

ENERGYWISE

Use less. Spend less. Do more.

Irrigation Pump Test Form

Customer Name _____ Date _____

Daytime Phone Number _____ Customer Tax ID# _____

Electric Utility _____ Account Number _____

Pump Location (Legal Description)

Township # _____ Range # _____ Section # _____

County _____ DNR Reg. No. _____

Irrigation System Type Pivot _____ Flood _____ Other _____

System gpm _____ System psi # _____ Acres irrigated _____

Pre-Improvement
Test Values

Post-Improvement
Test Values

_____ Static Water Level (ft.) _____

_____ +
Pumping Level Drawdown (ft.) _____

_____ +
Pressure (psi) x 2.31 _____

_____ +
Friction Losses (ft.) _____

_____ =
Total Dynamic Head (ft.) _____

_____ x
Flow (gpm) _____

_____ ÷
3,960 _____

_____ =
Water horsepower output (hp) _____

_____ Voltage (v) _____

_____ x
Amperes (A) _____

_____ x
1.732 _____

_____ x
Power Factor (pf %) _____

_____ ÷
1,000 _____

_____ =
Electric demand (kW) _____

_____ x
1.341 _____

_____ ÷
motor efficiency (%) _____

_____ =
pumping horsepower input (hp) _____

water horsepower output ÷ pumping horsepower input

_____ =
Operating Plant Eff. (OPE %) _____

(> 70% = excellent, 60% to 70% = good, 50% to 60% = fair, < 50% = poor)

Average annual use: (Specify gallons, hours, acre-inches per acre) _____

Average annual utility costs (Including energy & connection/hp charges) _____

Suggested Improvements (description) _____

Estimated cost of improvements (not a binding quote) \$ _____

Estimated annual savings with improvements \$ _____

Payback on improvements (# of years) _____ yrs.

Estimated electrical demand reduction (kW) with improvements _____ kW

Actual improvements (if different from Suggested Improvements above): _____

Completed only by local utility

Incentive available if estimated electrical demand reduction is achieved: \$ _____

Utility Representative

Signature _____ Date: _____

Actual incentive provided after implementation of improvements: \$ _____

Utility Representative

Signature _____ Date: _____

Check if Pre-Installation Test Incentive applies Enter actual amount \$ _____
(up to \$350.00)

The actual incentive provided to the customer will be adjusted to reflect the actual electrical demand reduction achieved with the implementation of improvements to this irrigation system and verified by the actual kW demand value measured during the Post-Improvement Pumping Test.

Pump Testing Company (Name) _____ Pump Testing Technician (Name) _____

Testing Company Phone number _____ Signature _____

All Program Guidelines, Terms, and Conditions Apply (See local utility for copy)