Anderson Drilling

# SAFE PLAN OF ACTION

PROJECT NO. _____

Job/Task _____ Work Area _____ Date _____

| Steps of Task | Hazard/Reaction to Failure | Safe Plan | Resources |
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TEAM MEMBERS' SIGNATURES

_____ _____ _____ _____

_____ _____ _____ _____

_____ _____ _____ _____

The signature of the supervisor confirms the completion of the hazard assessment and Safe Plan of Action by the crew.

Supervisors Signature: _____ Date: _____

Instructions: 1. Write name of the job or task in the space provided. 2. Conduct a walk-through survey of work area. 3. Write the steps of the task in a safe sequence. 4. List all possible hazards involved in each step and reaction to failure. 5. In the Safe Plan column, state the actions that will be taken to prevent the hazards and injury from reaction to failure. 6. In the Resources column, list safety equipment and tools, etc. needed to do the job. 8. Ask each team member, who helped develop and will use this SPA, to sign in the spaces provided. 9. Review the SPA at the end of the task for improvements.

Note: Work shall stop when conditions change, the job changes, or a deficiency in the plan is discovered, and the current SPA will be modified or a new SPA created.