

# WWT INTERNATIONAL

## Non-Rotating Protectors: Input Questionnaire for Analysis

Please fill out as much as possible and send to: [sales@bwdrillingtools.com](mailto:sales@bwdrillingtools.com)



General Information:			
Company:		Date:	
Field:		Well Name:	
Rig:		Location:	
Dock:		Dock Tel:	
Rig Contact Information:		Engineering Contact Information:	
Name:		Name:	
Phone:		Phone:	
Email:		Email:	

Concerns:			
<input type="checkbox"/> Casing Wear	<input type="checkbox"/> Torque	<input type="checkbox"/> Drag	<input type="checkbox"/> Riser Wear
<input type="checkbox"/> Heat Checking	<input type="checkbox"/> Buckling	<input type="checkbox"/> Vibration	<input type="checkbox"/> Drill Pipe Wear
<input type="checkbox"/> Differential Sticking	<input type="checkbox"/> Other:		

Parameters:			
Friction Factor Cased Hole:		Current Depth:	
Friction Factor Open Hole:		Water Depth:	
Hole Size/Bit Diameter:		Average Bit Run length:	
Proposed Well TD (MD):		Bit Type:	
Average ROP:		Bit Torque:	
String RPM:		Current Torque:	
Average WOB:		Torque Limit:	
Sliding WOB:		Surface Flowline Temp:	
Travelling Block Weight:		Bottomhole Temp:	
Mud Weight:		Rotating Head / MPD:	Select ▼
Mud Type:		Rotating Head Pressure:	
PV:		Sidetrack:	Select ▼
Flowrate:		Sidetrack MD:	

Please Provide:			
<input type="checkbox"/>	Planned and/or As Drilled Surveys	<input type="checkbox"/>	Well Schematic or Casing Information
<input type="checkbox"/>	BHA and Drillstring Information	<input type="checkbox"/>	Subsea BOP Schematic

Additional Remarks/Comments:

Revised June 2023