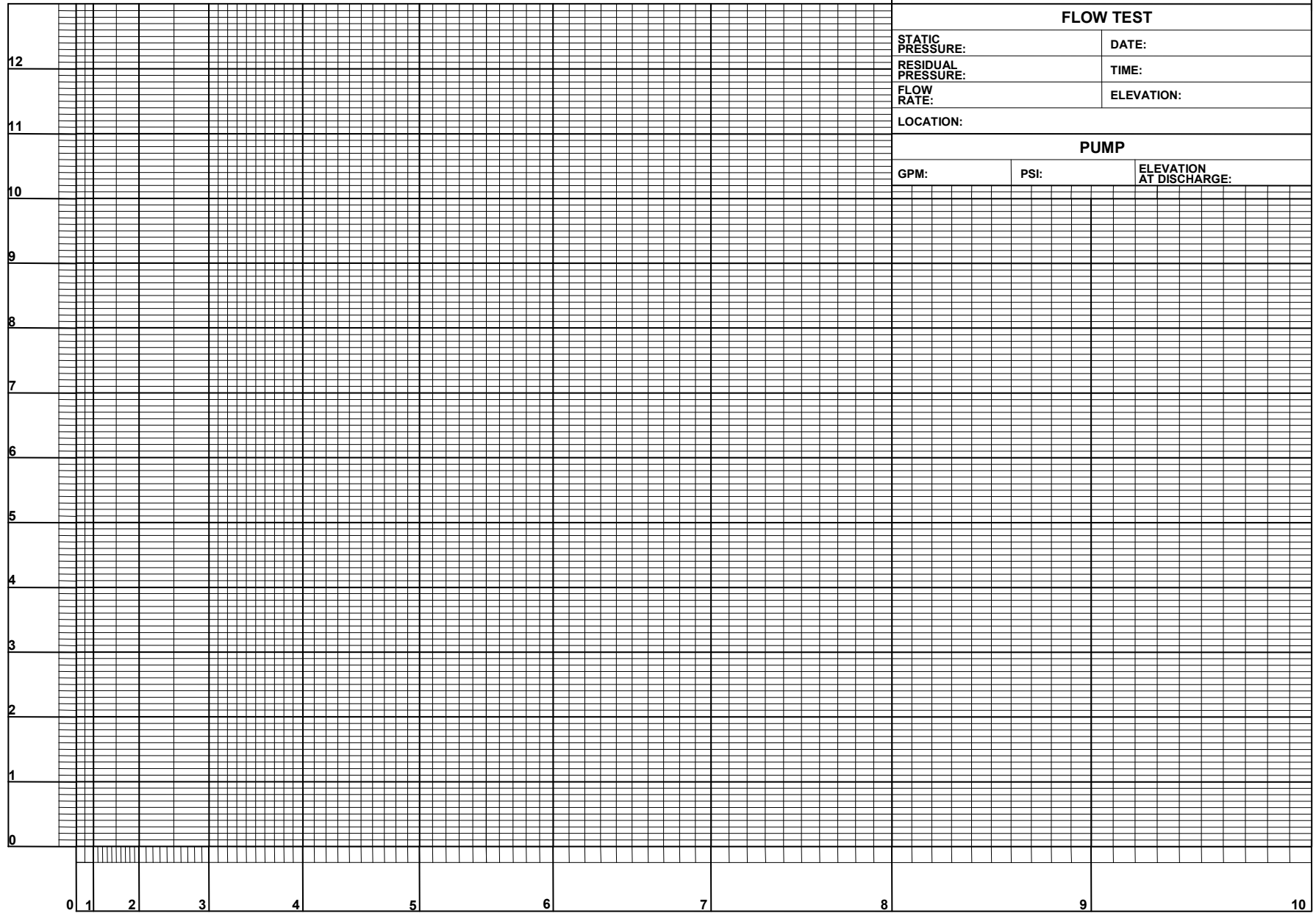


PAGE _____

CONTRACT NO.: _____

CONTRACT NAME: _____

PRESSURE - POUNDS PER SQUARE INCH (MULTIPLY SCALE BY _____)



FLOW - GALLONS PER MINUTE (MULTIPLY SCALE BY _____)

WATER SUPPLY INFORMATION		
FLOW TEST		
STATIC PRESSURE:	DATE:	
RESIDUAL PRESSURE:	TIME:	
FLOW RATE:	ELEVATION:	
LOCATION:		
PUMP		
GPM:	PSI:	ELEVATION AT DISCHARGE: