



Laboratory:  
WearCheck USA  
501 Madison Ave.  
Cary, NC 27513  
USA

**Ship To:**

MCCLUNG-LOGAN EQUIPMENT CO - WISE  
PO BOX 1158  
WISE, VA 24293  
US

-----  
2 4 2 9 3

**Carton Contents:**



10 x Sample Bottles  
10 x Sample Mailers  
10 x Sample Information Forms (SIFs)  
SIF# ML0000682 to ML0000691



▼ scan to track samples from this carton and/or to manage these sample kits



**CARTON ID**  
**235820**

▼ keep for your records \* THESE LABELS PEEL OFF \* ▼ place on return shipping box



← scan to track carton/samples

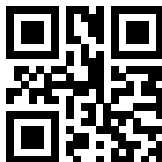
Customer:

\_\_\_\_\_

Shipped:

\_\_\_\_\_

**ID# 235820**



**ID# 235820**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000682**

ML sample kits will be replaced with unused kits if defective in manufacture, labeling, or packaging, or if lost by us or any associate company even though by negligence or other fault. ML shall not be liable or responsible for the future performance or failure of any engine, piece of equipment or material involved in any test or sample. The Company makes no warranties, representations, or guaranties with respect to the performance of any such engine, piece of equipment, or material.

▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:  Final Drive  Transmission

Diesel Engine  Differential  New (Unused) Oil

Natural Gas Engine  Gearbox  Pump Drive

Engine (fuel \_\_\_\_\_)  Swing Drive  Axle

Hydraulic System  Tandem  Other \_\_\_\_\_

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000682**



**ML0000682**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000683**

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▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:  Final Drive  Transmission

Diesel Engine  Differential  New (Unused) Oil

Natural Gas Engine  Gearbox  Pump Drive

Engine (fuel \_\_\_\_\_)  Swing Drive  Axle

Hydraulic System  Tandem  Other \_\_\_\_\_

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000683**



**ML0000683**



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EQUIPMENT COMPANY, INC.

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**ML0000684**

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DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

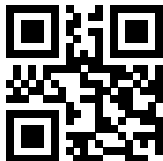
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000684**



**ML0000684**



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EQUIPMENT COMPANY, INC.

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DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000685**



**ML0000685**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



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▼ **AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION**

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:  Final Drive  Transmission

Diesel Engine  Differential  New (Unused) Oil

Natural Gas Engine  Gearbox  Pump Drive

Engine (fuel \_\_\_\_\_)  Swing Drive  Axle

Hydraulic System  Tandem  Other \_\_\_\_\_

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000686**



**ML0000686**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

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▼ **AFFIX MACHINE LABEL *OR* COMPLETE THIS INFORMATION**

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:  Final Drive  Transmission

Diesel Engine  Differential  New (Unused) Oil

Natural Gas Engine  Gearbox  Pump Drive

Engine (fuel \_\_\_\_\_)  Swing Drive  Axle

Hydraulic System  Tandem  Other \_\_\_\_\_

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

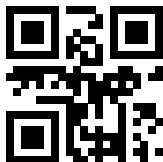
▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000687**



**ML0000687**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000688**

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▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

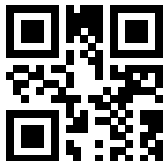
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000688**



**ML0000688**





**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000689**

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▼ **AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION**

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:  Final Drive  Transmission

Diesel Engine  Differential  New (Unused) Oil

Natural Gas Engine  Gearbox  Pump Drive

Engine (fuel \_\_\_\_\_)  Swing Drive  Axle

Hydraulic System  Tandem  Other \_\_\_\_\_

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

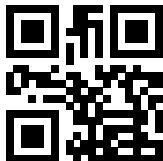
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000689**



**ML0000689**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000690**

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▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000690**



**ML0000690**



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EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



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COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

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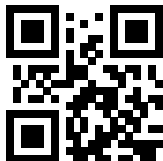
▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date:

**ML0000691**



**ML0000691**



Laboratory:  
WearCheck USA  
501 Madison Ave.  
Cary, NC 27513  
USA

**Ship To:**

MCCLUNG-LOGAN EQUIPMENT CO - WISE  
PO BOX 1158  
WISE, VA 24293  
US

-----  
2 4 2 9 3

**Carton Contents:**



10 x Sample Bottles  
10 x Sample Mailers  
10 x Sample Information Forms (SIFs)  
SIF# ML0000692 to ML0000701



▼ scan to track samples from this carton and/or to manage these sample kits



**CARTON ID**  
**235821**

▼ keep for your records \* THESE LABELS PEEL OFF \* ▼ place on return shipping box



← scan to track carton/samples

Customer: \_\_\_\_\_

Shipped: \_\_\_\_\_

**ID# 235821**



**ID# 235821**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000692**

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DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:  Final Drive  Transmission

Diesel Engine  Differential  New (Unused) Oil

Natural Gas Engine  Gearbox  Pump Drive

Engine (fuel \_\_\_\_\_)  Swing Drive  Axle

Hydraulic System  Tandem  Other \_\_\_\_\_

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

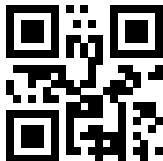
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000692**



**ML0000692**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000693**

ML sample kits will be replaced with unused kits if defective in manufacture, labeling, or packaging, or if lost by us or any associate company even though by negligence or other fault. ML shall not be liable or responsible for the future performance or failure of any engine, piece of equipment or material involved in any test or sample. The Company makes no warranties, representations, or guaranties with respect to the performance of any such engine, piece of equipment, or material.

▼ **AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION**

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000693**



**ML0000693**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000694**

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▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:  Final Drive  Transmission

Diesel Engine  Differential  New (Unused) Oil

Natural Gas Engine  Gearbox  Pump Drive

Engine (fuel \_\_\_\_\_)  Swing Drive  Axle

Hydraulic System  Tandem  Other \_\_\_\_\_

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

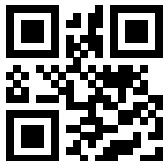
▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000694**



**ML0000694**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000695**

ML sample kits will be replaced with unused kits if defective in manufacture, labeling, or packaging, or if lost by us or any associate company even though by negligence or other fault. ML shall not be liable or responsible for the future performance or failure of any engine, piece of equipment or material involved in any test or sample. The Company makes no warranties, representations, or guaranties with respect to the performance of any such engine, piece of equipment, or material.

▼ **AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION**

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:  Final Drive  Transmission

Diesel Engine  Differential  New (Unused) Oil

Natural Gas Engine  Gearbox  Pump Drive

Engine (fuel \_\_\_\_\_)  Swing Drive  Axle

Hydraulic System  Tandem  Other \_\_\_\_\_

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000695**



**ML0000695**





**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000696**

ML sample kits will be replaced with unused kits if defective in manufacture, labeling, or packaging, or if lost by us or any associate company even though by negligence or other fault. ML shall not be liable or responsible for the future performance or failure of any engine, piece of equipment or material involved in any test or sample. The Company makes no warranties, representations, or guaranties with respect to the performance of any such engine, piece of equipment, or material.

▼ **AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION**

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP FOR TRACKING THIS SAMPLE**

▼ **STICK ON BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000696**



**ML0000696**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000697**

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▼ **AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION**

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**

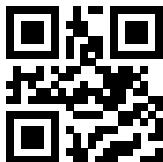


◀ scan to track sample  
ID or S/N:

\_\_\_\_\_

Sample Date:

**ML0000697**



**ML0000697**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000698**

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▼ **AFFIX MACHINE LABEL OR COMPLETE THIS INFORMATION**

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

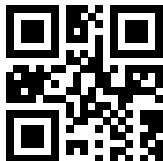
▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000698**



**ML0000698**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000699**

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▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**

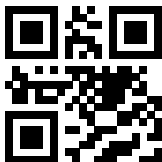


◀ scan to track sample ID or S/N:

\_\_\_\_\_

Sample Date: \_\_\_\_\_

**ML0000699**



**ML0000699**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000700**

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▼ AFFIX MACHINE LABEL **OR** COMPLETE THIS INFORMATION

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:  Final Drive  Transmission

Diesel Engine  Differential  New (Unused) Oil

Natural Gas Engine  Gearbox  Pump Drive

Engine (fuel \_\_\_\_\_)  Swing Drive  Axle

Hydraulic System  Tandem  Other \_\_\_\_\_

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM/DD/YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000700**



**ML0000700**



**McCLUNG-LOGAN**  
EQUIPMENT COMPANY, INC.

SCAN TO COMPLETE **ON-LINE** ▶



**ML0000701**

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▼ **AFFIX MACHINE LABEL *OR* COMPLETE THIS INFORMATION**

DISTRIBUTOR: \_\_\_\_\_

COMPANY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/PROV: \_\_\_\_\_

ZIP/POSTAL: \_\_\_\_\_ PHONE: \_\_\_\_\_

EMAIL/ATTN: \_\_\_\_\_

UNIT No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_

MAKE: \_\_\_\_\_ MODEL: \_\_\_\_\_

Sample From:

<input type="checkbox"/> Diesel Engine	<input type="checkbox"/> Final Drive	<input type="checkbox"/> Transmission
<input type="checkbox"/> Natural Gas Engine	<input type="checkbox"/> Differential	<input type="checkbox"/> New (Unused) Oil
<input type="checkbox"/> Engine (fuel _____)	<input type="checkbox"/> Gearbox	<input type="checkbox"/> Pump Drive
<input type="checkbox"/> Hydraulic System	<input type="checkbox"/> Swing Drive	<input type="checkbox"/> Axle
	<input type="checkbox"/> Tandem	<input type="checkbox"/> Other _____

Location:  Front  Rear  Left  Right  Other \_\_\_\_\_

OIL BRAND & GRADE: \_\_\_\_\_

SAMPLE DATE: MM / DD / YY

TIME UNITS: Hours / Kilometers / Miles / Other \_\_\_\_\_

TIME ON UNIT: \_\_\_\_\_

TIME ON OIL: \_\_\_\_\_

CHANGED: YES / NO

TIME ON FILTER: \_\_\_\_\_

SERVICED: YES / NO

Comments: \_\_\_\_\_

Add Tests: \_\_\_\_\_ 1000-059

▲ PLACE COMPLETED FORM IN MAILER (DON'T STICK TO MAILER)

▼ **KEEP** FOR TRACKING THIS SAMPLE

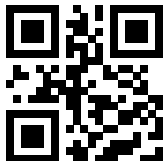
▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date: \_\_\_\_\_

**ML0000701**



**ML0000701**