

DATE   
 QUOTE #   
 ORDER #

CUSTOMER INFORMATION	
Name:	
Title:	
Company:	
Address:	
Phone:	FAX:
E-mail:	

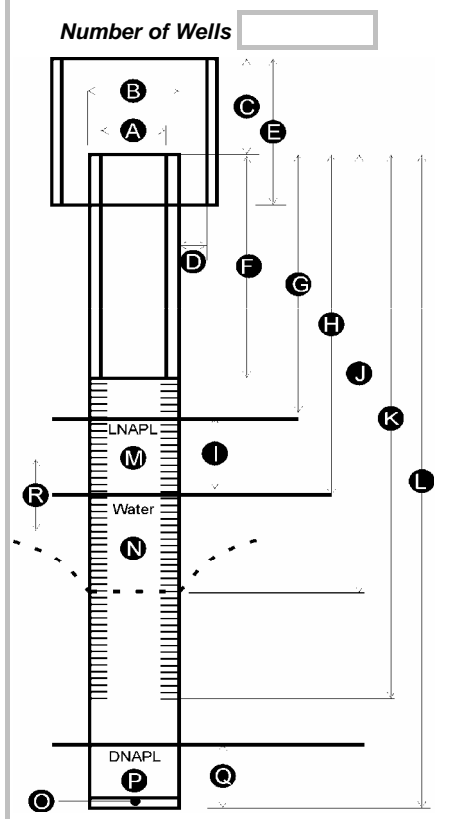
SITE INFORMATION	
Site Name:	
Type of Site	<input type="checkbox"/> Refinery <input type="checkbox"/> Petrochemical <input type="checkbox"/> Terminal <input type="checkbox"/> Retail <input type="checkbox"/> Other:
Project Ref.:	
Company:	
Address:	
Phone	FAX:

SENSORS REQUIRED	
<input type="checkbox"/> Tank-Full Shut-Off	<input type="checkbox"/> O/W Separator Level Sensor
<input type="checkbox"/> High-Water Shut-Off	<input type="checkbox"/> Water Tank Level Sensor

FLUID EXTRACTION METHOD	
<input type="checkbox"/> Total Fluids	<input type="checkbox"/> Dual Pump
<input type="checkbox"/> Dissolved or DNAPL	<input type="checkbox"/> Product (LNAPL) Only

PRODUCT INFORMATION						
Product Name or CAS Number	Concentration	Kinematic Viscosity	Specific Gravity	LNAPL	DNAPL	Dissolved
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### WELL DATA



WELL ID NUMBER			
A . Well casing ID (mm)			
A1. Well casing ID at location of equipment (mm)			
B. Well Casing OD (mm)			
Casing Material and Schedule			
C. Well casing to top outer/vault casing (mm)			
D. Outer casing/vault to well casing (mm)			
E. Outer casing/vault depth (mm)			
F. Depth to top of screen (m)			
G. Depth to top of LNAPL Layer (m)			
H. Depth to static water level (m)			
I. LNAPL Thickness (m)			
J. Final Drawdown Level (m)			
K. Depth to bottom of the screen (m)			
L. Depth to bottom of the well (m)			
M. LNAPL Removal Rate (LPD)			
N. Water Removal Rate (LPM)			
O. Sump Length (m)			
P. DNAPL Removal Rate (LPD)			
Q. DNAPL Thickness (m)			
R. Maximum Daily Water Table Fluctuation (m)			
• Water pH			
• Well Under Vacuum/Pressure (bar)			
• Elevation Above Sea Level (m)			
• Geology at Recovery Level			
• Existing Discharge Line Pressure (bar)			

*Please note any special characteristic on illustration above*

Please provide a site layout sketch with: a) Location of each well by ID number; b) Location of air source; c) Distances and scales  
 d) Location of fluid tank (indicate vertical lift if any); e) Proposed ID of air supply header; f) Proposed ID of fluid discharge header

THE INFORMATION PROVIDED ON THIS FORM WILL BE KEPT CONFIDENTIAL BY QED/CEE