McVAY DRILLING COMPANY

CONFINED SPACE ENTRY PERMIT

GENERAL INFORMATION

Space to be entered:

Purpose of Entry:

Location:

Effective Date: / /	
Commencing:	am/pm
Expiring:	am/pm

ITEMS TO BE COMPLETED PRIOR TO ENTRY	Yes	N/A
Ignition sources eliminated?		
All lines to/from confined space blinded, double blocked or removed?		
Electrical equipment locked out?		
Confined space emptied prior to entry?		
Adjacent areas pose no hazard (i.e. any gasses venting into the entry space)?		
Notified affected personnel of service interruption?		
Warning signs posted, to keep unauthorized people out of the space?		
Initial cleaning to be done from outside?		
Continuous ventilation required and equipment in place?		
Are you prepared to monitor the atmosphere continuously?		
O$_2$ 19.5% minimum to 23.5% Maximum		
LEL 10% Maximum		
H$_2$S 10 PPM Maximum		
Any other toxins? List and PEL here.		
Explosion proof or intrinsically safe equipment in use?		
Non-explosion proof or intrinsically equipment in safe location?		
Fire extinguisher & first aid kit present?		
SCBA open at entrance of confined space ready for rescue?		
Hot work permit required?		
Did you conduct a Pre-entry safety briefing?		
Rescue equipment and crew on standby/notified?		

INITIALS

PPE IN USE

EYES
- ☐ Safety Glasses
- ☐ Goggles
- ☐ Face Shield

EXTREMITIES
- ☐ Hard Hat
- ☐ Gloves
- ☐ Safety Boots
- ☐ Ear Plugs/muffs

BODY
- ☐ PVC suit
- ☐ Coveralls
- ☐ FR Clothing

RESPIRATOR
- ☐ Air Line unit w/Egress

RESCUE
- ☐ Safety Harness
- ☐ Lifeline

OTHER
- ☐
- ☐

Authorized Attendant(s):

Authorized Entrant(s):

Atmospheric Monitoring	TIME	OXYGEN %	L.E.L. %	TOXICS (H$_2$S)	INITIALS

Permit valid for 8 hours only.

Supervisor Signature_____