

EMPLOYEE BI-WEEKLY TIME SHEET - **WEEK 1**

EMP# **158821** EMPLOYEE NAME: **Gary Paul Anderson** Title: **SS III**  
 4/7/2010 TO 4/13/2010 PAY PLAN **14 x 14** Dept **1017310162**  
 (Circle One)  
 CREW CHG DAY **Wednesday** COORDINATOR **Danny Mooney**

DATE MM-DD-YY	RECEIVER COST CENTER	RECEIVER SALES ORDER	ITEM	MAINTENANCE OR INTERNAL ORDER Rig Name	ACT	ABSENCE/ ATTENDANCE	TOTAL HOURS
4/7/2010 Wednesday	1017310162	7274088		Nautilus		0618	13
4/8/2010 Thursday	1017310162	7274088		Nautilus		0618	13
4/9/2010 Friday	1017310162	7274088		Nautilus		0618	13
4/10/2010 Saturday	1017310162	7274088		Nautilus		0618	13
4/11/2010 Sunday	1017310162	CSC				0601	13
4/12/2010 Monday	1017310162	CSC				0601	13
4/13/2010 Tuesday	1017310162	CSC				0601	13
Total Hours for Week							91

EMPLOYEE SIGNATURE: Gary Paul Anderson DATE: 4/13/2010  
 SUPERVISOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I approve the time data reported on this document and authorize any payment generated due to hours reported.  
 I authorize deductions from my subsequent pay for any adjustment necessary due to the correction of this time data.

PAY CODES: (Absence/Attendance Column)  
 0601 Regular Work  
 0615 Offshore Time Worked  
 0654 Working Over  
 0121 Scheduled Off (7X7, 14X14)  
 0603 Travel  
 0606 Training  
 0304 Sick  
 0316 Jury Duty  
 0302 Vacation  
 0309 Death in Family  
 0311 Allege On Job Injury  
 0349 Hurricane Evacuation  
 0607 Hot Shot  
 0627 Paid not worked  
 NON-PAY CODES  
 0116 Involuntary Off  
 0118 Unavailable for Work  
 0103 Voluntary Off  
 0323 Scheduled Off  
 0618 VPO

revised 09/22/2009 by James D. Harwell

Print sheets  
1 and 2

Pay Period

4/7/2010  
through  
4/20/2010

2nd Week

Pay Codes	(Absence/Attendance Column)
0601 Regular Work	0316 Jury Duty
0615 Offshore Time Worked	0302 Vacation
0618 VPO	0309 Death in Fa
0654 Working Over	0311 Allege On
0121 Scheduled Off (7X7, 14X14)	0349 Hurricane E
0603 Travel	0607 Hot Shot
0606 Training	0627 Paid not wo
0304 Sick	

Code	Cost Center
1017310003	Houma Ser Center
1017310160	CMT SVC-Piece Equip
1017310161	CMT SVC-Fed Shelf
1017310162	CMT SVC-Fed DeepWater
1017210003	Lafayette Ser Center
1017210159	CMT SVC Inland Barge

Offshore	Land
Tom Broussard	Keith Savoie
Matt Dauzatt	Mike Watkins
Danny Mooney	Jay Beldon
Mike Stidham	Sid Servant
Cory Carrere	
Collis Odom	

Add or Remove names above:

5928  
 Exhibit No. \_\_\_\_\_  
 Worldwide Court  
 Reporters, Inc.



NON-PAY CODES

	0116	Involuntary Off
	0118	Unavailable for Work
Family	0103	Voluntary Off
Job Injury	0323	Scheduled Off
Evacuation		
Worked		

Employee Title

OA II
OA II
SO II
SO II
SS I
SS II
SS III
SL

Add if needed



EMPLOYEE BI-WEEKLY TIME SHEET - WEEK 2

revised 09/22/2009 by James D. Harwell

EMP# **158821** EMPLOYEE NAME **Gary Paul Anderson** Title: **SS III**  
 WEEK **4/14/2010 TO 4/20/2010** PAY PLAN **14 x 14** Dept **1017310162**  
 (Circle One)  
 NEW CHG DAY **Wednesday** COORDINATOR **Danny Mooney**

Pay Period

**4/7/2010**  
through  
**4/20/2010**

**1st Week**

DATE MM-DD-YY	RECEIVER		MAINTENANCE OR INTERNAL ORDER		ABSENCE/ ATTENDANCE	TOTAL HOURS
	COST CENTER	SALES ORDER	ITEM	Rig Name		
4/14/2010 Wednesday	1017310162	CSC			0601	13
4/15/2010 Thursday	1017310162	CSC			0601	13
4/16/2010 Friday	1017310162	7286889		Horizon	0618	19
4/17/2010 Saturday	1017310162	7286889		Horizon	0618	19
4/18/2010 Sunday	1017310162	7286889		Horizon	0618	19
4/19/2010 Monday	1017310162	7286889		Horizon	0618	19
4/20/2010 Tuesday	1017310162	7286889		Horizon	0618	19

Total Hours for Week **121**  
 Total Pay Period **212**

EMPLOYEE SIGNATURE: Gary Paul Anderson DATE: **4/20/2010**

SUPERVISOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Comments: \_\_\_\_\_

I approve the time data reported on this document and authorize any payment generated due to hours reported.

I authorize deductions from my subsequent pay for any adjustment necessary due to the correction of this time data.

PAY CODES: (Absence/Attendance Column)

0601 Regular Work  
 0615 Offshore Time Worked  
 0654 Working Over  
 0121 Scheduled Off (7X7,14X14)  
 0603 Travel  
 0606 Training  
 0304 Sick  
 0316 Jury Duty  
 0302 Vacation  
 0309 Death in Family  
 0311 Allege On Job Injury  
 0349 Hurricane Evacuation  
 0607 Hot Shot  
 0627 Paid not worked

NON-PAY CODES

0116 Involuntary Off  
 0118 Unavailable for Work  
 0103 Voluntary Off

Pay Codes (Absence/Attendance Column)

0601	Regular Work	0316	Jury Duty
0615	Offshore Time Worked	0302	Vacation
0618	VPO	0309	Death in Fa
0654	Working Over	0311	Allege On
0121	Scheduled Off (7X7, 14X14)	0349	Hurricane E
0603	Travel	0607	Hot Shot
0606	Training	0627	Paid not wo
0304	Sick	0	0

Code

Cost Center

1017310003	Houma Ser Center
1017310160	CMT SVC-Piece Equip
1017310161	CMT SVC-Fed Shelf
1017310162	CMT SVC-Fed DeepWater
1017210003	Lafayette Ser Center
1017210159	CMT SVC Inland Barge
0	0



NON-PAY CODES

	0116	Involuntary Off
	0118	Unavailable for Work
Family	0103	Voluntary Off
Job Injury	0323	Scheduled Off
Evacuation	0	0
	0	0
orked	0	0
	0	0







# GOM CEMENTERS Time Sheet

EMP# **158729** EMPLOYEE NAME: **Vincent Tabler** Title: **SS III**  
 WEEK **9/8/2010 TO 9/14/2010** PAY PLAN **14 x 14** Dept **1017310162**  
 CREW CHG DAY **Wednesday** COORDINATOR **Danny Mooney**

DATE	RECEIVER	RECEIVER	SALES ORDER	ITEM	MAINTENANCE OR INTERNAL ORDER	ACT	ABSENCE/ ATTENDANCE	TOTAL HOURS
9/8/2010 Wednesday	1017310162	7604932			DD-3		0618	13
9/9/2010 Thursday	1017310162	7604932					0618	15
9/10/2010 Friday	1017310162	7604932					0618	13
9/11/2010 Saturday	1017310162	7604932					0618	16
9/12/2010 Sunday	1017310162	7604932					0618	17
9/13/2010 Monday	1017310162	7604932					0618	13
9/14/2010 Tuesday	1017310162	7604932					0618	13
Total Hours for Week								100

Note: Time Sheet to be submitted before 2pm on Payroll Day

EMPLOYEE SIGNATURE: *Vincent Tabler* DATE: **7/14/2010**  
 I authorize deductions from my subsequent pay for any adjustment necessary due to the correction of this time data.

SUPERVISOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_  
 I approve the time data reported on this document and authorize any payment generated due to hours reported.

Comments:

revised 07/07/2010 by James D. Harwell

Pay Period

**9/8/2010**  
**9/21/2010**

Pay Codes			(Absence/Attendance Column)			NON-PAY CODES		
Code	Description	Code	Description	Code	Description	Code	Description	Code
0601	Regular Work	0316	Jury Duty	0116	Involuntary Off			
0615	Offshore Time Worked	0302	Vacation	0118	Unavailable for Work			
0618	VPO	0309	Death in Family	0103	Voluntary Off			
0654	Working Over	0364	Allege On Job Injury	0121	Scheduled Off (7X7, 14			
0603	Travel	0349	Hurricane Evacuation					
0606	Training	0607	Hot Shot					
0361	Sick	0627	Co Appv Community S					

Employee Title

Code	Cost Center	Employee Title
1017310003	Houma Ser Center	OA I
1017310160	CMT SVC-Piece Equip	OA II
1017310161	CMT SVC-Fed Shelf	SO I
1017310162	CMT SVC-Fed DeepWater	SO II
1017270300	Lafayette Ser Center	SS I
1017210159	CMT SVC Inland Barge	SS II
1017210003	Lafayette Trucks	SS III

Coordinators

Offshore	Land
Glenn Thibodeaux	Keith Saviole
Matt Dauzat	Mike Watkins
Danny Mooney	Jay Beldon
Mike Stidham	Sid Servant
Cory Carriere	
Foster Foran	
Add or Remove names as needed.	

Add Title if needed



PAY CODES: (Absence/Attendance Column)

0601 Regular Work  
0615 Offshore Time Worked  
0618 VPO  
0654 Working Over  
0603 Travel  
0606 Training  
0361 Sick  
0316 Jury Duty  
0302 Vacation  
0309 Death in Family  
0364 Allege On Job Injury  
0349 Hurricane Evacuation  
0607 Hot Shot  
0627 Co Apprv Community Srv

NON-PAY CODES

0116 Involuntary Off  
0118 Unavailable for Work  
0103 Voluntary Off  
0121 Scheduled Off  
(7X7, 14x14)

0601 Regular Work	0601 Regular Work
0615 Offshore Time Worked	0615 Offshore Time Worked
0618 VPO	0618 VPO
0654 Working Over	0654 Working Over
0603 Travel	0603 Travel
0606 Training	0606 Training
0361 Sick	0361 Sick
0316 Jury Duty	0316 Jury Duty
0302 Vacation	0302 Vacation
0309 Death in Family	0309 Death in Family
0364 Allege On Job Injury	0364 Allege On Job Injury
0349 Hurricane Evacuation	0349 Hurricane Evacuation
0607 Hot Shot	0607 Hot Shot
0627 Co Apprv Community Srv	0627 Co Apprv Community Srv
0116 Involuntary Off	0116 Involuntary Off
0118 Unavailable for Work	0118 Unavailable for Work
0103 Voluntary Off	0103 Voluntary Off
0121 Scheduled Off (7X7, 14x14)	0121 Scheduled Off (7X7, 14x14)



### GOM CEMENTERS Safety Participation

EMP# 158729 EMPLOYEE NAME: Vincent Tabler Title: SS III

WEEK 9/8/2010 TO 9/14/2010 PAY PLAN 14 x 14 Dept 1017310162

CREW CHG DAY Wednesday COORDINATOR Danny Mooney

Enter the quantity in the box corresponding to the program and the date of participation.

Safety track required for each week worked.

Program Participation	9/8/2010 Wednesday	9/9/2010 Thursday	9/10/2010 Friday	9/11/2010 Saturday	9/12/2010 Sunday	9/13/2010 Monday	9/14/2010 Tuesday
BBP							
JSA (1 per Task)							
HOC							
CPI- Prevention & Improvement							
Safety Huddle (documented)							
Near Miss							
Tap root investigation							
STOP							
Stop Work Authority							
Risk Analysis							
Smith Driving							

#### Operational Excellence Rules:

- Know what is expected of you.
- Understand the customer's expectations.
- Understand the job, the procedures and objectives.
- Make sure you have the tools you need.
- Check your equipment and make sure you are confident they will work as expected.
- Address any and all risks for the job.
- Know when and who to call for help, and have their contact information ready and available.

#### Safety Participation Required:



## GOM CEMENTERS Time Sheet

EMP# **158729** EMPLOYEE NAME: **Vincent Tabler** Title: **SS III**  
WEEK 9/15/2010 TO 9/21/2010 PAY PLAN 14 x 14 Dept 1017310162  
CREW CHG DAY **Wednesday** COORDINATOR **Danny Mooney**

DATE MM-DD-YY	RECEIVER		RECEIVER SALES ORDER	ITEM	MAINTENANCE OR INTERNAL ORDER		ABSENCE/ ATTENDANCE	TOTAL HOURS
	COST CENTER	Rig Name			DD-3	ACT		
9/15/2010 Wednesday	1017310162	DD-3	7604932				0618	13
9/16/2010 Thursday	1017310162						0121	0
9/17/2010 Friday	1017310162						0121	0
9/18/2010 Saturday	1017310162						0121	0
9/19/2010 Sunday	1017310162						0121	0
9/20/2010 Monday	1017310162						0121	0
9/21/2010 Tuesday	1017310162						0618	0

Note: Time Sheet to be submitted before 3pm on Payroll Day

Total Hours for Week

13

Total Pay Period

113

EMPLOYEE SIGNATURE *Vincent Tabler* DATE: 9/21/2010

I authorize deductions from my subsequent pay for any adjustment necessary due to the correction of this time data.

SUPERVISOR SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

I approve the time data reported on this document and authorize any payment generated due to hours reported.

Comments: \_\_\_\_\_

revised 07/07/2010 by James D. Harwell

Pay Period

9/15/2010

9/28/2010

Pay Codes			(Absence/Attendance Column)			NON-PAY CODES		
Code	Description		Code	Description		Code	Description	
0601	Regular Work		0316	Jury Duty		0116	Involuntary Off	
0615	Offshore Time Worked		0302	Vacation		0118	Unavailable for Work	
0618	VPO		0309	Death in Family		0103	Voluntary Off	
0654	Working Over		0364	Allege On Job Injury		0121	Scheduled Off (7X7, 1	
0603	Travel		0349	Hurricane Evacuation				
0606	Training		0607	Hot Shot				
0361	Sick		0627	Co Apprv Community				

## Cost Center

Code	Cost Center
1017310003	Houma Ser Center
1017310160	CMT SVC-Piece Equip
1017310161	CMT SVC-Fed Shelf
1017310162	CMT SVC-Fed DeepWater
1017270300	Lafayette Ser Center
1017210159	CMT SVC Inland Barge
1017210003	Lafayette Trucks







# GOM CEMENTERS Safety Participation

EMP#	158729	EMPLOYEE NAME:	Vincent Tabler	Title:	SS III
WEEK	9/15/2010 TO 9/21/2010	PAY PLAN	14 x 14	Dept	1017310162
CREW CHG DAY	Wednesday	COORDINATOR	Danny Mooney		

Enter the quantity in the box corresponding to the program and the date of participation.

Safety track required for each week worked.

Program Participation	9/15/2010 Wednesday	9/16/2010 Thursday	9/17/2010 Friday	9/18/2010 Saturday	9/19/2010 Sunday	9/20/2010 Monday	9/21/2010 Tuesday
BBP							
JSA (1 per Task)							
HOC							
CPI- Prevention & Improvement							
Safety Huddle (documented)							
Near Miss							
Tap root investigation							
STOP							
Stop Work Authority							
Risk Analysis							
Smith Driving							

## Operational Excellence Rules:

- Know what is expected of you.
- Understand the customer's expectations.
- Understand the job, the procedures and objectives.
- Make sure you have the tools you need.
- Check your equipment and make sure you are confident they will work as expected.
- Address any and all risks for the job.
- Know when and who to call for help, and have their contact information ready and available.

## Safety Participation Required:







revised 12/10/2009 by James D. Harwell

## Week 1

EMP#

**158729**

**158729**      **EMPLOYEE NAME:**

## Vincent Tabler

**Title:**

III  
S  
S

WEEK

/20/2010 TO 3/26/2010

14 x 14

Dept

017310162

CREW CHG DAY

Wednesday

**COORDINATOR**

**Danny Mooney**

Print sheet  
1 and 2

Pay Period

3/20/2010  
through  
4/2/2010

2nd Week

[illegible]

Total Hours for Week

EMPLOYEE SIGNATURE:

Vincent Tabler

DATE:

3/26/2010

**SUPERVISOR SIGNATURE:**

DATE:

**Comments:**

I approve the time data reported on this document and authorize any payment generated due to hours reported. I authorize deductions from my subsequent pay for any adjustment necessary due to the correction of this time card.

**PAY CODES:** (Absence/Attendance Column)

0601	Regular Work	0316	June Duty	0116	Involuntary Off
0615	Offshore Time	0302	Vacation	0118	Unavailable for Work
0618	VPO	0309	Death in Family	0103	Voluntary Off
0654	Working Over	0311	Allege On Job Injury	0323	Scheduled Off
0121	Scheduled Off (7X7,14X14)	0349	Hurricane Evacuation		
0603	Travel	0607	Hot Shot		

[illegible]



0606 Training  
0304 Sick

Activity	Activity Code	Activity Name	Activity Description	Activity Date	Activity Time	Activity Status
Regular Work	0015	Regular Work	Regular Work	07/17/2011	07:00 - 17:00	Completed
Vacation	0016	Vacation	Vacation	07/18/2011	07:00 - 17:00	Completed
Working Day	0017	Working Day	Working Day	07/19/2011	07:00 - 17:00	Completed
Scheduled Off	0018	Scheduled Off	Scheduled Off	07/20/2011	07:00 - 17:00	Completed
Travel	0019	Travel	Travel	07/21/2011	07:00 - 17:00	Completed
Training	0020	Training	Training	07/22/2011	07:00 - 17:00	Completed
Sick	0021	Sick	Sick	07/23/2011	07:00 - 17:00	Completed
Day Off	0022	Day Off	Day Off	07/24/2011	07:00 - 17:00	Completed
Vacation	0023	Vacation	Vacation	07/25/2011	07:00 - 17:00	Completed
Working Day	0024	Working Day	Working Day	07/26/2011	07:00 - 17:00	Completed
Scheduled Off	0025	Scheduled Off	Scheduled Off	07/27/2011	07:00 - 17:00	Completed
Travel	0026	Travel	Travel	07/28/2011	07:00 - 17:00	Completed
Training	0027	Training	Training	07/29/2011	07:00 - 17:00	Completed
Sick	0028	Sick	Sick	07/30/2011	07:00 - 17:00	Completed
Day Off	0029	Day Off	Day Off	07/31/2011	07:00 - 17:00	Completed
Vacation	0030	Vacation	Vacation	08/01/2011	07:00 - 17:00	Completed
Working Day	0031	Working Day	Working Day	08/02/2011	07:00 - 17:00	Completed
Scheduled Off	0032	Scheduled Off	Scheduled Off	08/03/2011	07:00 - 17:00	Completed
Travel	0033	Travel	Travel	08/04/2011	07:00 - 17:00	Completed
Training	0034	Training	Training	08/05/2011	07:00 - 17:00	Completed
Sick	0035	Sick	Sick	08/06/2011	07:00 - 17:00	Completed
Day Off	0036	Day Off	Day Off	08/07/2011	07:00 - 17:00	Completed
Vacation	0037	Vacation	Vacation	08/08/2011	07:00 - 17:00	Completed
Working Day	0038	Working Day	Working Day	08/09/2011	07:00 - 17:00	Completed
Scheduled Off	0039	Scheduled Off	Scheduled Off	08/10/2011	07:00 - 17:00	Completed
Travel	0040	Travel	Travel	08/11/2011	07:00 - 17:00	Completed
Training	0041	Training	Training	08/12/2011	07:00 - 17:00	Completed
Sick	0042	Sick	Sick	08/13/2011	07:00 - 17:00	Completed
Day Off	0043	Day Off	Day Off	08/14/2011	07:00 - 17:00	Completed
Vacation	0044	Vacation	Vacation	08/15/2011	07:00 - 17:00	Completed
Working Day	0045	Working Day	Working Day	08/16/2011	07:00 - 17:00	Completed
Scheduled Off	0046	Scheduled Off	Scheduled Off	08/17/2011	07:00 - 17:00	Completed
Travel	0047	Travel	Travel	08/18/2011	07:00 - 17:00	Completed
Training	0048	Training	Training	08/19/2011	07:00 - 17:00	Completed
Sick	0049	Sick	Sick	08/20/2011	07:00 - 17:00	Completed
Day Off	0050	Day Off	Day Off	08/21/2011	07:00 - 17:00	Completed
Vacation	0051	Vacation	Vacation	08/22/2011	07:00 - 17:00	Completed
Working Day	0052	Working Day	Working Day	08/23/2011	07:00 - 17:00	Completed
Scheduled Off	0053	Scheduled Off	Scheduled Off	08/24/2011	07:00 - 17:00	Completed
Travel	0054	Travel	Travel	08/25/2011	07:00 - 17:00	Completed
Training	0055	Training	Training	08/26/2011	07:00 - 17:00	Completed
Sick	0056	Sick	Sick	08/27/2011	07:00 - 17:00	Completed
Day Off	0057	Day Off	Day Off	08/28/2011	07:00 - 17:00	Completed
Vacation	0058	Vacation	Vacation	08/29/2011	07:00 - 17:00	Completed
Working Day	0059	Working Day	Working Day	08/30/2011	07:00 - 17:00	Completed
Scheduled Off	0060	Scheduled Off	Scheduled Off	08/31/2011	07:00 - 17:00	Completed
Travel	0061	Travel	Travel	09/01/2011	07:00 - 17:00	Completed
Training	0062	Training	Training	09/02/2011	07:00 - 17:00	Completed
Sick	0063	Sick	Sick	09/03/2011	07:00 - 17:00	Completed
Day Off	0064	Day Off	Day Off	09/04/2011	07:00 - 1	

Year	1990	1991	1992
1990	1.1	1.2	1.3
1991	1.2	1.3	1.4
1992	1.3	1.4	1.5
1993	1.4	1.5	1.6

Sunday

Wednesday  
Thursday  
Friday  
Saturday

187



EMP# 158729 EMPLOYEE NAME Vincent Tabler Title: SS III  
WEEK 3/27/2010 TO 4/2/2010 PAY PLAN 14 x 14 Dept 1017310162  
CREW CHG DAY Tuesday COORDINATOR Danny Mooney

revised 12/10/2009 by James D. Harwell

Week 2

Pay Period

3/20/2010 through 4/2/2010

1st Week

DATE MM-DD-YY	RECEIVER COST CENTER	RECEIVER SALES ORDER	ITEM	MAINTENANCE OR INTERNAL ORDER Rig Name	ACT	ABSENCE/ ATTENDANCE	TOTAL HOURS
3/27/2010 Tuesday	1017310162	7286889				0618	13
3/28/2010 Wednesday						0121	0
3/29/2010 Thursday						0121	0
3/30/2010 Friday						0121	0
3/31/2010 Saturday						0121	0
4/1/2010 Sunday						0121	0
4/2/2010 Monday						0121	0
Total Hours for Week							13
Total Pay Period							104

EMPLOYEE SIGNATURE: Vincent Tabler DATE: 4/2/2010

SUPERVISOR SIGNATURE: DATE:

Comments:

I approve the time data reported on this document and authorize any payment generated due to hours reported.  
I authorize deductions from my subsequent pay for any adjustment necessary due to the correction of this time data.

PAY CODES: (Absence/Attendance Column) 0316 Jury Duty 0302 Vacation 0309 Death in Family 0311 Allege On Job Injury 0121 Scheduled Off (7X7 14X14) 0349 Hurricane Evacuation 0603 Travel

NON-PAY CODES 0116 Involuntary Off 0118 Unavailable for Work 0103 Voluntary Off

Pay Codes	(Absence/Attendance Column)	Jury Duty	NON-PAY CODES
0601 Regular Work	0316	0302	0116 Involuntary Off
0615 Offshore Time Worked	0302	0309	0118 Unavailable for Work
0618 VPO	0309	0311	0103 Voluntary Off
0654 Working Over	0311	0349	0323 Scheduled Off
0121 Scheduled Off (7X7, 14X14)	0349	0607	
0603 Travel	0607	0627	
0606 Training	0627		
0304 Sick			

Code	Cost Center
1017310003	Houma Ser Center
1017310160	CMT SVC-Piece Equip
1017310161	CMT SVC-Fed Shelf
1017310162	CMT SVC-Fed DeepWater
1017210003	Lafayette Ser Center
1017210159	CMT SVC Inland Barge
0	0











# GOM CEMENTERS Time Sheet

EMP# **229787** EMPLOYEE NAME: **Jason Fleming** Title: **SS III**  
 WEEK **7/28/2010** TO **8/3/2010** PAY PLAN **14 x 14** Dept **1017310162**  
 CREW CHG DAY **Wednesday** COORDINATOR **Danny Mooney**

DATE MM-DD-YY	RECEIVER	RECEIVER		MAINTENANCE OR INTERNAL ORDER		ABSENCE/ ATTENDANCE	TOTAL HOURS
	COST CENTER	SALES ORDER	ITEM	Rig Name	ACT		
7/28/2010 Wednesday	1017310162	7509092		DD III		0618	16
7/29/2010 Thursday	1017310162	7509092		DD III		0618	13
7/30/2010 Friday	1017310162	7509092		DD III		0618	13
7/31/2010 Saturday	1017310162	7509092		DD III		0618	13
8/1/2010 Sunday	1017310162	7509092		DD III		0618	17
8/2/2010 Monday	1017310162	7509092		DD III		0618	13
8/3/2010 Tuesday	1017310162	7509092		DD III		0618	18
Note: Time Sheet to be submitted before 2pm on Payroll Day							Total Hours for Week <b>103</b>

EMPLOYEE SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SUPERVISOR SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Comments: \_\_\_\_\_

**PAY CODES:** (Absence/Attendance Column)

0601 Regular Work	0316 Jury Duty
0615 Offshore Time Worked	0302 Vacation
0618 VPO	0309 Death in Family
0654 Working Over	0364 Allege On Job Injury
0603 Travel	0349 Hurricane Evacuation
0606 Training	0607 Hot Shot
0361 Sick	0627 Co Apprv Community Srv

**NON-PAY CODES**

0116 Involuntary Off  
 0118 Unavailable for Work  
 0103 Voluntary Off  
 0121 Scheduled Off  
 (7X7, 14x14)

Cementers 07/07/2010

Enterer: \_\_\_\_\_ Approver: \_\_\_\_\_

Confidential

HAL\_0710526



### GOM CEMENTERS Safety Participation

EMP# 229787 EMPLOYEE NAME: Jason Fleming Title: SS III  
WEEK 7/28/2010 TO 8/3/2010 PAY PLAN 14 x 14 Dept 1017310162  
CREW CHG DAY Wednesday COORDINATOR Danny Mooney

Enter the quantity in the box corresponding to the program and the date of participation.

Safety track required for each week worked.

Program Participation	7/28/2010	7/29/2010	7/30/2010	7/31/2010	8/1/2010	8/2/2010	8/3/2010
	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday
BBP					2		
JSA (1 per Task)	2	1	1		1	1	
HOC							
CPI- Prevention & Improvement							
Safety Huddle (documented)			1		1	1	
Near Miss							
Tap root investigation							
STOP							
Stop Work Authority							
Risk Analysis							
Smith Driving							
Written Tink Plan	2	1	1		1	1	
Transocean Pressure Policy			1		1	1	

#### Operational Excellence Rules:

- Know what is expected of you.
- Understand the customer's expectations.
- Understand the job, the procedures and objectives.
- Make sure you have the tools you need.
- Check your equipment and make sure you are confident they will work as expected.
- Address any and all risks for the job.
- Know when and who to call for help, and have their contact information ready and available.

#### Safety Participation Required:



# GOM CEMENTERS Time Sheet

EMP# 229787 EMPLOYEE NAME: Jason Fleming Title: SS III  
 WEEK 8/4/2010 TO 8/10/2010 PAY PLAN 14 x 14 Dept 1017310162  
 CREW CHG DAY Wednesday COORDINATOR Danny Mooney

DATE MM-DD-YY	RECEIVER	RECEIVER		MAINTENANCE OR INTERNAL ORDER		ABSENCE/ ATTENDANCE	TOTAL HOURS
	COST CENTER	SALES ORDER	ITEM	Rig Name	ACT		
8/4/2010	1017310162			Crew Change		0615	13
Wednesday							
8/5/2010	1017310162					0121	0
Thursday							
8/6/2010	1017310162					0121	0
Friday							
8/7/2010	1017310162					0121	0
Saturday							
8/8/2010	1017310162					0121	0
Sunday							
8/9/2010	1017310162					0121	0
Monday							
8/10/2010	1017310162					0121	0
Tuesday							

Note: Time Sheet to be submitted before 2pm on Payroll Day

Total Hours for Week **13**

Total Pay Period **116**

EMPLOYEE SIGNATURE: \_\_\_\_\_

DATE: 8/10/2010

SUPERVISOR SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Comments: \_\_\_\_\_

**PAY CODES:** (Absence/Attendance Column)

0601 Regular Work	0316 Jury Duty
0615 Offshore Time Worked	0302 Vacation
0618 VPO	0309 Death in Family
0654 Working Over	0364 Allege On Job Injury
0603 Travel	0349 Hurricane Evacuation
0606 Training	0607 Hot Shot
0361 Sick	0627 Co Apprv Community Srv

**NON-PAY CODES**

0116 Involuntary Off  
 0118 Unavailable for Work  
 0103 Voluntary Off  
 0121 Scheduled Off  
 (7X7, 14x14)



### GOM CEMENTERS Safety Participation

EMP# 229787 EMPLOYEE NAME: Jason Fleming Title: SS III  
WEEK 8/4/2010 TO 8/10/2010 PAY PLAN 14 x 14 Dept 1017310162  
CREW CHG DAY Wednesday COORDINATOR Danny Mooney

Enter the quantity in the box corresponding to the program and the date of participation.

Safety track required for each week worked.

Program Participation	8/4/2010	8/5/2010	8/6/2010	8/7/2010	8/8/2010	8/9/2010	8/10/2010
	Wednesday	Thursday	Friday	Saturday	Sunday	Monday	Tuesday
BBP							
JSA (1 per Task)							
HOC							
CPI- Prevention & Improvement							
Safety Huddle (documented)							
Near Miss							
Tap root investigation							
STOP							
Stop Work Authority							
Risk Analysis							
Smith Driving	1						
Transocean Task Specific							
Transocean Safety Meeting							

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- Address any and all risks for the job.
- Know when and who to call for help, and have their contact information ready and available.

#### Safety Participation Required: