



**WELKER<sup>®</sup>**  
Engineering Company

## Gas Sampling Data Sheet

<b>Company:</b>	<b>Contact:</b>
<b>Date Prepared:</b>	<b>Phone Number:</b>
<b>Project:</b>	<b>E-Mail:</b>
<b>Filled Out By:</b>	

Process/Product Information*		
<input type="checkbox"/> Natural Gas or <input type="checkbox"/> Other; Please Specify:		
Operating Pressure:	Operating Temperature:	Hydrocarbon Dewpoint:
Is product compatible with Viton Seals: Yes <input type="checkbox"/> or *No <input type="checkbox"/> *Please attach analysis if possible.		
Is Gas toxic and/or corrosive? Yes <input type="checkbox"/> or No <input type="checkbox"/>		

Design Information	
Design Temperature:	Design Pressure:
Operating Temperature:	Operation Pressure:
Is Instrument Air or Gas available? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Pipeline Information	
Probe Connection: <input type="checkbox"/> NPT or <input type="checkbox"/> Flanged	Please specify size:
Probe length to center 1/3 of the pipeline from connection point:	
<input type="checkbox"/> Stationary or <input type="checkbox"/> Adjustable or <input type="checkbox"/> Auto Insertion	
Please refer to Form WEC-102 Probe Data Sheet	

Sampling Information	
<input type="checkbox"/> Proportional to Flow* or <input type="checkbox"/> Timed Sample	Sample Period: <input type="checkbox"/> Day <input type="checkbox"/> Week <input type="checkbox"/> Month
*If Proportional to Flow what type of signal: <input type="checkbox"/> Dry Content <input type="checkbox"/> Voltage Pulse <input type="checkbox"/> 4-20ma	
Is flow totalizer capable of powering solenoid: <input type="checkbox"/> Yes <input type="checkbox"/> No      If Yes at what voltage:	

Sample Container Information	
Sample Container Size (cc):	Sulfinert Coated: <input type="checkbox"/> Yes or <input type="checkbox"/> No
<input type="checkbox"/> Standard Spun or <input type="checkbox"/> Constant Pressure*      *If Constant Pressure please complete below	
*Purge Port: <input type="checkbox"/> Yes or <input type="checkbox"/> No	*D.O.T. Approval: <input type="checkbox"/> Yes or <input type="checkbox"/> No      *Indicator: <input type="checkbox"/> magnetic or <input type="checkbox"/> Solid
Transport Canada Approval: <input type="checkbox"/> Yes <input type="checkbox"/> no	Internal Mixer: <input type="checkbox"/> Yes <input type="checkbox"/> No

Mounting Information (choose one)				
Enclosure <input type="checkbox"/> (mount to 2" pipe)	Bracket Mounted <input type="checkbox"/> (mount to 2" pipe)	Probe Mounted <input type="checkbox"/> (mount directly to pipeline)	Panel Wall Mounted <input type="checkbox"/>	Heated Enclosure <input type="checkbox"/> (encloses pipe)