

ENCLOSURE (nb)



NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT

Unit Name: USCGC HEALY (WAGC-20) Address: _____

Serial Number: 665634 Initial Hydro Date 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} ~~cu ft~~ Cylinder Color: SILVER Material: ST AL FRP,
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: OK ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 10 CONTINUOUS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN/SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 / 7 / 01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: _____, LT, SSDO **ENCLOSURE (2)** PAGE 1 OF 60 PAGES
 Facility: USCGC HEALY

10.7C



**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGB 20) Address: _____

Serial Number: 665940 Initial Hydro Date 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} cu-ft Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: PASS
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 12 CONTINUOUS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 / 7 / 01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: LT [REDACTED] or SSO EMILIO BONE (2Y) PAGE 2 OF 60 PAGES.
 Facility: HEALY

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGB 20) Address: _____

Serial Number: 665740 Initial Hydro Date: 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} _{cu ft} Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: PASS
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 12 CONFORMING Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 / 7 / 01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] ^{SSDD} [REDACTED] (12) **PAGE 3 USE OF 60 PAGES.**
 Facility: _____

10.7C



**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGB 20) Address: _____

Serial Number: 676670 Initial Hydro Date 3/99 Current Hydro Date: 3/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSC} cu ft Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: PASS ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 10 CONTINUOUS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 / 7 / 01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: _____ 5500 5500 5500 5500 5500 5500 5500 5500 5500 5500
 Facility: USCGC HEALY

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: _____ Address: _____

Serial Number: 665914 Initial Hydro Date 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSE} cu ft Cylinder Color: SILVER Material: ST AL. FRP.
 Valve: J K DIN Other: _____ No valve Boot: Y N/A Backpack: Y N/A

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: OK ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 11 CONTINUOUS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 / 8 / 01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] ¹²⁷ ₅₅₀₈ UR HEAV 5 OF 60 PAGES.
 Facility: HEAV

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NOAA DIVING PROGRAM VISUAL CYLINDER INSPECTION REPORT

Unit Name: _____ Address: _____

Serial Number: 665923 Initial Hydro Date 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} ~~cu ft~~ Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: PASSED
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: II CONTINUOUS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 / 8 / 01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] LT [REDACTED] (18) PAGE 6 OF 60 PAGES
 Facility: HEALT

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGB 20) Address: FPO AP, 96667-3918

Serial Number: 676734 Initial Hydro Date 3/99 Current Hydro Date: 3/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} cu ft Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: PASS/OK
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 11 CONTINUOUS THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 318101
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: _____ (2Y) Facility: PAGE 7 HDTU 60 PAGES.

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCG CHEALY (WAGB 20) Address: FPO AP, 96667

Serial Number: 665686 Initial Hydro Date: 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} cu ft Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve _____ Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: PASS/OK ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 11 CONTINUOUS THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3/8/01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] LT Facility: PAGE 8 10560 PAGES.

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGB20) Address: FPO AP, 96667-3918

Serial Number: 665728 Initial Hydro Date 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} ~~cu ft~~ Cylinder Color: SILVER Material: ST AL FRP,
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: PASS/OK ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 10 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN/SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 1 8 1 0 1
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED], 5500 (128) Facility: HEALY PAGE 9 OF 60 PAGES.

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NOAA DIVING PROGRAM VISUAL CYLINDER INSPECTION REPORT

Unit Name: USCC HEALY (WAGB 20) Address: FPO AP, 96667-3918

Serial Number: 665957 Initial Hydro Date 2/99 Current Hydro Date: 2/99
Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
Working Pressure: 3500 ^{PSE} ~~cu ft~~ Cylinder Color: SILVER Material: ST AL FRP
Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
Internal Odor: Y N Describe: _____ Tone test if required: OK/PASS ✓
Description of exterior surface: NEW
Location and depth of 0.015" + gouges, dings or pits: NONE
Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
Description of internal surface: NEW
Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 13 CONTINUOUS Number damaged: 0
Crack Assessment: NONE O-Ring Surface: CLEAN
Inspection with Visual Plus: Y N
Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3/8/01
Unacceptable: Recommendation: _____
Action Taken: Tumble: Hydro: Discard:
Inspector's Name: [REDACTED] LT Facility: HEALY 60 PAGES. 15400

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEAVY (WAGB 70) Address: FPO AP, 96667-3918

Serial Number: 676731 Initial Hydro Date 3/99 Current Hydro Date 3/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSE} ~~cu ft~~ Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: OK ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 10 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3/8/01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: LT [REDACTED] 5500 Facility: HEAVY
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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGB20) Address: FPO AP, 96667-3918

Serial Number: 666098 Initial Hydro Date 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSE} cu ft Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: OK ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 10 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN/SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 1 9 1 0 1
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] S400 (N) Facility: CC HEALY
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NOAA DIVING PROGRAM VISUAL CYLINDER INSPECTION REPORT

Unit Name: USCGC HEALY (WMEB 2) Address: _____

Serial Number: 676743 Initial Hydro Date 3/99 Current Hydro Date: 3/99
 Cylinder Volume: 100 cu ft. Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} cu ft. Cylinder Color: SILVER Material: ST AL FRP.
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: _____
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 10 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 / 9 / 01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: _____ Facility: CGC HEALY
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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGO 20) Address: FPO AP, 96667-3918

Serial Number: 676680 Initial Hydro Date: 3/99 Current Hydro Date: 3/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} ~~cu ft~~ Cylinder Color: SEVER Material: ST AL FRP,
 Valve: J K DIN Other: _____ No valve _____ Boot: Y ~~N~~ Backpack: Y ~~N~~

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y ~~N~~ Evidence of Bulges: Y ~~N~~
 Internal Odor: Y ~~N~~ Describe: _____ Tone test if required: OK ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y ~~N~~

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 10 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN
 Inspection with Visual Plus: Y ~~N~~
 Burst disc replaced: Y ~~N~~ Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 19 1 01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] 5500 Facility: HEALY PAGE 14 OF 60 PAGES

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCC HEALY (WAG020) Address: _____

Serial Number: 665959 Initial Hydro Date: 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSI} cu ft Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: OK ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 12 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 19 101
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] SSD (28) PAGE 15 OF 60 PAGES.
 Facility: HEALY

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGB20) Address: FPO AP, 96667-3918

Serial Number: 676746 Initial Hydro Date 3/99 Current Hydro Date: 3/99
 Cylinder Volume: 100 cu ft. Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSE} cu ft. Cylinder Color: SILVER Material: ST AL. FRP.
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: OK ✓
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 11 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 1 9 1 0 1
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] SS00 Facility: HEALY PAGE 44 OF 60 PAGES

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGB 20) Address: FPO AP, 96667

Serial Number: 676747 Initial Hydro Date 3/99 Current Hydro Date: 3/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSE} cu ft Cylinder Color: SILVER Material: ST AL FRP
 Valve: J DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: OK
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NEW
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 10 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE O-Ring Surface: CLEAN
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 19 101
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] SSD0 Facility: HEALY
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NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT

Vessel Name: USCGC HEALY (WAGB 20) Address: _____

Serial Number: 676527 Initial Hydro Date 2/99 Current Hydro Date: 2/99
Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
Working Pressure: 3500 cu ft Cylinder Color: SILVER Material: ST AL FRP
Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting): Y N Evidence of Bulges: Y N
Internal Odor: Y N Describe: _____ Tone test if required: OK ✓
Description of exterior surface: NEW
Location and depth of 0.015" + gouges, dings or pits: NONE
Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
Description of internal surface: NEW
Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 12 GOOD THREADS Number damaged: 0
Crack Assessment: NONE O-Ring Surface: CLEAN
Inspection with Visual Plus: Y N
Burst disc replaced: Y N Other service needed: _____

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 1 7 1 0 1
Unacceptable: Recommendation: _____
Action Taken: Tumble: Hydro: Discard:

Inspector's Name: [REDACTED], 5500 Facility: HEALY PAGE 1 OF 1 PAGES

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**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEALY (WAGB 20) Address: FPO AP, 96667-3918

Serial Number: 676687 Initial Hydro Date 3/99 Current Hydro Date: 3/99
 Cylinder Volume: 100 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 cu ft Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: OK
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable Unacceptable

INTERNAL CONDITION

Amount and composition of contents: NO CONTENTS
 Description of internal surface: CLEAN
 Location and depth of any pitting: NO PITTING

Comparison to standards: Acceptable Unacceptable

THREADING/VALVE

Description of threads: CLEAN (11 THREADS) Number damaged: 0
 Crack Assessment: NONE VISIBLE O-Ring Surface: _____
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: _____

Comparison to standards: Acceptable Unacceptable

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 1 9 1 01
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] SSO Facility: HEALY PAGE 1 OF 60 PAGES

6.7C



**NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT**

Unit Name: USCGC HEAVY (WAGB20) Address: FPO AP 96667-3918

Serial Number: 665917 Initial Hydro Date: 2/99 Current Hydro Date: 2/99
 Cylinder Volume: 00 cu ft. Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3500 ^{PSE} cu-ft. Cylinder Color: SILVER Material: ST AL FRP
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: OK
 Description of exterior surface: NEW
 Location and depth of 0.015" + gouges, dings or pits: NEW, NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: _____
 Description of internal surface: _____
 Location and depth of any pitting: _____

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 12 NEW THREADS Number damaged: 0
 Crack Assessment: _____ O-Ring Surface: _____
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: _____

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 19 101
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] SDDO ¹²⁸ Facility: HEAVY
 PAGE 20 OF 60 PAGES.

6.7c



NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT

#1

Unit Name: USCGC HEALY (WAGB-20) Address: _____

Serial Number: P66002 Initial Hydro Date 08/93 Current Hydro Date: 11/98
 Cylinder Volume: 80 cu ft. Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3000 cu ft. Cylinder Color: GREY Material: ST. AL FRP
 Valve: (J) K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: _____
 Description of exterior surface: GOOD
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NONE
 Description of internal surface: NO PITTING OR CONTENTS.
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable Unacceptable:

THREADING/VALVE

Description of threads: 12 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE EVIDENT O-Ring Surface: SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: NONE

Comparison to standards: Acceptable Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 2 / 13 / 00
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] L776 5500 128 Facility: USCGC HEALY

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NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT

#18

Unit Name: USCGC HEALY (WAGB 20) Address: _____

Serial Number: 17828 Initial Hydro Date 8/82 Current Hydro Date: 11/98
Cylinder Volume: 80 ~~3000~~ cu ft Cylinder Use: SCUBA SCBA Other: _____
Working Pressure: 3000 cu ft Cylinder Color: YELLOW Material: ST AL FRP,
Valve: J K DIN Other: _____ No valve Boot: Y ~~N~~ Backpack: Y ~~N~~

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
Internal Odor: Y N Describe: _____ Tone test if required: _____
Description of exterior surface: PAINT DAMAGE ONLY
Location and depth of 0.015" + gouges, dings or pits: NONE
Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NO CONTENTS
Description of internal surface: EXCELLENT
Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 15 GOOD THREADS Number damaged: NONE
Crack Assessment: NONE EVIDENT O-Ring Surface: SMOOTH
Inspection with Visual Plus: Y N
Burst disc replaced: Y N Other service needed: _____

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 2/13/00
Unacceptable: Recommendation: _____
Action Taken: Tumble: Hydro: Discard:
Inspector's Name: [REDACTED] SSDO Facility: USCGC HEALY

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6,7C



NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT

#13

Unit Name: _____ Address: _____

Serial Number: P84802 Initial Hydro Date 10/75 Current Hydro Date: 11/90
 Cylinder Volume: 80 cu ft. Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3000 cu ft. Cylinder Color: Yellow Material: ST. AL FRP,
 Valve: D K DIN Other: _____ No valve Boot: Y ~~N~~ Backpack: Y ~~N~~

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: _____
 Description of exterior surface: PAINT CHIPPED IN MANY AREAS
 Location and depth of 0.015" + gouges, dings or pits: 1040 DING @ 8 O'CLOCK 1/3 DOWN
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: MINIMAL WHITE DUST
 Description of internal surface: SMOOTH + CLEAN
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 15 CONTINUOUS Number damaged: NONE
 Crack Assessment: NONE EVIDENT O-Ring Surface: FLAT + SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: _____

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 2 13 190
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [Redacted] Facility: HEALT
 PAGE 23 OF 60 PAGES

6, 7c



NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT

#14

Unit Name: USCGC HEALY (WAGB 20) Address: _____

Serial Number: P340037 Initial Hydro Date 10/97 Current Hydro Date: 11/98
 Cylinder Volume: 80 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3000 cu ft Cylinder Color: YELLOW Material: ST. AL FRP,
 Valve: J DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: N/A
 Description of exterior surface: GOOD
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NO CORROSION
 Description of internal surface: GOOD
 Location and depth of any pitting: NO PITTING

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 17 COMPLETE Number damaged: NONE
 Crack Assessment: NONE EVIDENT O-Ring Surface: SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: _____

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 2/13/00
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED], LTJCS500 128 Facility: USCGC HEALY
 PAGE 24 OF 100 PAGES.

6,7C



NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT

#2

Unit Name: _____ Address: _____

Serial Number: P91972 Initial Hydro Date: 1/76 Current Hydro Date: 11/98
Cylinder Volume: 80 cu ft Cylinder Use: SCUBA SCBA Other: _____
Working Pressure: 3000 ^{PSS} _{CU FT} Cylinder Color: YELLOW Material: ST. AL FRP,
Valve: (J) K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
Internal Odor: Y N Describe: _____ Tone test if required: _____
Description of exterior surface: PAINT CHIPPED IN SEVERAL AREAS
Location and depth of 0.015" + gouges, dings or pits: NONE
Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: MINIMAL ALUMINUM OXIDE PARTICLES
Description of internal surface: SMOOTH & CLEAN
Location and depth of any pitting: NONE

Comparison to standards: Acceptable Unacceptable:

THREADING/VALVE

Description of threads: 15 CONTINUOUS THREADS Number damaged: NONE
Crack Assessment: NONE EVIDENT O-Ring Surface: FLAT & SMOOTH
Inspection with Visual Plus: Y N
Burst disc replaced: Y N Other service needed: _____

Comparison to standards: Acceptable Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3/23/00
Unacceptable: Recommendation: _____
Action Taken: Tumble: Hydro: Discard:
Inspector's Name: [REDACTED] ^{DF,SSDO} LTIC,SSDO 128 PAGE 25 OF 100 PAGES.
Facility: _____

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NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT

#3

Unit Name: _____ Address: _____

Serial Number: P90306 Initial Hydro Date 01 76 Current Hydro Date: 11/98
Cylinder Volume: 80 cu ft Cylinder Use: SCUBA SCBA Other: _____
Working Pressure: 3000 ^{PSI} ~~cu ft~~ Cylinder Color: YELLOW Material: ST. AL FRP,
Valve: (J) K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
Internal Odor: Y N Describe: _____ Tone test if required: _____
Description of exterior surface: PAINT CHIPPED IN MANY AREAS
Location and depth of 0.015" + gouges, dings or pits: .010 DING 2 O'LOCK M30-BOTTLE
Line corrosion around boot or backpack band: Y N .030 DING 5 O'LOCK M30 BOTTLE

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: MINERAL ALUMINUM OXIDE PEBBLES
Description of internal surface: GOOD + CLEAN
Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 14 - NO CRACKS EVIDENT Number damaged: NONE
Crack Assessment: NONE EVIDENT O-Ring Surface: SMOOTH + LEVEL
Inspection with Visual Plus: Y N
Burst disc replaced: Y N Other service needed: _____

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 1 23 190
Unacceptable: Recommendation: _____
Action Taken: Tumble: Hydro: Discard:
Inspector's Name: [REDACTED] 176,5500 124 PAGE 26 OF 60 PAGES
Facility: HEAD

617c



NOAA DIVING PROGRAM
VISUAL CYLINDER INSPECTION REPORT

#9

Unit Name: USCGC HEALY (WAGO 20) Address: _____

Serial Number: P320146 Initial Hydro Date 6/97 Current Hydro Date: 11/98
 Cylinder Volume: 80 cu ft Cylinder Use: SCUBA SCBA Other: _____
 Working Pressure: 3000 cu ft Cylinder Color: YELLOW Material: ST. AL FRP,
 Valve: J K DIN Other: _____ No valve Boot: Y N Backpack: Y N

EXTERNAL CONDITION

Evidence of fire or heat damage: (re-painting) : Y N Evidence of Bulges: Y N
 Internal Odor: Y N Describe: _____ Tone test if required: _____
 Description of exterior surface: GOOD
 Location and depth of 0.015" + gouges, dings or pits: NONE
 Line corrosion around boot or backpack band: Y N

Comparison to standards: Acceptable: Unacceptable:

INTERNAL CONDITION

Amount and composition of contents: NO CONTENTS
 Description of internal surface: VERY MINOR CORROSION
 Location and depth of any pitting: NONE

Comparison to standards: Acceptable: Unacceptable:

THREADING/VALVE

Description of threads: 13 GOOD THREADS Number damaged: 0
 Crack Assessment: NONE EVIDENT O-Ring Surface: SMOOTH
 Inspection with Visual Plus: Y N
 Burst disc replaced: Y N Other service needed: _____

Comparison to standards: Acceptable: Unacceptable:

CYLINDER CERTIFICATION

Acceptable: Sticker Affixed: Date: 3 1 24 00
 Unacceptable: Recommendation: _____
 Action Taken: Tumble: Hydro: Discard:
 Inspector's Name: [REDACTED] LTIC Facility: SSDO 128 PAGE 27 OF 40 PAGES.

G. TC



NATIONAL COMPRESSED AIR CERTIFICATION

TRI/ENVIRONMENTAL, INC.
A Texas Research International Company

9063 Bee Caves Road
Austin, TX 78733-6201
<http://www.texasresearchintl.com>

USCGC HEALY (WAGB20)
ATTN DIVE OFFICER
FPO, AP 96667-3918

ACTIVITY CODE: C447
DATE SHIPPED: 09/07/2001
DATE RECEIVED: 10/08/2001
DATE REPORTED: 10/09/2001
KIT NO.: 757

| ANALYSIS REQUESTED | SPECIFICATIONS FOR GAS SAMPLE | RESULTS OF GAS SAMPLE ANALYSIS |
|---|-------------------------------|--------------------------------|
| OXYGEN (%) | 20-22 | 20.8 |
| CARBON DIOXIDE (ppm) | 1000 | < 25 |
| CARBON MONOXIDE (ppm) | 20 | < 1 |
| TOTAL HYDROCARBONS OTHER THAN METHANE (ppm) | 25 | < 1 |
| OIL MIST, PARTICULATE (mg/m ³) | 5 | < 0.1 |
| ODOR | Not Objectionable | Not Objectionable |
| METHANE (ppm) | Not Specified | 2.0 |
| | | |
| | | |

This is to certify that the above referenced sample **DOES MEET** the air purity standard for compressed breathing air per NAVSEA 0994-LP-001-9010 USN Diving Manual.

Authorized Chemist:

Cylinder: KT3 Filter: 813
Report No.: 01-10469 AIRSOURCE: BAUER K-15/E3 SN# 32272
FAX: 206-217-6909

CC: COASTAL SYSTEMS STATION ATTN: 6703 WEST HIGHWAY 98 PANAMA CITY, FL 32407-7001

6,7c



NATIONAL COMPRESSED AIR CERTIFICATION

TRI/ENVIRONMENTAL, INC.
A Texas Research International Company

9063 Bee Caves Road
Austin, TX 78733-6201
<http://www.texasresearchintl.com>

USCGC HEALY (WAGB20)
ATTN DIVE OFFICER
14 S. MASSACHUSETTS STREET
SEATTLE, WA 98146

ACTIVITY CODE: C447
DATE SHIPPED: 03/20/2001
DATE RECEIVED: 03/27/2001
DATE REPORTED: 03/28/2001
KIT NO.: 735

| ANALYSIS REQUESTED | SPECIFICATIONS FOR GAS SAMPLE | RESULTS OF GAS SAMPLE ANALYSIS |
|---|-------------------------------|--------------------------------|
| OXYGEN (%) | 20-22 | 20.8 |
| CARBON DIOXIDE (ppm) | 1000 | 455 |
| CARBON MONOXIDE (ppm) | 20 | < 1 |
| TOTAL HYDROCARBONS OTHER THAN METHANE (ppm) | 25 | < 1 |
| OIL MIST, PARTICULATE (mg/m ³) | 5 | 0.1 |
| ODOR | Not Objectionable | Not Objectionable |
| METHANE (ppm) | Not Specified | 1.8 |
| | | |
| | | |

This is to certify that the above referenced sample **DOES MEET** the air purity standard for compressed breathing air per NAVSEA 0994-LP-001 6010 USN Diving Manual.
Authorized Chemist:

Cylinder: KT147 Filter: 1137
Report No.: 01-3227 AIRSOURCE: BAUER/K-15-E3 SCBA SN# 32272
FAX: 206-217-6909

CC: COASTAL SYSTEMS STATION ATTN: 6703 WEST HIGHWAY 98 PANAMA CITY, FL 32407-7001

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PAGE 29 OF 60 PAGES.
Cer. TC

Lawrence Factor, Inc.

4740 NW 157th Street, Miami Lakes, FL 33014
 Phone: (305) 430-0550 Fax: (305) 430-0864

e-mail: L-factor@lx.netcom.com
 website: www.Lawrence-Factor.com

Test Results - Fax

Wednesday, April 05, 2000

COMMANDING OFFICER

USCGC HEALY
 WAGB20

Client ID: COMM70094

Agent ID: NA

Frequency: Single

Kit #: 64121

| CGA D (G-7.1, '97) | | | | | |
|--|---------|------------|--|--|-----------|
| Analytes | Test #1 | | | | Standard |
| | 1/26/00 | | | | |
| Oxygen (%) | 20.79 | | | | 19.5-23.5 |
| Carbon Dioxide (ppm) | 664.00 | | | | 1000 |
| Carbon Monoxide (ppm) | <1 | | | | 10 |
| Water Vapor (ppm) | 20.92 | | | | 67 |
| Dew Point (F) | -66 | | | | -50 |
| Oil/Part. (mg/m3) | <1 | | | | 5 |
| Unknowns | ND | | | | NA |
| Odor | ND | | | | None |
| Spectra # | | DM48391.SP | | | |
| Accredited Results: Sample Meets Standard | | | | | |

 American Association for Laboratory Accreditation (Chemical - 314.010)

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Certified Pure

The Breathing Air/Gas processed and analyzed
on **1/26/00** satisfies the guidelines for
CGA D (G-7.1, '97)

COMMANDING OFFICER
USCGC HEALY
WAGB20

X-ZAN Laboratories

Kit# - 64121 Issue ID - 48391 Issue Date - 4/5/00

This Certificate is not issued for an unbounded duration. A regular testing program and quality control should be instituted to ensure continued compliance with the standard indicated above. This Certificate may not be reproduced except with the written permission of Lawrence Factor, Inc.



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website: www.lawrence-factor.com
e-mail: L-factor@bc.netcom.com

Report - Scan

Client
COMMANDING OFFICER

Test Site
USCGC HEALY
WAGB20

ID #'s
Client ID: COMM70094
Agent ID: NA

Program Information
Program #:
Frequency: Single
Kit #: 64121

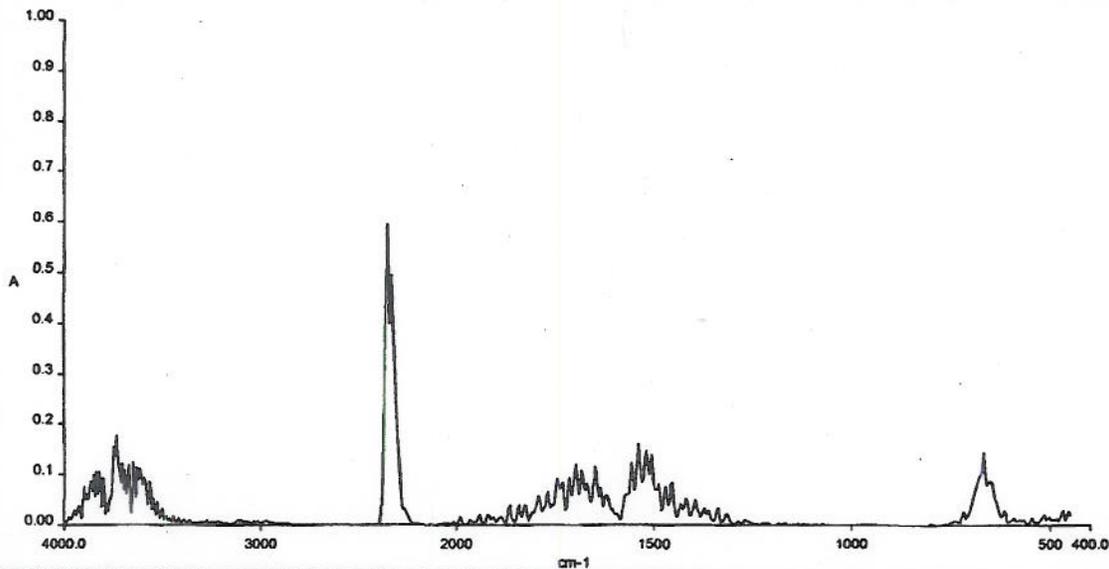
Tracking Information
Date Received: 1/25/00
Issue ID: 48391

CGA D (G-7.1, '97)

| Analytes | Test #1 | Range |
|-----------------------|---------|-----------|
| Oxygen (%) | 20.79 | 19.5-23.5 |
| Carbon Dioxide (ppm) | 664.00 | 1000 |
| Carbon Monoxide (ppm) | <1 | 10 |
| Water Vapor (ppm) | 20.92 | 67 |
| Dew Point (F) | -66 | -50 |
| Oil/Part. (mg/m3) | <1 | 5 |
| Unknowns | ND | NA |
| Odor | ND | None |

Spectra #: DM48391.SP
Accredited Results: Sample Meets Standard

American Association for Laboratory Accreditation (Chemical - 314.01)



X-ZAN Laboratories

IMPORTANT: This air/gas or substance was tested ONLY against a specified standard and may contain undetected items which are beyond the purpose or scope of this analysis. More extensive testing can be conducted upon request. This does NOT guarantee the condition nor safe application of the analyzed air/gas or substance. Results reported relate only to the items tested. This report shall not be reproduced except in full, without the written consent of Lawrence Factor, Inc. - Lab Services Division. Not all methods are shown.



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 Phone: (305) 430-0850 Fax: (305) 430-0864
 website: www.lawrence-factor.com
 e-mail: L-factor@ix.netcom.com

Report - Scan

Client
COMMANDING OFFICER

Test Site
 USCGC HEALY
 WAGB20

ID #'s
 Client ID: COMM70094
 Agent ID: NA

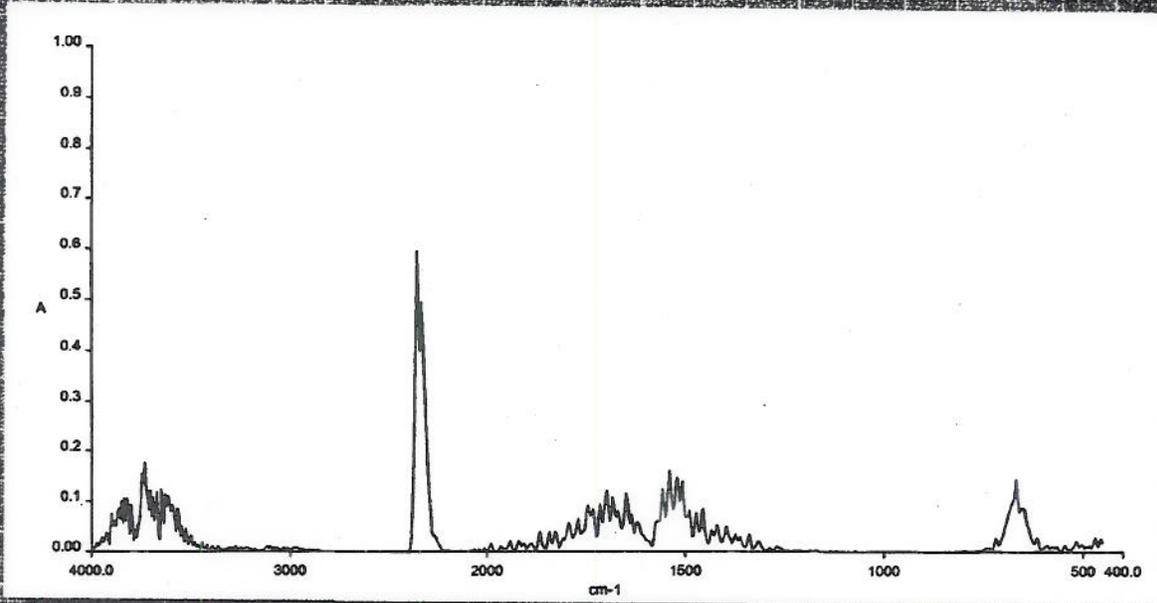
Program Information
 Program #:
 Frequency: Single
 Kit #: 64121

Tracking Information
 Date Received: 1/25/00
 Issue ID: 48391

| CGA D (G-7.1, '97) | | | | |
|-----------------------|---------|--|--|-----------|
| Analytes | Test #1 | | | Range |
| Oxygen (%) | 20.79 | | | 19.5-23.5 |
| Carbon Dioxide (ppm) | 664.00 | | | 1000 |
| Carbon Monoxide (ppm) | <1 | | | 10 |
| Water Vapor (ppm) | 20.92 | | | 67 |
| Dew Point (F) | -66 | | | -50 |
| Oil/Part. (mg/m3) | <1 | | | 5 |
| Unknowns | ND | | | NA |
| Odor | ND | | | None |

Spectra #: DM48391.SP
 Accredited Results: Sample Meets Standard

American Association for Laboratory Accreditation (Chemical - 314.01)



X-ZAM Laboratories

IMPORTANT: This air/gas or substance was tested ONLY against a specified standard and may contain undetected items which are beyond the purpose or scope of this analysis. More extensive testing can be conducted upon request. This does NOT guarantee the condition nor safe application of the analyzed air/gas or substance. Results reported relate only to the items tested. This report shall not be reproduced except in full, without the written consent of Lawrence Factor, Inc. - Lab Services Division. Not all methods are shown.

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AMRON UMBILICAL INSPECTION AND CERTIFICATION FORM

INVOICE DATE

| CUSTOMER # | WORK ORDER # | SALES ORDER # | INVOICE # | CUSTOMER P.O. |
|------------|--------------|---------------|-----------|---------------|
| Z36239 | 10881 | 0037185 | | Z448 |

| CUSTOMER INVOICE TO: | CUSTOMER SHIP TO: |
|--|--|
| DFAS - USCG GROUP MOBILE, AL COLUMBUS CENTER ATTN: DFAS-CO-SEPI P.O. BOX 182317 | USCGC HEALY WAGB 20 C/O USCG BASE SEATTLE 1519 ALASKAN WAY SOUTH SEATTLE, WA 98134-1192 |

| UMBILICAL PART NUMBER | SERIAL NUMBER |
|-----------------------|---------------|
| UMB-ADU1MK20-MM-262 | 15702-E |

| UMBILICAL TYPE/TEST (Check off all tests which apply) | |
|---|---|
| JDR Aqualite Divers Air Hose HAL0106, Maximum working pressure 500 PSI. nom. Burst pressure 2,000 PSI. Test Procedure: 600 PSIG hydrostatic pressure test concurrent with an axial tensile load of 200 LBS held for 10 minutes. USN | X |
| Gates Divers Air Hose type 33HB 3/8", Maximum working pressure 1,125 PSI. Test Procedure: 600 PSIG hydrostatic pressure test concurrent with an axial tensile load of 200 LBS held for 10 minute. USN | |
| Gates Divers Air Hose type 33HB 3/8", Maximum working pressure 1,125 PSI. Test Procedure: 600 PSIG air test only 5 minutes. COMMERCIAL | |
| Synflex Divers Air Hose type 34BA 3/8", Maximum working pressure 250 PSI. Test Procedure: 500 PSIG air test only for 5 minutes. COMMERCIAL | |
| Pneumo Hose 1/4", Maximum working pressure 250 PSI. Test Procedure: 200 PSIG hydrostatic pressure test for 10 minutes. USN | X |

USN requires both the Air hose and Pneumo hose to be tested.

| INSPECTION/TEST | ASSEMBLED/TESTED BY | DATE |
|---|---------------------|---------|
| Umbilical component assembly and inspection | [REDACTED] | 5-01-01 |
| Air Hose Hydrostatic/Pressure/Pull Test | | 5-01-01 |
| Electrical assembly, inspection and test | | 5-02-01 |
| Final umbilical inspection | | 5-7-01 |

File:new umbilical cert.doc

AMRON INTERNATIONAL DIVING SUPPLY, INC
759 W. 4th Ave. Escondido, CA 92025 Tel (760) 746-3834 Fax (760) 746-1508 www.amronintl.com

6,7c



AMRON UMBILICAL INSPECTION AND CERTIFICATION FORM

INVOICE DATE

| CUSTOMER # | WORK ORDER # | SALES ORDER # | INVOICE # | CUSTOMER P.O. |
|------------|--------------|---------------|-----------|---------------|
| Z36239 | 10882 | 0037185 | | Z448 |

| CUSTOMER INVOICE TO: | CUSTOMER SHIP TO: |
|--|--|
| DFAS - USCG GROUP MOBILE, AL COLUMBUS CENTER ATTN: DFAS-CO-SEPI P.O. BOX 182317 | USCGC HEALY WAGB 20 C/O USCG BASE SEATTLE 1519 ALASKAN WAY SOUTH SEATTLE, WA 98134-1192 |

| UMBILICAL PART NUMBER | SERIAL NUMBER |
|-----------------------|---------------|
| UMB-ADU1MK20-MM-262 | 15702-2F |

| UMBILICAL TYPE/TEST (Check off all tests which apply) | |
|---|---|
| JDR Aqualite Divers Air Hose HAL0106, Maximum working pressure 500 PSI. nom. Burst pressure 2,000 PSI. Test Procedure: 600 PSIG hydrostatic pressure test concurrent with an axial tensile load of 200.LBS held for 10 minutes. USN | X |
| Gates Divers Air Hose type 33HB 3/8", Maximum working pressure 1,125 PSI. Test Procedure: 600 PSIG hydrostatic pressure test concurrent with an axial tensile load of 200 LBS held for 10 minute. USN | |
| Gates Divers Air Hose type 33HB 3/8", Maximum working pressure 1,125 PSI. Test Procedure: 600 PSIG air test only 5 minutes. COMMERCIAL | |
| Synflex Divers Air Hose type 34BA 3/8", Maximum working pressure 250 PSI. Test Procedure: 500 PSIG air test only for 5 minutes. COMMERCIAL | |
| Pneumo Hose 1/4", Maximum working pressure 250 PSI. Test Procedure: 200 PSIG hydrostatic pressure test for 10 minutes. USN | X |

USN requires both the Air hose and Pneumo hose to be tested.

| INSPECTION/TEST | ASSEMBLED/TESTED BY | DATE |
|---|---------------------|----------|
| Umbilical component assembly and inspection | [REDACTED] | 04-26-01 |
| Air Hose Hydrostatic/Pressure/Pull Test | | 04-26-01 |
| Electrical assembly, inspection and test | | 5-02-01 |
| Final umbilical inspection | | 5-7-01 |

File:new umbilical cert.doc

C, TC

Gauge# 054471064

DEPTH GAUGE CALIBRATION/TEST SHEET

| DESCENT (according to gauge being tested) | ACTUAL (feet in seawater) | ASCENT |
|---|---------------------------------|------------|
| <u>10</u> | <u>10</u> | <u>10</u> |
| <u>20</u> | <u>20</u> | <u>20</u> |
| <u>30</u> | <u>30</u> | <u>30</u> |
| <u>40</u> | <u>40</u> | <u>40</u> |
| <u>49</u> | <u>50</u> | <u>50</u> |
| <u>60</u> | <u>60</u> | <u>60</u> |
| <u>70</u> | <u>70</u> | <u>70</u> |
| <u>80</u> | <u>80</u> | <u>80</u> |
| <u>90</u> | <u>90</u> | <u>90</u> |
| <u>100</u> | <u>100</u> | <u>102</u> |
| <u>110</u> | <u>110</u> | <u>111</u> |
| <u>121</u> | <u>120</u> | <u>120</u> |
| <u>134</u> | <u>130</u> | <u>132</u> |
| <u>142</u> | <u>140</u> | <u>142</u> |
| <u>150</u> | <u>150</u> | <u>150</u> |

Recommendations/Results:

Date: 2-18-01

Technician: [REDACTED]

ENCLOSURE(2) PAGE 36 OF 60 PAGES.

6,7c

Gauge # 65H471044

DEPTH GAUGE CALIBRATION/TEST SHEET

| DESCENT (according to gauge being tested) | ACTUAL (feet in seawater) | ASCENT |
|---|---------------------------------|--------|
| 6 | 10 | 8 |
| 20 | 20 | 21 |
| 30 | 30 | 30 |
| 40 | 40 | 40 |
| 50 | 50 | 50 |
| 60 | 60 | 60 |
| 70 | 70 | 70 |
| 80 | 80 | 80 |
| 90 | 90 | 90 |
| 101 | 100 | 101 |
| 111 | 110 | 111 |
| 121 | 120 | 122 |
| 132 | 130 | 132 |
| 144 | 140 | 142 |
| 150 | 150 | 150 |

Recommendations/Results:

Date: 2-18-01

Technician: [REDACTED]

ENCLOSURE (2) PAGE 3 OF 60 PAGES.

GTC

Gauge # AS1471061

DEPTH GAUGE CALIBRATION/TEST SHEET

| DESCENT (according to guage being tested) | ACTUAL (feet in seawater) | ASCENT |
|---|---------------------------------|------------|
| <u>5</u> | <u>10</u> | <u>5</u> |
| <u>10</u> | <u>20</u> | <u>16</u> |
| <u>20</u> | <u>30</u> | <u>25</u> |
| <u>30</u> | <u>40</u> | <u>36</u> |
| <u>35</u> | <u>50</u> | <u>45</u> |
| <u>50</u> | <u>60</u> | <u>56</u> |
| <u>60</u> | <u>70</u> | <u>69</u> |
| <u>70</u> | <u>80</u> | <u>78</u> |
| <u>77</u> | <u>90</u> | <u>89</u> |
| <u>92</u> | <u>100</u> | <u>100</u> |
| <u>102</u> | <u>110</u> | <u>110</u> |
| <u>111</u> | <u>120</u> | <u>120</u> |
| <u>121</u> | <u>130</u> | <u>130</u> |
| <u>132</u> | <u>140</u> | <u>140</u> |
| <u>140</u> | <u>150</u> | <u>140</u> |

Recommendations/Results: descent accuracy effected by max depth indicator arm (red arm). Ascent fairly accurate.

Date: 2-18-01

Technician: [REDACTED]

ENCLOSURE(2) PAGE 34 OF 60 PAGES.

6,7c

Gauge # 05147140

DEPTH GAUGE CALIBRATION/TEST SHEET

| DESCENT (according to guage being tested) | ACTUAL (feet in seawater) | ASCENT |
|---|---------------------------------|--------|
| 10 | 10 | 10 |
| 20 | 20 | 19 |
| 28 | 30 | 30 |
| 36 | 40 | 37 |
| 47 | 50 | 49 |
| 59 | 60 | 59 |
| 69 | 70 | 69 |
| 79 | 80 | 80 |
| 90 | 90 | 90 |
| 99 | 100 | 101 |
| 110 | 110 | 110 |
| 120 | 120 | 120 |
| 130 | 130 | 131 |
| 140 | 140 | 141 |
| 150 | 150 | 150 |

Recommendations/Results:

Date: 2-18-01

Technician: 

ENCLOSURE (w) PAGE 32 OF 60 PAGES.

G.T.C

Gauge # 05H471030

DEPTH GAUGE CALIBRATION/TEST SHEET

| DESCENT (according to gauge being tested) | ACTUAL (feet in seawater) | ASCENT |
|---|---------------------------------|-------------|
| <u>10</u> | <u>10</u> | <u>10</u> |
| <u>20</u> | <u>20</u> | <u>20</u> |
| <u>30</u> | <u>30</u> | <u>30</u> |
| <u>40</u> | <u>40</u> | <u>40</u> |
| <u>50</u> | <u>50</u> | <u>50</u> |
| <u>60</u> | <u>60</u> | <u>60</u> |
| <u>70</u> | <u>70</u> | <u>70</u> |
| <u>80</u> | <u>80</u> | <u>80</u> |
| <u>90</u> | <u>90</u> | <u>90</u> |
| <u>101</u> | <u>100</u> | <u>101</u> |
| <u>111</u> | <u>110</u> | <u>111</u> |
| <u>122</u> | <u>120</u> | <u>121</u> |
| <u>132</u> | <u>130</u> | <u>131</u> |
| <u>141</u> | <u>140</u> | <u>141</u> |
| <u>151</u> | <u>150</u> | <u> </u> |

Recommendations/Results:

Date: 2-18-01

Technician: [Signature]

ENCLOSURE (10) PAGE 40 OF 60 PAGES.

C, Tc

Gauge# 0511471075

DEPTH GAUGE CALIBRATION/TEST SHEET

| DESCENT (according to guage being tested) | ACTUAL (feet in seawater) | ASCENT |
|---|---------------------------------|--------|
| 5 | 10 | 5 |
| 15 | 20 | 15 |
| 26 | 30 | 26 |
| 35 | 40 | 33 |
| 45 | 50 | 49 |
| 56 | 60 | 56 |
| 68 | 70 | 69 |
| 77 | 80 | 80 |
| 89 | 90 | 90 |
| 99 | 100 | 100 |
| 109 | 110 | 110 |
| 120 | 120 | 120 |
| 130 | 130 | 130 |
| 140 | 140 | 140 |
| 150 | 150 | 150 |

Recommendations/Results:

Date: 2-18-01

Technician: [Redacted]

ENCLOSURE (12) PAGE 42 OF 80 PAGES.

617c

Gauge # 051147-048

DEPTH GAUGE CALIBRATION/TEST SHEET

| DESCENT (according to guage being tested) | ACTUAL (feet in seawater) | ASCENT |
|---|---------------------------------|------------|
| <u>10</u> | <u>10</u> | <u>8</u> |
| <u>15</u> | <u>20</u> | <u>16</u> |
| <u>25</u> | <u>30</u> | <u>25</u> |
| <u>35</u> | <u>40</u> | <u>36</u> |
| <u>45</u> | <u>50</u> | <u>47</u> |
| <u>55</u> | <u>60</u> | <u>60</u> |
| <u>67</u> | <u>70</u> | <u>70</u> |
| <u>78</u> | <u>80</u> | <u>80</u> |
| <u>89</u> | <u>90</u> | <u>90</u> |
| <u>99</u> | <u>100</u> | <u>100</u> |
| <u>109</u> | <u>110</u> | <u>110</u> |
| <u>120</u> | <u>120</u> | <u>121</u> |
| <u>130</u> | <u>130</u> | <u>130</u> |
| <u>140</u> | <u>140</u> | <u>140</u> |
| <u>150</u> | <u>150</u> | <u>150</u> |

Recommendations/Results:

Date: 2-18-01

Technician: [Redacted]

ENCLOSURE (12)

PAGE 47 OF 60 PAGES.

6,7c

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDUK

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make BAUER Model 2.5 1/4 BACK MOUNT 7500 PSI Serial Number 150-7500

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 3000 | 2970 | | | | |
| 7500 | 7450 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. [REDACTED]

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager [REDACTED]

6,7C

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDUC

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make BAUER Model 2.5 1/4 BACK MOUNT 1500 PS Serial Number 965-B

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 700 | 700 | | | | |
| 1500 | 1500 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. 

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager 

617c

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make BAUER Model 2.5 1/4 BACK MOUNT 1500 PSI Serial Number 965-A

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 700 | 700 | | | | |
| 1500 | 1500 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech.

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager

C.T.C.

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make BAUER Model 2.5 1/4 BACK MOUNT 200 PSI Serial Number 150-200

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 100 | 100 | | | | |
| 200 | 200 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. 

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager 

607c

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|--|---|--|---|--|---|

INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDUC

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make BAUER Model 2.5 1/4 BM 5000 PSI Serial Number 2-965

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 1000 | 1000 | | | | |
| 5000 | 5000 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. [Signature]

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager [Signature]

(28)
6,7c

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make BAUER Model 2.5 1/4 BM 5000 PSI Serial Number 1-965

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 1000 | 1000 | | | | |
| 5000 | 4950 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. [Redacted]

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager [Redacted]

Cert

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDUC

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make DACOR Model 2.5 1/4 BM 5000 PSI Serial Number 150965G

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 500 | 500 | | | | |
| 3000 | 3000 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F
LAB Humidity 42%
Recertification Due September 04, 2002

Tech. [Redacted]
Q.A. Manager [Redacted]

C. T. C.

Branom Instrument Co.

*Manufacturers' Representatives
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SINCE 1947*



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- For TIME
- FLOW
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- LEVEL
- PRESSURE
- CONTROL SYSTEMS

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|--|---|--|--|---|--|

INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDUC

Customer Name CGC HEALY Address 14 S MASSACHUSETS ST
150965 SEATTLE, WA 98146

Instrument Make DACOR Model 2.5 1/4 BM 5000 PSI Serial Number 150965F

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 500 | 500 | | | | |
| 3000 | 3000 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. [Redacted]

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager [Redacted]

(28)
6, TC

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- For TIME
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|--|--|--|---|--|--|

INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make DACOR Model 2.5 1/4 BM 5000 PSI Serial Number 150965E

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 500 | 500 | | | | |
| 3000 | 3000 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F Tech. [Redacted]
 LAB Humidity 42%
 Recertification Due September 04, 2002 Q.A. Manager [Redacted]

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make WIKA Model 2.5 1/4 BM 5000 PSI Serial Number 150-2

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 1000 | 1000 | | | | |
| 5000 | 4900 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F Tech. [Redacted]
LAB Humidity 42%
Recertification Due September 04, 2002 Q.A. Manager [Redacted]

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make WIKA Model 2.5 1/4 BM 300 PSI Serial Number 150-X

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 150 | 150 | | | | |
| 300 | 296 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F Tech. [Redacted]
LAB Humidity 42%
Recertification Due September 04, 2002 Q.A. Manager [Redacted]

18
6.7c

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make BAUER Model 2.5 1/4 BACK MOUNT 600 PSI Serial Number 150-600

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 300 | 305 | | | | |
| 600 | 610 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. [Redacted]

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager [Redacted]

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make DACOR Model 2.5 1/4 BM 5000 PSI Serial Number 150965D

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 500 | 500 | | | | |
| 3000 | 3000 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. [REDACTED]

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager [REDACTED]

6,7c

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make DACOR Model 2.5 1/4 BM 5000 PSI Serial Number 150965C

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 500 | 500 | | | | |
| 3000 | 3000 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. [Redacted]

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager [Redacted]

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INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDU

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make DACOR Model 2.5 1/4 BM 5000 PSI Serial Number 150965B

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 500 | 500 | | | | |
| 3000 | 3000 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F

Tech. [Redacted]

LAB Humidity 42%

Recertification Due September 04, 2002

Q.A. Manager [Redacted]

h.c.

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- LEVEL
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|--|---|--|---|--|---|

INSTRUMENT CERTIFICATION REPORT

Certification of Accuracy

This instrument has been calibrated to manufacturer's specifications and is traceable to NIST and in accordance with MIL STD 45622A, ISO9000, and ANSI/ASQC Q9002 procedures.

Date March 04, 2001

Purchase Order # 21-01-8516GDUC

Customer Name CGC HEALY Address 14 S MASSACHUSETTS ST
150965 SEATTLE, WA 98146

Instrument Make DACOR Model 2.5 1/4 BM 5000 PSI Serial Number 150965A

Calibration Standard DMR-100 Serial Number 9233

| Standard | Instrument | Standard | Instrument | Standard | Instrument |
|----------|------------|----------|------------|----------|------------|
| PSI | | | | | |
| 500 | 500 | | | | |
| 3000 | 3000 | | | | |
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Remarks: All tests have been performed in accordance with all applicable requirements of MIL-Q-9858A, MIL-Q-45208A and MIL-STD-45662A with test equipment certified to standards traceable to the National Institute of Standards and Technology. The tested instrument is certified to be accurate to manufacturers specifications.

Applicable NIST. No's: 822/260205-98, 822/25870397

Comments: _____

LAB Temperature 65°F Tech. [Redacted]

LAB Humidity 42%

Recertification Due September 04, 2002 Q.A. Manager [Redacted]

6.7c

