

**Quantum Leap Natural Gas Dehydration Technology Questionnaire**

Completion of this questionnaire will allow preliminary screening of potential sites that may benefit from installation of the Quantum Leap Natural Gas Dehydration Technology (QLD).

1. Gas flow rate \_\_\_\_\_ MMscfd
2. Operating gas temperature \_\_\_\_\_ °F
3. Operating gas pressure \_\_\_\_\_ psig
4. Gas spec grav, air =1.0 \_\_\_\_\_
5. Gas dew point required \_\_\_\_\_ lbs water per MMscf
6. Gas contactor type      trayed\_\_\_\_ packed\_\_\_\_
7. Number of stages or trays \_\_\_\_\_
8. Reboiler capacity \_\_\_\_\_ BTU per hour
9. Glycol circulation rate \_\_\_\_\_ gph
10. Pump type                      Kimray\_\_\_\_ electric\_\_\_\_
11. Gas stripping used?      yes\_\_\_\_ no\_\_\_\_
12. Gas stripping rate \_\_\_\_\_ scf per hour
13. Glycol flash separator installed? yes\_\_\_\_ no\_\_\_\_
14. Compressor on location? yes \_\_\_\_ Suction pressure \_\_\_\_\_ psig
15. Utilities available              electricity\_\_\_\_ inst air\_\_\_\_ inst gas\_\_\_\_
16. Site altitude \_\_\_\_\_ feet above sea level
17. Site location \_\_\_\_\_  
\_\_\_\_\_

18. Name \_\_\_\_\_

19. Title \_\_\_\_\_

20. Company \_\_\_\_\_

21. Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

22. Telephone \_\_\_\_\_

23. Fax \_\_\_\_\_

24. Email \_\_\_\_\_

**Gas Composition (mole percent)**

Attach a gas sample that includes BTEX products or fill in the table below.

methane	_____	ethane	_____
propane	_____	isobutane	_____
n-butane	_____	isopentane	_____
n-pentane	_____	n-hexane	_____
n-heptane	_____	n-octane +	_____
cyclopentane	_____	cyclohexane	_____
methylcyclopentane	_____	benzene	_____
toluene	_____	ethylbenzene	_____
o, m and p-xylene	_____	carbon dioxide	_____
nitrogen	_____	hydrogen sulfide	_____