crown out floor out Well control
	Action To Prevent Injury (Include PPE assessment by task)	Make sure to be tied off at all times and do start works checks Keep hands out of power tongs Set Posi stop before working blocks Have 2 forms of well control at all times
	Hierarchy	3 - Engineering Controls - Isolate people from the hazard, 4 - Administrative Controls - Change the way people work, 5 - PPE - Protect the worker with Personal Protective Equipment
	Reference Docs	DWP / JSA, Pipe Handling - RIG-NA-PR-0054
	Reference Docs (Other)	None
2	Describe Job Step	Rig up and run Wireline
	Injury Risk (Describe How we could be injured)	Refer to WL JSA
	Action To Prevent Injury (Include PPE assessment by task)	Refer to WL JSA
	Hierarchy	3 - Engineering Controls - Isolate people from the hazard, 4 - Administrative Controls - Change the way people work, 5 - PPE - Protect the worker with Personal Protective Equipment
	Reference Docs	DWP / JSA
	Reference Docs (Other)	None

3	Describe Job Step	Pump operations
	Injury Risk (Describe How we could be injured)	High pressure lines Prv improper Valve alignment
	Action To Prevent Injury (Include PPE assessment by task)	Establish and respect redzone management Set Prv to max Psi before bring pump online 1500 Double check valve alignment and confirm.
	Hierarchy	3 - Engineering Controls - Isolate people from the hazard, 4 - Administrative Controls - Change the way people work, 5 - PPE - Protect the worker with Personal Protective Equipment
	Reference Docs	Mud Pump Operations - RIG-NA-PR-0038
	Reference Docs (Other)	<i>None</i>

PARTICIPANTS

Supervisor [Alfredo Carrillo](#)

Supervisor Signature



of JSA Participants 4

Employee

[Jose A. Jimenez](#)

Signature



Injury/Illness - I do not have any injuries, illnesses or symptoms of illness that may affect my ability to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Medications - I have not taken any medications (over the counter or prescription) that may affect my ability to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Stress - I am not under any psychological pressure as a result of financial disparity, health related issues or family disorder.

True

Notify your Supervisor if you checked FALSE

None

Alcohol - I have not consumed alcohol within the past eight hours (prior to work) or within the past 24 hours resulting in ill effects.

True

Notify your Supervisor if you checked FALSE

None

Fatigue - I have received adequate rest to allow me to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Eating - I have eaten well enough to sustain me through the rigors of my job functions, drank plenty of fluids and avoided heavy meals that may impair me.

True

Notify your Supervisor if you checked FALSE

None

Employee

[Aidan Beck](#)

Signature



Injury/Illness - I do not have any injuries, illnesses or symptoms of illness that may affect my ability to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Medications - I have not taken any medications (over the counter or prescription) that may affect my ability to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Stress - I am not under any psychological pressure as a result of financial disparity, health related issues or family disorder.

True

Notify your Supervisor if you checked FALSE

None

Alcohol - I have not consumed alcohol within the past eight hours (prior to work) or within the past 24 hours resulting in ill effects.

True

Notify your Supervisor if you checked FALSE

None

Fatigue - I have received adequate rest to allow me to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Eating - I have eaten well enough to sustain me through the rigors of my job functions, drank plenty of fluids and avoided heavy meals that may impair me.

True

Notify your Supervisor if you checked FALSE

None

Employee

[Daniel T. Hinrichs](#)

Signature



Injury/Illness - I do not have any injuries, illnesses or symptoms of illness that may affect my ability to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Medications - I have not taken any medications (over the counter or prescription) that may affect my ability to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Stress - I am not under any psychological pressure as a result of financial disparity, health related issues or family disorder.

True

Notify your Supervisor if you checked FALSE

None

Alcohol - I have not consumed alcohol within the past eight hours (prior to work) or within the past 24 hours resulting in ill effects.

True

Notify your Supervisor if you checked FALSE

None

Fatigue - I have received adequate rest to allow me to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Eating - I have eaten well enough to sustain me through the rigors of my job functions, drank plenty of fluids and avoided heavy meals that may impair me.

True

Notify your Supervisor if you checked FALSE

None

Employee

[Hugo E. Chavez](#)

Signature



Injury/Illness - I do not have any injuries, illnesses or symptoms of illness that may affect my ability to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Medications - I have not taken any medications (over the counter or prescription) that may affect my ability to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Stress - I am not under any psychological pressure as a result of financial disparity, health related issues or family disorder.

True

Notify your Supervisor if you checked FALSE

None

Alcohol - I have not consumed alcohol within the past eight hours (prior to work) or within the past 24 hours resulting in ill effects.

True

Notify your Supervisor if you checked FALSE

None

Fatigue - I have received adequate rest to allow me to safely perform my job functions.

True

Notify your Supervisor if you checked FALSE

None

Eating - I have eaten well enough to sustain me through the rigors of my job functions, drank plenty of fluids and avoided heavy meals that may impair me.

True

Notify your Supervisor if you checked FALSE

None

4

of 3rd Party Participants

1

1	Company	Chevron
	Name	Craig East
	Signature	

VISITORS**# of Visitors** 0**ATTACHMENTS****CUSTOMER JSA** None**AUDIT DWP / JSA**

ONLY Supervisors, Managers and QHSE Team Members Should Audit DWP / JSA

Audit DWP / JSA No**DWP On-Site Audit / Coaching** No*Generated Friday, August 23rd 2024, 10:50pm CDT**powered by*  **KPA**