



TEXAS DEPARTMENT OF LICENSING AND REGULATION

Licensing Division
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P.O. Box 12157 - Austin, Texas 78711 - 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

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|-------------------|---|---|--|---|--|--|
| TX# * TX116817 | * <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 |
|-------------------|---|---|--|---|--|--|

| | | |
|--|---|--|
| IDENTIFIED BY: * <input checked="" type="checkbox"/> DECAL <input type="checkbox"/> STAMP <input type="checkbox"/> TAG | VARIANCE: * <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | TEXAS SPECIAL: * <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |
|--|---|--|

| | | |
|---|---------------|-----------------|
| PHYSICAL ADDRESS <small>(if the physical address has changed a first inspection is required)</small> | OWNER ADDRESS | MAILING ADDRESS |
|---|---------------|-----------------|

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|---|--|---|
| NAME * Lyondell Chemicals (BCO) | NAME Lyondell Chemical Company | NAME LyondellBasell Chemicals (BCO) |
|---|--|---|

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|---|--|---|
| (Address 1) * 5761 Underwood Rd | (Address 1) 1221 McKinney St | (Address 1) 5761 Underwood Rd |
|---|--|---|

| | | |
|--|---|--|
| (City, State, Zip) * Pasadena, TX 77507-1031 | (City, State, Zip) Mansfield, TX 76063-5604 | (City, State, Zip) Pasadena, TX 77507-1031 |
|--|---|--|

| | | |
|-----------------|----------------------------------|------------------------------------|
| LOCATION PHONE: | OWNER PHONE: 713-309-2342 | CONTACT NAME: Michael Brock |
|-----------------|----------------------------------|------------------------------------|

| | | |
|---|---|--|
| OBJECT LOCATION: * 28-4103 - B Reactor Steam Drum | OWNER EMAIL: pameia.bokanson@lyondellbasell.com Nature of Business: Chemical | CONTACT PHONE: 281.474.0729 CONTACT EMAIL: Michael.Brock@lyondellbasell.com |
|---|---|--|

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|-------------------------------|--------------------------------|--------------------------------|--------------|
| MANUFACTURER * Kobe | NAT'L BOARD # 000032 | SERIAL NUMBER 805057 | MFGR MODEL # |
|-------------------------------|--------------------------------|--------------------------------|--------------|

| Boiler MAWP * | YEAR BUILT * | INTERVAL * | BLR TYPE * | BLR USE * | HEATING SURFACE | CAP (GAL) | MIN SRV | MAX STEAM | ASME STAMP * |
|---------------|--------------|------------|--------------------------------|----------------|-----------------|-----------|--------------|--------------|--------------|
| 950 | 1980 | 12 | Process Steam Generator | Process | 1500 | | LB/HR | LB/HR | U |

| | | | | | | | |
|--------------------------------------|---------------------------------|--|--------------------------------------|--|---|-----------------------|---------------|
| SAFETY RELIEF VALVE DATA | | | LOW WATER CUTOFF TYPE | | | FUEL * | BTU/HR INPUT |
| SET PRESSURE HIGHEST * 997 | TOTAL CAP. * 4891 | # OF SAFETIES 2 | <input type="checkbox"/> PROBE TYPE | <input type="checkbox"/> FLOAT & CHAMBER | <input checked="" type="checkbox"/> OTHER Pressure Differential | Recovered Heat | BTU/HR OUTPUT |
| LOWEST * 950 | <input type="checkbox"/> BTU/HR | <input checked="" type="checkbox"/> #/HR | <input type="checkbox"/> FLOW SWITCH | MAWP: 2000 | | | |

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

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|---|---|
| EXTENSION INSPECTION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | EXTENSION APPROVAL DATE (IF APPLICABLE) 06/11/2018 |
|---|---|

Comments: Boiler meets all requirements for the extension on the internal inspection as specified by Texas Health and Safety Code, Chapter 755.026 and 16 Administrative Code, Ch. 65.20(d) and 65.100(f). Issue new Certificate of Operation.

| ITEM # - LAW/RULE | VIOLATION (ATTACH ADDITIONAL PAGES IF NECESSARY) |
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I HEREBY CERTIFY THAT THIS IS A TRUE REPORT AS A RESULT OF MY INSPECTION.

Salvador Guzman
 SIGNATURE OF INSPECTOR
 Salvador Guzman

1852
 TX COMMISSION #

INSPECTION ORG.

Mr. Donnie Baker
 SIGNATURE OF INDIVIDUAL PRESENT AT INSPECTION *

07/05/2018
 DATE (MM/DD/YY) *

IS CONDITION OF OBJECT SUCH THAT A CERTIFICATE MAY BE ISSUED? * YES NO (IF NO, EXPLAIN FULLY UNDER VIOLATIONS)