DEXRON® Elastomer Compatibility Test Report Form Form 1 Version

Formulation Code								
Formulati	on Code							
SID	Spons	orCode	Modification	Blend	Method ^A	Count	Lab	Bath

^AMethod = [Elastomer Type][Test Condition Designation] (e.g. FKM2A) See footnotes D and E.

Blended Sample Testing Information ^B				
Candidate Percentage Other Percentage				
Other Fluid ID				

^BIf not a Blended Sample then report 100% Candidate Percentage, 0% Other Percentage, and "None" for Blend Fluid ID.

Test Identification			
Sponsor			
Sponsor In-Hous	e Number		
Lab In-House Nu	ımber		
Alternate Code			
Test Number ^C			
Bath		Run Number	
Start Date		Start Time	
EOT Date		EOT Time	
Test Condition Designation ^D			
Elastomer Type ^E		Elastomer Batch	

^C Bath-Run Number

^DTest Condition Designation values are shown the table below:

· Co	t Condition Design	ation values are shown the table below.
	Test Condition	Description
	Designation	
	A	Run according to DEXRON HP Appendix B (Test temp. = 150 °C, Immersion time = 168 h)
	В	Run according to DEXRON VI Appendix B (Test temp. = 150 °C, Immersion time = 504 h)
	C	Run according to DEXRON HP Appendix B (Test temp. = 150 °C, Immersion time = 1008 h)
	D	Run according to DEXRON HP Appendix B (Test temp. = 125 °C, Immersion time = 168 h)

EElastomer Type = FKM2 or FKM3 or FKM5 or AEM2 or AEM3 or ACM1 or ACM2 or NBR1 or HNBR or HNBR1

	Test Validity Statement			
This test has been	This test has been conducted in a valid manner – YES or NO			
Test Laboratory				
Signature				
Typed Name				
Title				

	Test Information	
Test Length (h)	Test Temperature (°C)	

DEXRON® Elastomer Compatibility Test Pass/Fail Results Form 2

Formulation Code	
Test Number	

GM R	Reference Elastomer Number
ES –	

	GMW 18428			
Test Parameter ^E Units		Reference Oil ^E	Candidate Oil E	Pass/Fail Limits ^{F,G}
Volume Change	%			
Hardness Change	Shore-A Points			
Tensile Strength Change	%			
Elongation Change at Rupture	%			
Stress Change @ 50% Elongation	%			

Test Comments

 $^{^{}E}$ Only if required by test method. Otherwise report NA. F Data included for information purposes only and has not been verified. Review GMW 18428 to confirm the official limits. G Report limits using $^{+}$ /- >= <= or REPORT as appropriate.