



TEXAS DEPARTMENT OF LICENSING & REGULATION

Regulatory Program Management Division • PO Box 12157 • Austin, Texas 78711 • (512) 463-6599

www.tdlr.texas.gov

Boiler Equipment Report of Inspection

PURSUANT TO CHAPTER 755, HEALTH AND SAFETY CODE, 16 TX ADMINISTRATIVE CODE, CHAPTER 65, AND OCCUPATIONS CODE CHAPTER 51

TX# * TX190630	* <input type="checkbox"/> 1ST INSPECTION <input checked="" type="checkbox"/> SUBSEQUENT	<input type="checkbox"/> INTERNAL <input type="checkbox"/> NON-CERTIFICATE	<input checked="" type="checkbox"/> EXTERNAL	STATUS: * <input checked="" type="checkbox"/> ACTIVE <input type="checkbox"/> JUNKED	<input type="checkbox"/> DISCONNECTED IN PLACE <input type="checkbox"/> DISPOSITION UNKNOWN	<input type="checkbox"/> EXEMPT <input type="checkbox"/> NEW <input type="checkbox"/> 2ND HAND
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IDENTIFIED BY: * <input type="checkbox"/> DECAL <input checked="" type="checkbox"/> STAMP <input type="checkbox"/> TAG	VARIANCE: * <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	TEXAS SPECIAL: * <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
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PHYSICAL ADDRESS <small>(if the physical address has changed a first inspection is required)</small>	OWNER ADDRESS	MAILING ADDRESS
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NAME * Baytown Olefins Plant	NAME Baytown Olefins Plant	NAME Baytown Olefins Plant
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(Address 1) * 3525 Decker Dr	(Address 1) 3525 Decker Dr	(Address 1) 3525 Decker Dr
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(City, State, Zip) * Baytown, TX 77520-1646	(City, State, Zip) Baytown, TX 77520-1646	(City, State, Zip) Baytown, TX 77520-1646
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LOCATION PHONE:	OWNER PHONE: 346-254-0351	CONTACT NAME: Jacob Aguilar
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OBJECT LOCATION: * BOP-XCD-02	BUSINESS EMAIL: Jacob.A.Aguilar@ExxonMobil.com	CONTACT PHONE: 346-254-0351
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MANUFACTURER * Hahn & Clay	NAT'L BOARD # 162	SERIAL NUMBER 2267	MFGR MODEL #
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Boiler MAWP *	YEAR BUILT *	INTERVAL *	BLR TYPE *	BLR USE CLASS *	BLR USE *	HEATING SURFACE	CAP (GAL)	MIN SRV	MAX STEAM	ASME STAMP *
1762	1996	12	Process Steam Generator	Unfired Boiler	Steam Greater than 15 PSI	28890			129520-LB/HR	U

SAFETY RELIEF VALVE DATA			LOW WATER CUTOFF TYPE		FUEL *	BTU/HR INPUT
SET PRESSURE HIGHEST * 1700	TOTAL CAP. * 133400	# OF SAFETIES 2	<input type="checkbox"/> PROBE TYPE	<input type="checkbox"/> FLOAT & CHAMBER	Recovered Heat	BTU/HR OUTPUT
LOWEST * 1650	<input type="checkbox"/> BTU/HR	<input checked="" type="checkbox"/> #/HR	<input type="checkbox"/> FLOW SWITCH	<input checked="" type="checkbox"/> OTHER Transmitter		
EXPANSION TANK ASME * <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A			EXPANSION TANK MAWP	EXTERNAL PIPE ASME <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A		

EXTENSION INSPECTION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	EXTENSION APPROVAL DATE (IF APPLICABLE) 05/31/2024
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Comments: External inspection conducted; no adverse conditions noted. Object meets all external extension requirements set by TDLR.

ITEM # - LAW/RULE	VIOLATION (ATTACH ADDITIONAL PAGES IF NECESSARY)

I HEREBY CERTIFY THAT THIS IS A TRUE REPORT AS A RESULT OF MY INSPECTION.

 _____ SIGNATURE OF INSPECTOR Jose Berrones	1858 _____ TX COMMISSION #	ARISE Incorporated _____ INSPECTION ORG.
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_____ SIGNATURE OF INDIVIDUAL PRESENT AT INSPECTION * Jacob Aguilar	_____ DATE (MM/DD/YY) * 07/05/2024
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IS CONDITION OF OBJECT SUCH THAT A CERTIFICATE MAY BE ISSUED? * YES NO (IF NO, EXPLAIN FULLY UNDER VIOLATIONS)