



Safety Alert

From the International Association of Drilling Contractors

ALERT 05 – 30

HIGH POTENTIAL INCIDENTS INVOLVING SINGLE JOINT / PICK UP ELEVATORS

WHAT HAPPENED:

Over the past few weeks we have experienced two separate incidents within our fleet that involved dropping joints of tubulars simply because the wrong size and type elevators were used. While neither of these incidents resulted in any form of injury the emerging trend is disturbing and requires immediate corrective action. The following represents a summary of the High Potential Near Miss incidents where we have dropped tubulars when using single joint / pick up elevators.

Incidents:

While picking up 3-1/2" (Hydril PH6) tubing and running in the hole with single joint elevators a joint came free and fell approximately 10 feet into the mousehole. The elevators remained closed with the pin secured. Closer investigation revealed that the elevators which were supplied by a third party on behalf of the customer were dressed with Blohm & Voss inserts and hard stamped 3-1/2" machined to order at 12 degrees. Following a measurement of the inside diameter of the elevators it was established that the actual ID was 4", almost 3/8" too large resulting in only minimal contact with the upset of the tubing.

In a separate incident while rigging up and running a 4-1/2" liner, the shoe joint was picked up vertically using pick up elevators and lowered through the rotary table. The joint was filled with mud and was in the process of being raised to check that the shoe was clear when the joint slipped through the elevators and dropped into the well. The shoe joint was the only joint with the collared VAM ace connection, the remaining liner was the Hydril 521 thread with a slick profile. Once again the handling tools were supplied by a third party on behalf of the client and in this case the pick up elevators supplied were 5". The pick up elevators were clearly stamped 5" and rated for 1000 pounds. In addition to the pick up elevators the third party had supplied two sets YC elevators rated at 75 tons. The rig actually performed an equipment inspection and noted that one of these sets was incorrectly dressed with a 4" die profile while the other was correctly dressed. The reason that the crew decided to handle the shoe joint using the pick up elevators while there was a correctly dressed set of side door elevators readily available is still under investigation.

WHAT CAUSED IT:

These two incidents highlight the need to implement a thorough risk assessment process for this type of activity which should include not just the inspection and tallying but the physical measuring of the dimensions of the handling equipment supplied. The stamping of equipment can no longer be taken as a guarantee that the material is that actual size.

CORRECTIVE ACTIONS: To address this incident, this company issued the following directives to rig personnel:

For the purpose of establishing that we have the correct tools for the job, the risk assessment also needs to clearly identify what type of elevators should be used for the activity? i.e. Do we use pick up elevators to run tools through the rotary table? What is the process for inspecting the equipment supplied? How are we checking this equipment? Who is responsible for the checking and when was this accomplished? Please discuss both these incidents onboard your rig. We were very fortunate in both incidents that nobody was injured. Review Company HSET Bulletin previously distributed on April 15, 2004 which reflects the ultimate penalty for not getting this right; a fatality. Please use this bulletin to reinforce the message to share and implement the lessons learned. If we don't get it right the first time, we may not always be lucky enough to have another chance.

The Corrective Actions stated in this alert are one company's attempts to address the incident, and do not necessarily reflect the position of IADC or the IADC HSE Committee.

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