



**NET4GAS, s.r.o**

**COMPRESSOR STATION JIRKOV  
73 BAR**

**API 617  
Natural Gas Compressor Data Sheet**

11.07.2017

**Annex 1  
Attachment 1.5**

**ILF CONSULTING ENGINEERS**

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## REVISION HISTORY

000	11.07.17	APPROVED	Bollgruen	Fanaca	Schorling
B01	03.05.17	Issue for Review	Bollgruen	Fanaca	Schorling
Rev.	Date	Issue, Purpose	Prepared	Checked	Approved

<b>CENTRIFUGAL AND AXIAL COMPRESSOR DATASHEET (API 617-8th, Part 2)</b> <b>SI UNITS (bar)</b>		REVISION	B01	000	001	002	003
		DATE	03.05.17	11.07.16			
		BY	Bollgruen				
		REV/APPR	Fanaca/Schorling				
		JOB NO.	ITEM NO.				
		PAGE	1	OF	8	REQ'N NO.	

  

1 APPLICABLE TO: <input checked="" type="radio"/> PROPOSAL <input type="radio"/> PURCHASE <input type="radio"/> AS BUILT 2 FOR: _____ 3 SITE: _____ 4 SERVICE: _____ 5 MANUFACTURER: _____ 6 MODEL: _____ 7 APPLICABLE STANDARD: <input type="radio"/> U.S. <input checked="" type="radio"/> ISO 8 INFORMATION TO BE COMPLETED: <input type="radio"/> BY PURCHASER <input type="checkbox"/> BY MANUFACTURER <input type="checkbox"/> MUTUAL AGREEMENT (PRIOR TO PURCHASE)	UNIT: _____ SERIAL NO.: _____ NO. REQUIRED: <u>2+1 (two plus one)</u> DRIVER TYPE: <u>ELECTRIC DRIVE MOTOR</u> DRIVER ITEM NO.: _____
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OPERATING CONDITIONS					
	NORMAL				
	OP 1	OP 2	OP 3	OP 4	OP 5
13 <input checked="" type="radio"/> GAS HANDLED (ALSO SEE SHEET <u>2</u> )	NORMAL	NORMAL	NORMAL	NORMAL	NORMAL
14 <input type="checkbox"/> GAS PROPERTIES					
15 <input checked="" type="radio"/> M <sup>3</sup> /H (1.013 barA & 20°C DRY)	1,879,167	916,667	1,020,833	1,552,500	1,991,667
16 <input checked="" type="radio"/> WEIGHT FLOW, (kg/h) (WET) (DRY)					
17 INLET CONDITIONS					
18 <input checked="" type="radio"/> PRESSURE (barA)	47.3	49.3	49.3	48.1	47.7
19 <input checked="" type="radio"/> TEMPERATURE (°C)	15.0	15.0	15.0	15.0	15.0
20 <input type="radio"/> RELATIVE HUMIDITY %					
21 <input type="radio"/> MOLECULAR WEIGHT					
22 <input checked="" type="checkbox"/> Cp/Cv (K <sub>1</sub> ) OR (K <sub>AVG</sub> ) (Note 5)					
23 <input checked="" type="checkbox"/> COMPRESSIBILITY (Z <sub>1</sub> ) OR (Z <sub>AVG</sub> ) (Note 5)					
24 <input checked="" type="checkbox"/> INLET VOLUME, (m <sup>3</sup> /h) (WET / DRY)					
25 DISCHARGE CONDITIONS					
26 <input checked="" type="radio"/> PRESSURE (barA)	61.3	56.6	61.3	61.3	61.3
27 <input checked="" type="radio"/> TEMPERATURE (°C)					
28 <input checked="" type="checkbox"/> Cp/Cv (K <sub>2</sub> ) OR (K <sub>AVG</sub> ) (Note 5)					
29 <input checked="" type="checkbox"/> COMPRESSIBILITY (Z <sub>2</sub> ) OR (Z <sub>AVG</sub> ) (Note 5)					
30 <input checked="" type="checkbox"/> GAS POWER REQUIRED (kW)					
31 <input checked="" type="checkbox"/> TRAIN POWER REQUIRED (kW)					
32 <input checked="" type="checkbox"/> POWER REQ'D AT DRIVER INCL. EXT. LOSSES (kW)					
33 <input checked="" type="checkbox"/> SPEED (rpm)					
34 <input checked="" type="checkbox"/> TURNDOWN (%)					
35 <input checked="" type="checkbox"/> POLYTROPIC HEAD (N-m/kg)					
36 <input checked="" type="checkbox"/> POLYTROPIC EFFICIENCY (%)					
37 <input checked="" type="radio"/> CERTIFIED POINT Note 2	X		X	X	
38 <input checked="" type="checkbox"/> PERFORMANCE CURVE NUMBER					

  

39 PROCESS CONTROL 40 METHOD <input type="radio"/> SUCTION THROTTLING <input type="radio"/> VARIABLE INLET <input checked="" type="radio"/> SPEED VARIATION <input type="radio"/> DISCHARGE <input checked="" type="radio"/> COOLED BYPASS 41 FROM _____ (barA)    GUIDE VANES    FROM <u>35</u> %    BLOWOFF    FROM <u>Note 3</u> 42 TO _____ (barA)    TO <u>105</u> %    TO _____ TO _____ 43 SIGNAL <input checked="" type="radio"/> SOURCE _____ 44 TYPE <input checked="" type="radio"/> ELECTRONIC <input type="radio"/> PNEUMATIC <input type="radio"/> OTHER _____ 45 RANGE <u>4-20 mA</u> MA _____ (barG) 46 START-UP <input type="radio"/> FROM SETTLING OUT CONDITION <input type="radio"/> NORMAL SUCTION PRESSURE <input type="radio"/> OTHER: _____	47 REMARKS: 48 1) The flow throughput specified for each operating point OP1-OP5 is the flow which shall be transported by the compressor station, the Supplier 49 shall inform how many compressors are required in operation for each operating point OP1 to OP5. 50 2) The following number of operating hours shall be considered for each guarantee point: 51 -OP1: 3500 operating hours / machine / year 52 -OP3: 625 operating hours / machine / year 53 -OP4: 625 operating hours / machine / year 54 3) OP1 shall have maximum compressor efficiency 55 56
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**ILF Consulting Engineers**  
C4G-1173-II E-KS007-STR-DAT-820-000-API 617 Natural Gas Compressor Data Sheet.xlsx

<b>CENTRIFUGAL AND AXIAL COMPRESSOR DATASHEET (API 617-8th, Part 2)</b> <b>SI UNITS (bar)</b>		REVISION	B01	000	001	002	003
		DATE	03.05.17	11.07.17			
		JOB NO. _____ ITEM NO. _____ PAGE <u>3</u> OF <u>8</u> REQ'N NO. _____					
CONSTRUCTION FEATURES							
1	<input checked="" type="checkbox"/> <b>SPEEDS:</b> MAX. CONT. _____ (rpm) TRIP _____ (rpm) MAX. TIP SPEEDS: _____ (m/s) @ 100% SPEED _____ (m/s) @ MAX. CONT. SPEED						
2							
3	<input checked="" type="checkbox"/> <b>LATERAL CRITICAL SPEEDS (DAMPED)</b> FIRST CRITICAL _____ (rpm) _____ MODE SECOND CRITICAL _____ (rpm) _____ MODE THIRD CRITICAL _____ (rpm) _____ MODE FOURTH CRITICAL _____ (rpm) _____ MODE						
4							
5	<input type="checkbox"/> <b>LATERAL ANALYSIS ADDITIONAL REQUIREMENTS</b> <input type="checkbox"/> <b>TRAIN LATERAL ANALYSIS REQUIRED</b> <input checked="" type="checkbox"/> <b>TRAIN TORSIONAL ANALYSIS REQUIRED</b> <input type="checkbox"/> <b>TORSIONAL CRITICAL SPEEDS:</b> FIRST CRITICAL _____ (rpm) SECOND CRITICAL _____ (rpm) THIRD CRITICAL _____ (rpm) FOURTH CRITICAL _____ (rpm)						
6							
7	<input checked="" type="checkbox"/> <b>VIBRATION:</b> ALLOWABLE TEST LEVEL _____ (µm) (PEAK TO PEAK)						
8							
9	<b>NAMEPLATE</b> <input type="checkbox"/> US CUSTOMARY <input checked="" type="checkbox"/> METRIC						
10							
11	<input type="checkbox"/> <b>ROTATION, VIEWED FROM DRIVEN END</b> <input type="checkbox"/> CW <input type="checkbox"/> CCW						
12							
13	<input checked="" type="checkbox"/> <b>MATERIALS INSPECTION REQUIREMENTS</b> <input checked="" type="checkbox"/> RADIOGRAPHY REQUIRED FOR _____ welds <input checked="" type="checkbox"/> ULTRASONIC REQUIRED FOR _____ cast & machined parts <input checked="" type="checkbox"/> MAGNETIC PARTICLE REQUIRED FOR _____ impellers <input checked="" type="checkbox"/> LIQUID PENETRANT REQUIRED FOR _____ impellers <input type="checkbox"/> LOW TEMPERATURE _____ MIN.DESIGN METAL TEMPERATURE _____ (°C) AT CONCURRENT PRESSURE _____ (barG) <input type="checkbox"/> OTHER TRAIN COMPONENTS _____						
14							
15	<input checked="" type="checkbox"/> <b>CASING:</b> MODEL _____ CASING SPLIT _____ MATERIAL _____ THICKNESS (mm) _____ CORR. ALLOW. (mm) _____ MAX. ALLOWABLE PRESS _____ (barG) TEST PRESS: (barG) HELIUM _____ HYDRO _____ MAX. ALLOWABLE TEMPERATURE _____ (°C) MAX OPER. TEMP. _____ (°C) MIN. OPER. TEMP. _____ (°C) MAX CASING CAPACITY _____ (m³/h) <input type="checkbox"/> SYSTEM RELIEF VALVE SET PT. _____ (barG) <input type="checkbox"/> Q.C. OF INACCESSIBLE WELDS _____						
16							
17	<input type="checkbox"/> <b>DIAPHRAGMS:</b> MATERIAL _____ AXIALLY SPLIT <input type="checkbox"/> YES <input type="checkbox"/> NO DIAPHRAGM MAX. Δ P (BAR)(kPa): _____						
18							
19	<b>REMARKS:</b> _____ _____ _____ _____ _____						
20							
21	<b>CONSTRUCTION FEATURES</b> <input type="checkbox"/> <b>INTERMEDIATE MAIN PROCESS CONNECTIONS</b> DISCH. PRESSURE: (barG) MAX _____ MIN _____ INLET PRESSURE: (barG) MAX _____ MIN _____ <input type="checkbox"/> <b>GUIDE VANES</b> <input type="checkbox"/> IGV EXTERNAL PURGE <input type="checkbox"/> VANE CONTROL SYSTEM NUMBER OF AXIAL BLADE ROWS _____ NUMBER OF ADJUSTIBLE ROWS _____ NO. VANES GUIDE VANE _____ MATERIAL _____ <input checked="" type="checkbox"/> <b>IMPELLERS:</b> NO. _____ DIAMETERS _____ NO. VANES EA. IMPELLER _____ TYPE (OPEN, ENCLOSED, ETC.) _____ TYPE FABRICATION _____ MATERIAL _____ MIN. YIELD STRENGTH (MPa) _____ HARDNESS: (Rc) (BRINNEL) MAX _____ MIN _____ SMALLEST TIP INTERNAL WIDTH (mm) _____ MAX. MACH. NO. @ IMPELLER EYE _____ MAX. IMPELLER HEAD @ 100% SPD (N-m/kg) _____ <input checked="" type="checkbox"/> <b>SHAFT:</b> <input checked="" type="checkbox"/> ONE PIECE <input type="checkbox"/> BUILT UP MATERIAL _____ DIA @ IMPELLERS (mm) _____ DIA @ COUPLING (mm) _____ SHAFT END: <input type="checkbox"/> TAPERED <input type="checkbox"/> CYLINDRICAL <input type="checkbox"/> SPLINED <input type="checkbox"/> INTEGRAL FLANGE MIN. YIELD STRENGTH (MPa) _____ SHAFT HARDNESS (BNH)(Rc) _____ MAX TORQUE CAPABILITY (N-m) _____ <input checked="" type="checkbox"/> <b>BALANCE PISTON:</b> MATERIAL _____ AREA (mm²) _____ FIXATION METHOD _____ NORMAL CLEARANCE (mm) _____ FLOW WITH NORMAL CLEARANCE (kg/h) _____ FLOW WITH 2x NORMAL CLEARANCE (kg/h) _____ <input type="checkbox"/> <b>PRESS. CONN. BAL LINE DOWNSTREAM</b> <input checked="" type="checkbox"/> <b>SHAFT SLEEVES:</b> AT INTERSTG. CLOSE _____ MATL _____ CLEARANCE POINTS _____ AT SHAFT SEALS _____ MATL _____ <input type="checkbox"/> <b>ACCESSIBLE ROTOR</b> <input type="checkbox"/> <b>DISASSEMBLY AND REASSEMBLY</b> <input type="checkbox"/> <b>AT SPEED BALANCING</b> <input checked="" type="checkbox"/> <b>SEQUENTIAL LOW SPEED BAL. PREC. AT SPEED BAL.</b> <input type="checkbox"/> <b>RESIDUAL BALANCE CHECK</b> <input checked="" type="checkbox"/> <b>LABYRINTHS:</b> INTERSTAGE _____ TYPE _____ MATERIAL _____ BALANCE PISTON _____ TYPE _____ MATERIAL _____						
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		REVISION	B01	000	001	002	003			
		DATE	03.05.17	11.07.17						
<b>CENTRIFUGAL AND AXIAL COMPRESSOR</b> <b>DATASHEET (API 617-8th, Part 2)</b> <b>SI UNITS (bar)</b>		JOB NO. _____ ITEM NO. _____ PAGE <u>4</u> OF <u>8</u> REQ'N NO. _____								
LOW PRESSURE CASING CONSTRUCTION FEATURES (CONTINUED)										
1	<b>SHAFT SEALS:</b> <input type="radio"/> SEAL TYPE _____ <input type="radio"/> SETTLING OUT PRESSURE _____ (barG) <input type="radio"/> MIN. SEALING PRESSURE _____ (barG) <input type="radio"/> SUPPLEMENTAL DEVICE REQUIRED FOR CONTACT _____ SEALS _____ TYPE _____ <input type="radio"/> BUFFER GAS SYSTEM REQUIRED _____ <input type="radio"/> TYPE BUFFER GAS _____ <input type="checkbox"/> PRESSURE _____ (barG) <input type="checkbox"/> FLOWRATE _____ (kg/h) <input type="checkbox"/> FILTRATION _____ (µm) <input type="radio"/> MANIFOLD _____ <input type="radio"/> METHOD OF CONTROL _____		<input type="radio"/> BUFFER GAS CONTROL SYSTEM SCHEMATIC BY VENDOR <input type="radio"/> PRESSURIZING GAS FOR SUBATMOSPHERIC SEALS <input type="radio"/> EDUCTOR <input type="radio"/> INJECTION <input type="checkbox"/> SEAL MANUFACTURER _____ <input type="checkbox"/> LEAKAGE TO PROCESS _____ (l/day/seal) BUFFER GAS REQUIRED FOR: <input type="checkbox"/> AIR RUN-IN <input type="checkbox"/> OTHER _____ <input type="checkbox"/> FLOW (PER SEAL): NORM: _____ (kg/h) @ _____ (bar)    Δ P _____ MAX: _____ (kg/h) @ _____ (bar)    Δ P _____ <input type="checkbox"/> BEARING HOUSING CONSTRUCTION: TYPE (SEPARATE, INTEGRAL) _____ SPLIT _____ MATERIAL _____							
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14										
AXIAL COMPRESSOR										
15										
16	STAGE	1	2	3	4	5	6	7	8	9
17	<b>ROTOR</b>									
18	<input type="checkbox"/> BLADE MATERIAL									
19	<input type="checkbox"/> BLADE ROOT TYPE									
20	<input type="checkbox"/> CORD WIDTH (mm)									
21	<input type="checkbox"/> OUTER DIAMETER (mm)									
22	<input type="checkbox"/> BLADE HEIGHT (mm)									
23	<input type="checkbox"/> BLADE QUANTITY									
24	<b>STATOR</b>									
25	<input type="checkbox"/> BLADE MATERIAL									
26	<input type="checkbox"/> TYPE (MOVABLE, FIXED, ADJUSTABLE)									
27										
28	<input type="checkbox"/> CORD WIDTH (mm)									
29	<input type="checkbox"/> BLADE QUANTITY									
30										
31	STAGE	10	11	12	13	14	15	16	17	18
32	<b>ROTOR</b>									
33	<input type="checkbox"/> BLADE MATERIAL									
34	<input type="checkbox"/> BLADE ROOT TYPE									
35	<input type="checkbox"/> CORD WIDTH (mm)									
36	<input type="checkbox"/> OUTER DIAMETER (mm)									
37	<input type="checkbox"/> BLADE HEIGHT (mm)									
38	<input type="checkbox"/> BLADE QUANTITY									
39	<b>STATOR</b>									
40	<input type="checkbox"/> BLADE MATERIAL									
41	<input type="checkbox"/> TYPE (MOVABLE, FIXED, ADJUSTABLE)									
42										
43	<input type="checkbox"/> CORD WIDTH (mm)									
44	<input type="checkbox"/> BLADE QUANTITY									
45	<b>REMARKS:</b> _____									
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<b>CONSTRUCTION FEATURES (CONTINUED)</b>																																																																																																				
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<input checked="" type="checkbox"/> <b>MAGNETIC BEARINGS</b>																																																																																																				
<table border="1"><thead><tr><th colspan="2">RADIAL</th><th>THRUST</th><th>NON-THRUST</th><th>THRUST</th><th>ACTIVE</th><th>INACTIVE</th></tr></thead><tbody><tr><td><input type="checkbox"/> TYPE</td><td></td><td></td><td></td><td><input type="checkbox"/> TYPE</td><td></td><td></td></tr><tr><td><input type="checkbox"/> MANUFACTURER</td><td></td><td></td><td></td><td><input type="checkbox"/> MANUFACTURER</td><td></td><td></td></tr><tr><td><input type="checkbox"/> LENGTH (mm)</td><td></td><td></td><td></td><td><input type="checkbox"/> UNIT LOADING - MAX (bar)</td><td></td><td></td></tr><tr><td><input type="checkbox"/> SHAFT DIA. (mm)</td><td></td><td></td><td></td><td><input type="checkbox"/> UNIT LOAD - ULT. (bar)</td><td></td><td></td></tr><tr><td><input type="checkbox"/> UNIT LOAD (ACT/ALLOW) (bar)</td><td></td><td></td><td></td><td><input type="checkbox"/> AREA (mm<sup>2</sup>)</td><td></td><td></td></tr><tr><td><input type="checkbox"/> BASE MATERIAL</td><td></td><td></td><td></td><td><input type="checkbox"/> NO. PADS</td><td></td><td></td></tr><tr><td><input type="checkbox"/> BABBIT THICKNESS (mm)</td><td></td><td></td><td></td><td><input type="checkbox"/> PIVOT: CENTER / OFFSET, %</td><td></td><td></td></tr><tr><td><input type="checkbox"/> NO. PADS</td><td></td><td></td><td></td><td><input type="checkbox"/> PAD BASE MATL</td><td></td><td></td></tr><tr><td><input type="checkbox"/> LOAD: B'TWN/ON PAD</td><td></td><td></td><td></td><td colspan="3"><input type="radio"/> COPPER BACKED</td></tr><tr><td><input type="checkbox"/> PIVOT: CTR/OFFSET, %</td><td></td><td></td><td></td><td colspan="3"><input type="radio"/> FLOODED <input type="radio"/> DIRECTED</td></tr><tr><td><input type="checkbox"/> PAD MATERIAL</td><td></td><td></td><td></td><td colspan="3"><input type="radio"/> INTEGRAL <input type="radio"/> REPLACEABLE</td></tr><tr><td><input type="checkbox"/> BEARING SPAN (mm)</td><td></td><td></td><td></td><td colspan="3"><input type="checkbox"/> SIZING CRITERIUM</td></tr></tbody></table>										RADIAL		THRUST	NON-THRUST	THRUST	ACTIVE	INACTIVE	<input type="checkbox"/> TYPE				<input type="checkbox"/> TYPE			<input type="checkbox"/> MANUFACTURER				<input type="checkbox"/> MANUFACTURER			<input type="checkbox"/> LENGTH (mm)				<input type="checkbox"/> UNIT LOADING - MAX (bar)			<input type="checkbox"/> SHAFT DIA. (mm)				<input type="checkbox"/> UNIT LOAD - ULT. (bar)			<input type="checkbox"/> UNIT LOAD (ACT/ALLOW) (bar)				<input type="checkbox"/> AREA (mm <sup>2</sup> )			<input type="checkbox"/> BASE MATERIAL				<input type="checkbox"/> NO. PADS			<input type="checkbox"/> BABBIT THICKNESS (mm)				<input type="checkbox"/> PIVOT: CENTER / OFFSET, %			<input type="checkbox"/> NO. PADS				<input type="checkbox"/> PAD BASE MATL			<input type="checkbox"/> LOAD: B'TWN/ON PAD				<input type="radio"/> COPPER BACKED			<input type="checkbox"/> PIVOT: CTR/OFFSET, %				<input type="radio"/> FLOODED <input type="radio"/> DIRECTED			<input type="checkbox"/> PAD MATERIAL				<input type="radio"/> INTEGRAL <input type="radio"/> REPLACEABLE			<input type="checkbox"/> BEARING SPAN (mm)				<input type="checkbox"/> SIZING CRITERIUM		
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<input checked="" type="checkbox"/> LOCATION E&IC Rooms ENCLOSURE																																																																																																				
<input type="radio"/> MFR. <input type="checkbox"/> MODEL																																																																																																				
<input type="checkbox"/> SCALE RGE <input type="radio"/> ALARM <input type="checkbox"/> SET @ _____ (°C)																																																																																																				
<input type="radio"/> SHTDWN <input type="checkbox"/> SET @ _____ (°C) <input type="radio"/> TIME DELAY _____ SEC																																																																																																				
<b>KEY PHASOR REQUIRED</b>																																																																																																				
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**ILF Consulting Engineers**  
C4G-1173-II E-KS007-STR-DAT-820-000-API 617 Natural Gas Compressor Data Sheet.xlsx



<b>CENTRIFUGAL AND AXIAL COMPRESSOR DATASHEET (API 617-8th, Part 2) SI UNITS (bar)</b>		REVISION	B01	000	001	002	003
		DATE	03.05.17	11.07.17			
		JOB NO. _____ ITEM NO. _____ PAGE <u>7</u> OF <u>8</u> REQ'N NO. _____					
UTILITIES							
1							
2	<input type="radio"/> UTILITY CONDITIONS:						
3	<b>STEAM:</b>		<b>DRIVERS</b>				
4	INLET MIN	_____ (barG) _____ (°C)					
5	NORM	_____ (barG) _____ (°C)					
6	MAX	_____ (barG) _____ (°C)					
7	EXHAUST. MIN	_____ (barG) _____ (°C)					
8	NORM	_____ (barG) _____ (°C)					
9	MAX	_____ (barG) _____ (°C)					
10	<b>ELECTRICITY:</b>						
11		DRIVERS CONTROL SHUTDOWN					
12	VOLTAGE	<u>400 / 230</u> <u>24</u> <u>230 / 110</u>					
13	HERTZ	<u>50</u> <u>DC</u> <u>VAC / DC</u>					
14	PHASE	<u>3</u> <u>-</u> <u>1 / -</u>					
15	<input checked="" type="radio"/> REDUCED VOLTAGE START	<u>Note 13</u> <u>Note 12</u>					
16	<input type="radio"/> NUMBER OF STARTS	_____					
17	<b>INSTRUMENT AIR:</b>						
18	MAX PRESS	<u>10</u> (barG) MIN PRESS <u>8</u> (barG)					
19	<b>SHOP INSPECTION AND TESTS</b>						
20	<input type="radio"/> (SEE INSPECTOR'S CHECKLIST)		REQ'D	WIT/OBV			
21	HYDROSTATIC		<input checked="" type="radio"/>				
22	IMPELLER OVERSPEED		<input checked="" type="radio"/>				
23	MECHANICAL RUN		<input checked="" type="radio"/>	<u>WIT</u>			
24	<input type="radio"/> CONTRACT COUPLING	<input type="radio"/> IDLING ADAPTOR(S)					
25	<input checked="" type="radio"/> CONTRACT PROBES	<input type="radio"/> SHOP PROBES					
26	<input checked="" type="radio"/> PURCHASER VIB. EQUIPMENT						
27	VARY LUBE & SEAL OIL PRESSURES						
28	AND TEMPERATURES		<input type="radio"/>				
29	POLAR FORM VIB DATA		<input type="radio"/>				
30	TAPE RECORD VIB DATA	<u>Note 18</u>	<input checked="" type="radio"/>				
31	SHAFT END SEAL INSP		<input type="radio"/>				
32	GAS LEAK TEST AT DISCH PRESS		<input checked="" type="radio"/>	<u>OBV</u>			
33	<input type="radio"/> POST TEST INTERNAL INSP						
34	<input type="radio"/> BEFORE GAS LEAKAGE TEST						
35	<input type="radio"/> AFTER GAS LEAKAGE TEST						
36	INTERMEDIATE HEAD/PRESSURE TOL.		<input checked="" type="radio"/>	<u>WIT</u>			
37	PERFORMANCE TEST (GAS)-(AIR)	<u>Note 8</u>	<input type="radio"/>				
38	COMPLETE UNIT TEST		<input checked="" type="radio"/>	<u>WIT</u>			
39	TANDEM TEST		<input type="radio"/>				
40	GEAR TEST		<input type="radio"/>				
41	HELIUM LEAK TEST		<input type="radio"/>				
42	SOUND LEVEL TEST	<u>Note 17</u> (SURVEY ONLY)	<input checked="" type="radio"/>	<u>WIT</u>			
43	AUX. EQUIPMENT TEST		<input type="radio"/>				
44	FULL LOAD / SPEED / PRESS TEST		<input checked="" type="radio"/>	<u>WIT</u>			
45	HYDRAULIC COUPLING INSP		<input type="radio"/>				
46	SPARE PARTS TEST		<input checked="" type="radio"/>	<u>OBV</u>			
47	INSPECTOR'S CHECKLIST COMPLIANCE		<input type="radio"/>				
48	GAS SEAL TEST VENDOR SHOP		<input type="radio"/>				
49	ADDITIONAL INSPECTIONS	<u>see Remarks</u>	<input type="radio"/>				
50	<b>REMARKS:</b> governing project specification for shop inspections and testing für all equipment included in the Scope of Supply is the document						
51	C4G-JI73-ILF-KS007-STR-SPC-800-A01 Specification for Electro Motor Compressor Set (EMCS)						
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		REVISION	B01	000	001	002	003
		DATE	03.05.17	11.07.17			
<b>CENTRIFUGAL AND AXIAL COMPRESSOR DATASHEET (API 617-8th, Part 2)</b> <b>SI UNITS (bar)</b>		JOB NO. _____ ITEM NO. _____ PAGE <u>8</u> OF <u>8</u> REQ'N NO. _____					
1	<b>NOTES</b>						
2							
3	General: All attachments referred in this document shall mean attachments to Annex 1 (doc. C4G-JI73-ILF-KS007-STR-SPC-800-Specification for Electro						
4	Motor Compressor Set (EMCS)). The attachment to Annex 1 are listed in doc. C4G-JI73-ILF-KS007-GEN-SEZ-841 (Attachment 1.1)						
5	Note 1: Electric Drive and Turbo Compressor Units to be encapsulated, integrated design, with magnetic bearings and without shaft end seals.						
6	Note 2: Guarantee values for OP1, OP3 and OP4 to be proven during site Performance Tests. Performance guarantees as per Annex 1, Attachment 1.9.						
7	Note 3: Reference is made to the process flow diagram C4G-JI73-ILF-KS007-STR-DIA-100 (Attachment 1.14)						
8	Note 4: Mating counter-flange and gaskets shall be provided by the EMCS Supplier.						
9	Note 5: The Supplier shall calculate gas properties data.						
10	Note 6: Color will be defined by the Employer in the course of the project.						
11	Note 7: Space requirements of complete electric motor drive (EM) and turbo compressor skid (CU) to be given.						
12	Note 8: Factory Performance Test to be carried out in accordance with ASME PTC 10 Type 2, site Performance Test to be carried out in accordance						
13	with PTC 10 Type 1.						
14	Note 9: Compressor shall be suitable for the complete gas quality range of gas group H per DVGW G260.						
15	Note 10: Integrated electric drive and turbo compressor has no lubrication system.						
16	Note 11: Drains to be equipped with piping conducted to exterior of enclosure / skid.						
17	Note 12: UPS is available at 230V AC and and 110V DC; UPS consumers with other power requirements, need to be fed by Supplier UPS system						
18	or the Supplier needs to transform to required voltage.						
19	Note 13: Maximum voltage drop during start-up of motors: 85% of normal voltage UN.						
20	Note 14: Supplier documentation required as per Annex 1, Attachment 1.3						
21	Note 15: Snow region II means a characteristic value of load sk = 1,0 kN/m2.						
22	Note 16: The Supplier shall refer to Annex 1 (doc. C4G-JI73-ILF-KS007-STR-SPC-800-Specification for Electro Motor Compressor Set (EMCS)) for						
23	details related to the location of equipment.						
24	Note 17: Shall be carried out during the mechanical run test, noise emissions Performance Test shall be made on site						
25	Note 18: The Supplier shall record the magnetic bearing vibration data during the mechanical run test and submit this to the Employer / Provider						
26							
27	Abbreviations:						
28	see Annex 1 (doc. C4G-JI73-ILF-KS007-STR-SPC-800-Specification for Electro Motor Compressor Set (EMCS))						
29	STA: Supplier to announce						
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