



APPLICATION DATA FOR BOOST HIGH INLET PUMP

COMPANY NAME _____

ADDRESS _____ **CITY** _____

PROVINCE / STATE _____ **COUNTRY** _____

CONTACT NAME _____

PHONE NUMBER _____ **EMAIL** _____

INSTALL LOCATION (LSD or Other) _____

FIELD CONTACT NAME _____

PHONE NUMBER _____ **EMAIL** _____

PROJECT DESCRIPTION / GOALS _____

WHAT ARE THE FLUIDS TO BE PUMPED? _____

WHEN WOULD YOU POTENTIALLY NEED THE EQUIPMENT _____

CURRENT PROCESS / EQUIPMENT BEING USED (If Any) _____

FLUID COMING OFF OF _____

FLUID DISCHARGING INTO: _____ FLUID PIPELINE

OTHER: _____

CORROSIVE ELEMENTS H2S _____ CO2 _____ SALINITY _____ PPM / %

INLET PRESSURE CURRENT _____ DESIRED _____ PSI / kPa

DISCHARGE PRESSURE REQUIRED _____ PSI / kPa

TOTAL FLUID VOLUMES: CURRENT _____ PROJECTED _____ m3/d / Bbls/d

PIPELINE DIAMETER: INLET _____ DISCHARGE _____ INCHES

ELECTRIC POWER AVAILABLE ON LOCATION: _____ V _____ PHASE _____ AMPS

POWER SOURCE: _____ GRID _____ ONSITE GENERATOR

FUEL SOURCE AVAILABLE ON LOCATION: PROPANE _____ NG _____ DIESEL _____

CELLULAR SIGNAL AT LOCATION _____ Yes _____ No

SPECIAL REQUIREMENTS / ADDITIONAL INFORMATION: _____

CHANGING THE LANDSCAPE

Box 1759, Moosomin, Saskatchewan S0G 3N0 – (306) 435 4848