Company		WELD SKETCH		Date Non Weld Pipe			
Job Name	Color		ID#	Qty	Size	Length	
		Legend					
Pipe Type		Pipe O Let					
Blk Galv			-				
		UP DOWN TOWARDS AWAY					
Drawn By		GOL T Male Outlet ∇					
Phone #							
		Direction of Flow	— All Er		ID # to 6 d GxG Unless	noted otherwise	