



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

## Ship To:

HEXION - FAYETTEVILLE PLANT  
1411 INDUSTRIAL DR  
FAYETTEVILLE, NC 28301  
US

-----  
2 8 3 0 1

## Carton Contents:



10 x Sample Bottles  
10 x Sample Mailers  
10 x Sample Information Forms (SIFs)  
SIF# PLS0000931 to PLS0000940



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



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



← scan to track carton/samples

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

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

ID# 251541



ID# 251541



PLS0000931

SCAN TO COMPLETE **ON-LINE** ▶

PLS 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. PLS 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.

CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

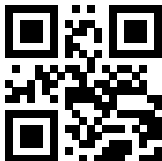
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



PLS0000931

◀ scan to track sample ID or S/N:

Sample Date:



PLS0000931



PLS0000932

SCAN TO COMPLETE **ON-LINE** ▶

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CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

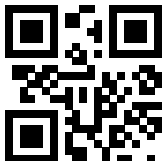
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



PLS0000932

◀ scan to track sample  
ID or S/N:

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



PLS0000932



PLS0000933

SCAN TO COMPLETE **ON-LINE** ▶

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CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

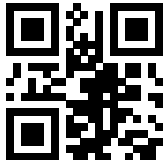
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



PLS0000933

◀ scan to track sample ID or S/N:

Sample Date:



PLS0000933



ADVANCED OIL ANALYSIS SERVICES

SCAN TO COMPLETE **ON-LINE** ►



PLS0000934

PLS 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. PLS 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.

CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

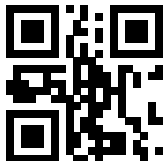
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



◀ scan to track sample ID or S/N:

Sample Date:

PLS0000934



PLS0000934



PLS0000935

SCAN TO COMPLETE **ON-LINE** ▶

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CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

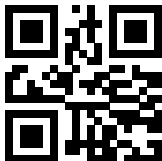
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



PLS0000935

◀ scan to track sample ID or S/N:

Sample Date:



PLS0000935



PLS0000936

SCAN TO COMPLETE **ON-LINE** ▶

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CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

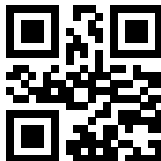
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



PLS0000936

◀ scan to track sample ID or S/N:

Sample Date:



PLS0000936



PLS0000937

SCAN TO COMPLETE **ON-LINE** ▶

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CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

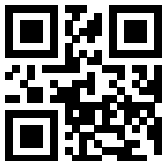
▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



PLS0000937

◀ scan to track sample ID or S/N:

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



PLS0000937





PLS0000938

SCAN TO COMPLETE **ON-LINE** ►

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CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      µm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

▼ **KEEP** FOR TRACKING THIS SAMPLE      ▼ STICK ON **BOTTLE**



PLS0000938

◀ scan to track sample ID or S/N:

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

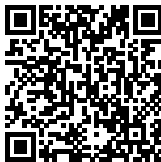


PLS0000938



ADVANCED OIL ANALYSIS SERVICES

SCAN TO COMPLETE **ON-LINE** ▶



PLS0000939

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CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

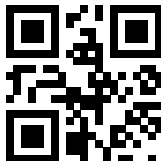
▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:  
\_\_\_\_\_

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

PLS0000939



PLS0000939



PLS0000940

SCAN TO COMPLETE **ON-LINE** ▶

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CUSTOMER CODE: **HEXFAY**

WORK ORDER NO.: \_\_\_\_\_

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

UNIT ID: \_\_\_\_\_ S/N: \_\_\_\_\_

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

- Sample From:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Circulating Oil  | <input type="checkbox"/> Gearbox           | <input type="checkbox"/> Plain Bearing    |
| <input type="checkbox"/> Hydraulic System | <input type="checkbox"/> Reduction Gear    | <input type="checkbox"/> Roller Bearing   |
| <input type="checkbox"/> Pump             | <input type="checkbox"/> Gear Extruder     | <input type="checkbox"/> Thrust Bearing   |
| <input type="checkbox"/> Blower           | <input type="checkbox"/> Rotary Compressor | <input type="checkbox"/> Genset/Generator |
| <input type="checkbox"/> Turbine          | <input type="checkbox"/> Recip. Compressor | <input type="checkbox"/> New Unused Oil   |
|   | <input type="checkbox"/> Screw Compressor  | <input type="checkbox"/> Other _____      |

FILTER: Element / Depth / Offline / None      μm RATING: \_\_\_\_\_

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

SAMPLE DATE: MM/DD/YY      CAPACITY: \_\_\_\_\_ L / Gal

TOTAL TIME ON UNIT: \_\_\_\_\_ hrs / days / mths / yrs

TIME ON OIL: \_\_\_\_\_ CHANGED: YES / NO / FILTERED

TIME ON FILTER: \_\_\_\_\_ SERVICED: YES / NO / CLEANED

Comments:

Add Tests: \_\_\_\_\_ 1000-200

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

▼ **KEEP** FOR TRACKING THIS SAMPLE

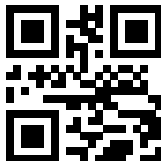
▼ STICK ON **BOTTLE**



◀ scan to track sample  
ID or S/N:  
\_\_\_\_\_

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

PLS0000940



PLS0000940