



SAFE Symposium October 14-16, 2019

Y-59 QueSST





X-59 Aircraft Life Support System Integrated Test Planning, Execution, and Results



Brian Griffin

Deputy Operations Lead Low Boom Flight Demonstrator (LBFD) Project NASA Armstrong Flight Research Center, Edwards, CA



Outline



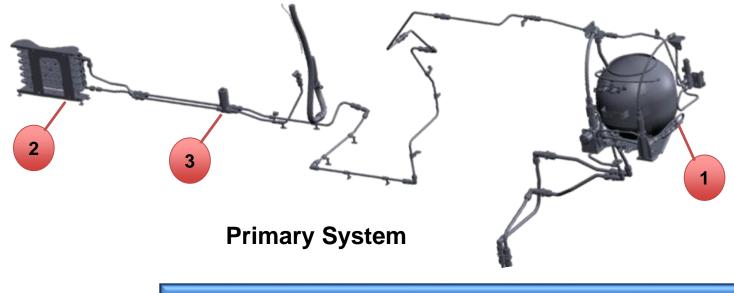
- Breathing Path Flow Analysis
- Test Planning
- Test Execution and Results
 - Test Driven Design
 - Manned Impedance
 - Manned Rapid Decompression
- Recent Emergency Oxygen System (EOS) Developments
 - Description
 - Initial Testing Results
- Summary



Breathing Path Flow Analysis

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- Objectives
 - Ensure breathing system maintains sufficient pressure upstream of the pressure reducer feeding the primary Panel Mounted Breathing Regulator (PMBR) in the X-59 designed installation configuration\
 - Ensure the fluid mechanically "equivalent" system-under-test maintains sufficient similarity to the X-59 designed installation configuration with margin.
- Two (2) independent analyzes were performed to drive "system-under-test" build



3	Pressure Reducer
2	Heat Exchanger
1	LOX Converter (10 Liter)



Breathing Path Flow Analysis



- Assumptions
 - Desired output volume flow rate (very conservative at sustained 40 liters/min breathing rate)
 - Use of conservative performance parameters (those that produce largest pressure drop along flow path)

Summary of Integrated Testing Tube Lengths

Tube Assembly	X-59 As- Designed Length (ft)	Fluid mechanically "Equivalent" Length (ft)
KBR tube 1 (LOX supply hose to LOX manifold)	0.7	1.9
KBR tube 2 (LOX manifold to Hx)	14.5	21.5
KBR tube 3 (Hx to Press Sensor Tee)	1.8	3.2
KBR tube 4 (Press Sensor Tee to Press Reducer)	1.0	1.0
KBR tube 5 (Press Reducer to BRAG)	1.3	1.7
Sum of all lengths	19.1	29.3





Test Planning



- Test Objectives
 - Validate the full X-59 and F-15 Life Support Systems (LSS) as "Safe-to-Fly"
 - Verify the X-59 LSS requirements that are applicable to the integrated testing
 - Test capacity X-59 and F-15 LSS to meet, where applicable, evaluation criteria
- Evaluation Criteria
 - Air and Space Interoperability Council (ASIC) Air Standards (AIR STDs):
 - o 1052, Minimal Protection for Aircrew Exposed to Altitude Above 50,000 Feet
 - o 4038, Physiological Evaluation of Aircraft Oxygen Delivery Systems
 - o 4039, Minimum Physiological Requirements for Aircrew Demand Breathing Systems
 - o 4083 Ed 1 v1, Methodology of Partial Pressure Suit Evaluation for High Altitude Protection
 - JSSG-2010-10, Crew Systems Oxygen Systems Handbook



Test Planning



- Plan Development
 - Collaboratively developed using Iterative process lasting a few months
 - Test Facility: KBR Space & Mission Solutions; Brooks City Base, San Antonio, TX

			KBR
	System	Primary, Emergency	Hard & Bandhard Hard &
	Breathing Rates: Peak / Avg [L/min]	17, 72, 157, 200 / 4, 22.5, 50, 75	Liama, 13 and Agend Br Mark Art Speech Ser Mitchina (1997) Mitchina (1997) Mit
	Steady Altitudes [k ft]	GL, 8, 15, 22.5	
	Rapid Decompressions [10k ft/min]	14.5 – 35, 18.5 – 44, 20 – 50, 22.5 – 60	
Breathing Regulator		PMBR, CRU-122	
	Breathing Apparatus	Breathing Machine, Live Test Subjects	
	Live Subject Workload [Watts]	Rest, 50, 100, sometimes with reading	

VERY LARGE TEST MATRIX

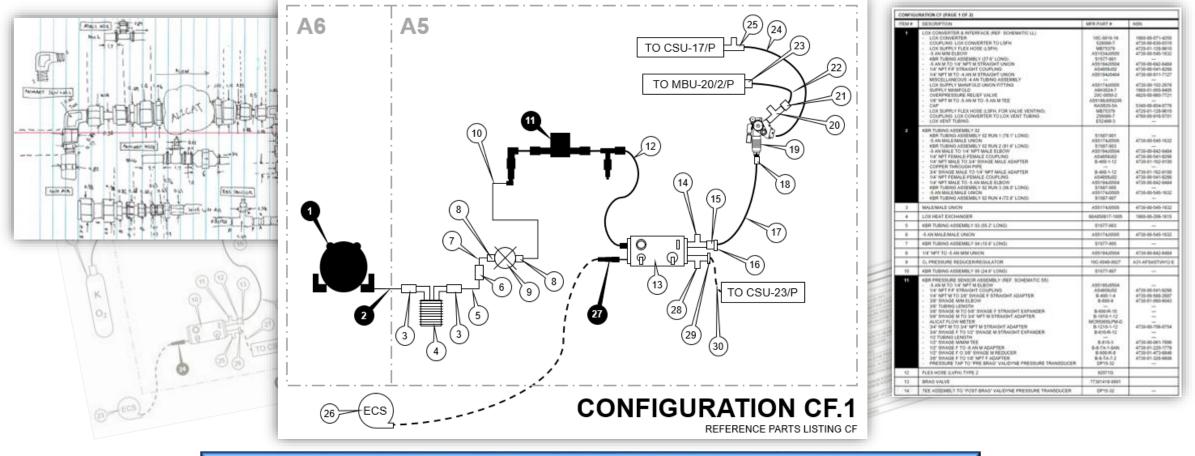
Collaborative development to ensure comprehensive test plan



Test Planning



- Test Schematic Development
 - Assisted readiness assessment
 - Assisted test setup, teardown, shipping/receiving, and as-run configuration documentation





Test Execution and Results – Test Driven Design



- Unmanned Testing: Breathing Impedance Problem Discovered
 - Systematic changes to configuration to isolate source: LOX -> Regulator -> Mask
 - Assumed source was newly introduced hardware
 - Problem was isolated to the ejection seat mounted quick disconnect check valve



Solution: Remove Check Valve from Life Support System Design

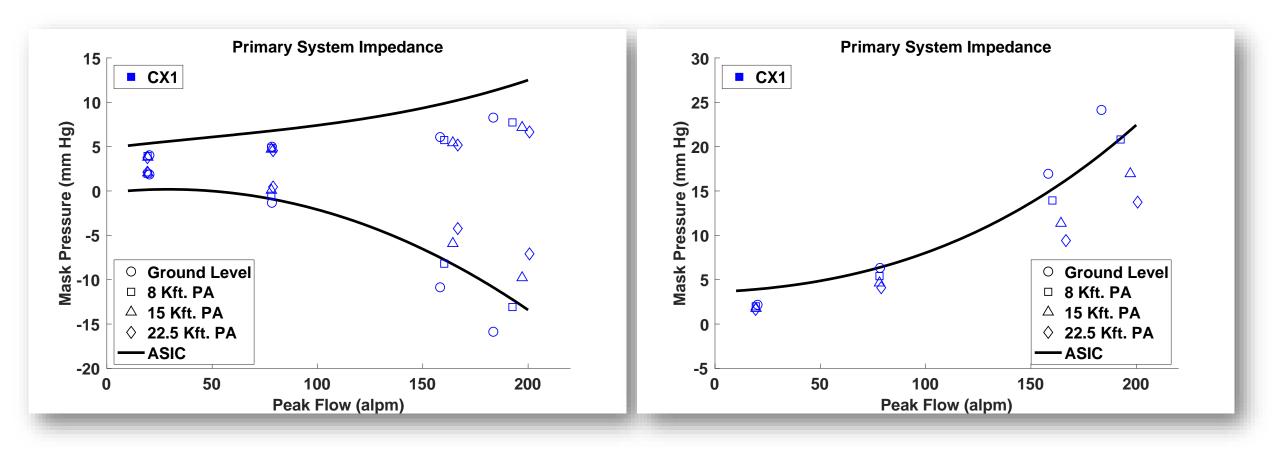
Benefits: Maintains similarity to our F-15 Chase Life Support System Design

Plots on following slides illustrate this process





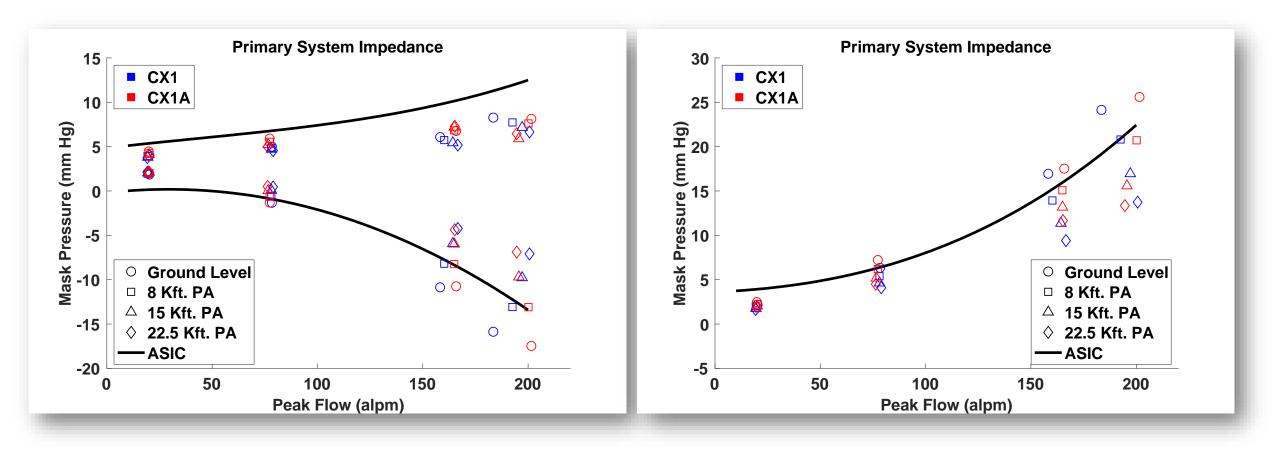
• CX.1: X-59 full system; including check valve







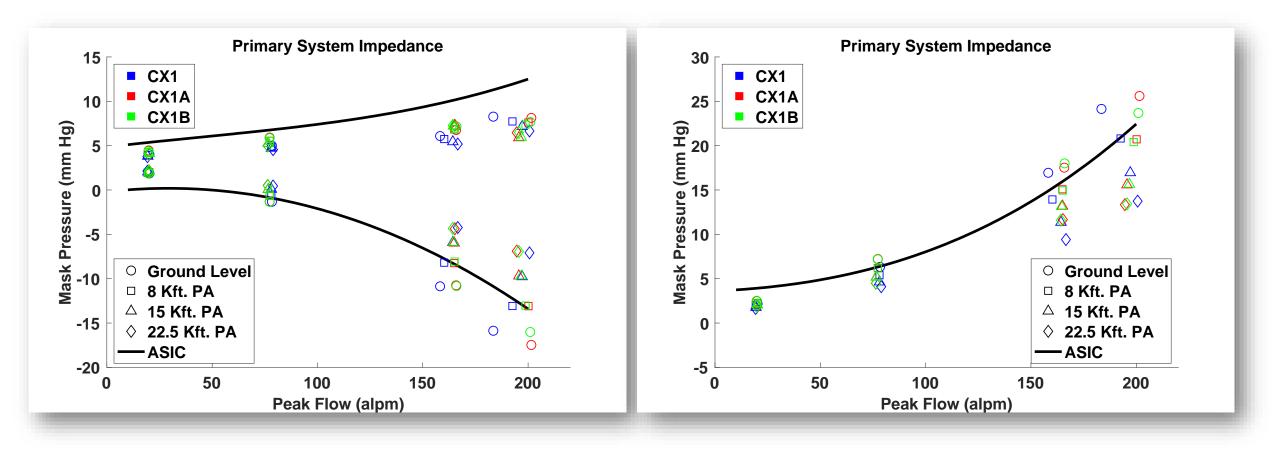
• CX.1A: X-59 full system; shorter LOX delivery line







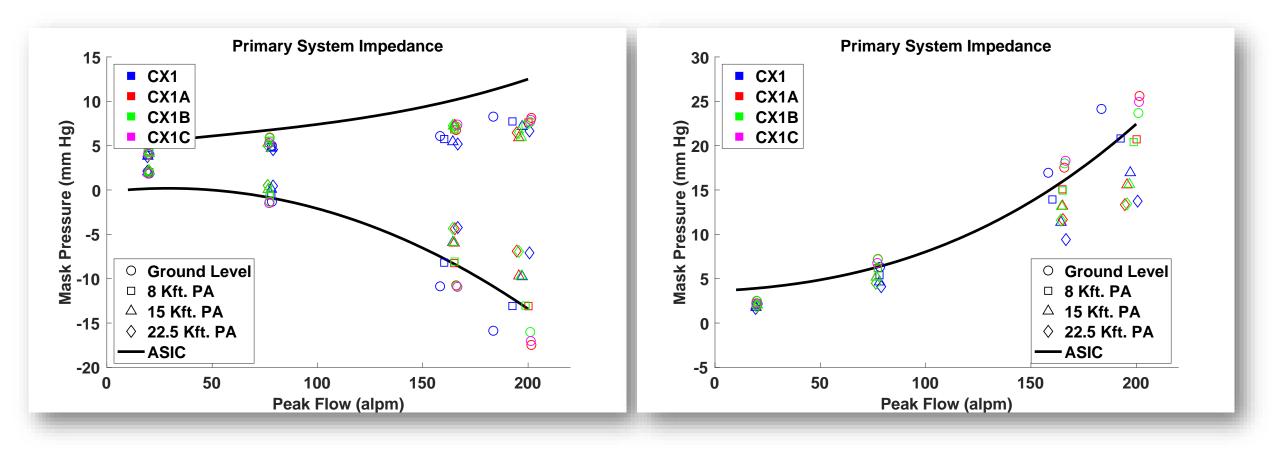
• CX.1B: X-59 full system; shorter LOX delivery line; changed heat exchanger







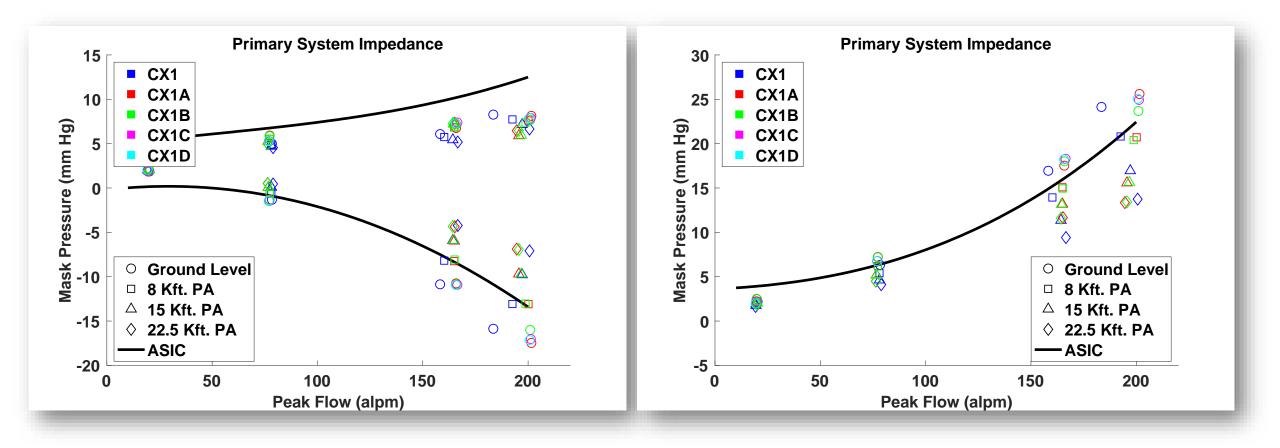
• CX.1C: X-59 full system; shorter LOX delivery line; changed heat exchanger; replaced LOX converter with K-bottle.







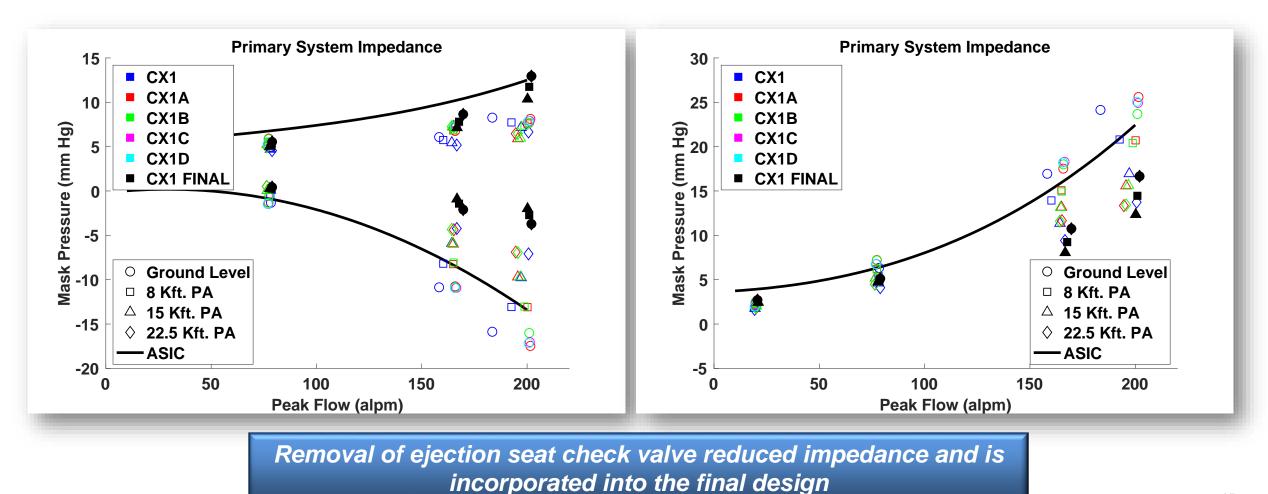
• CX.1D: X-59 full system; shorter LOX delivery line; changed heat exchanger; replaced LOX converter with K-bottle; pressure reducer removed before PMBR







• CX.1 FINAL: X-59 full system with check valve removed





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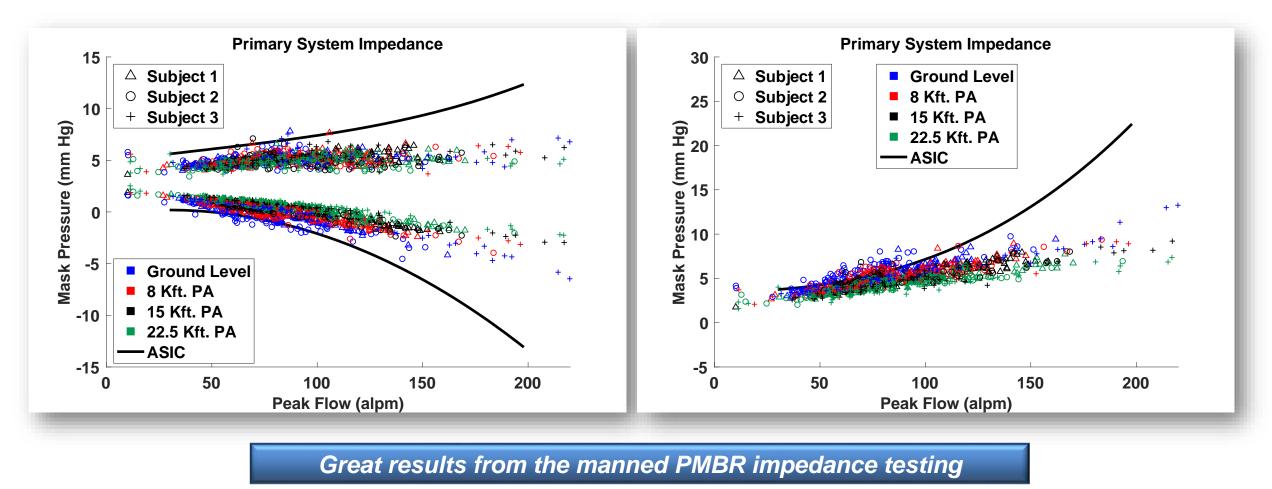
- Manned Impedance Testing
 - Primary Oxygen System (PMBR)
 - Emergency Oxygen System (EOS)
- Manned Rapid Decompression Testing
 - Primary Oxygen System (PMBR)
 - Emergency Oxygen System (EOS) (Forthcoming)

Final manned EOS testing to be performed early 2020





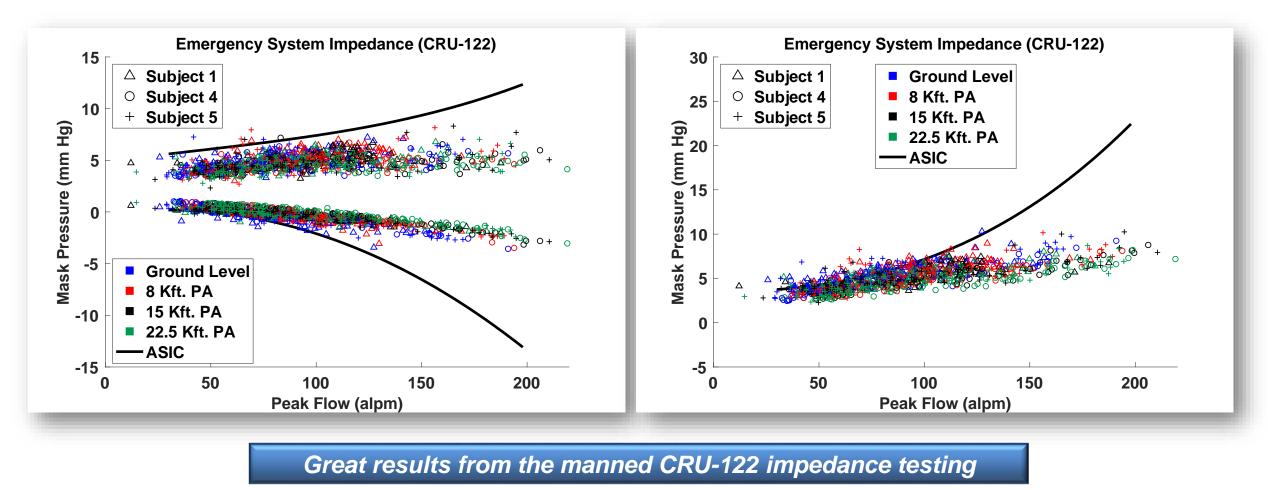
- Manned Impedance Testing
 - Primary Oxygen System (PMBR)







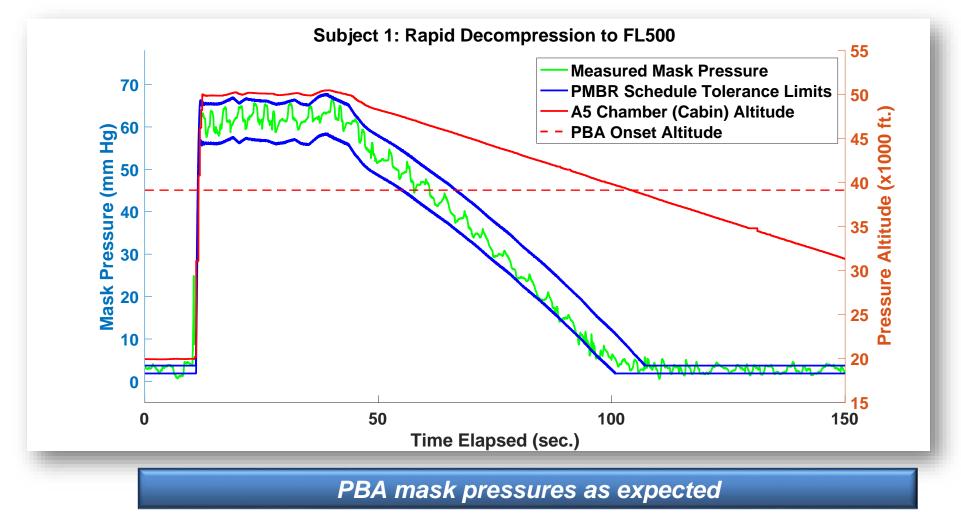
- Manned Impedance Testing
 - Emergency Oxygen System (CRU-122)







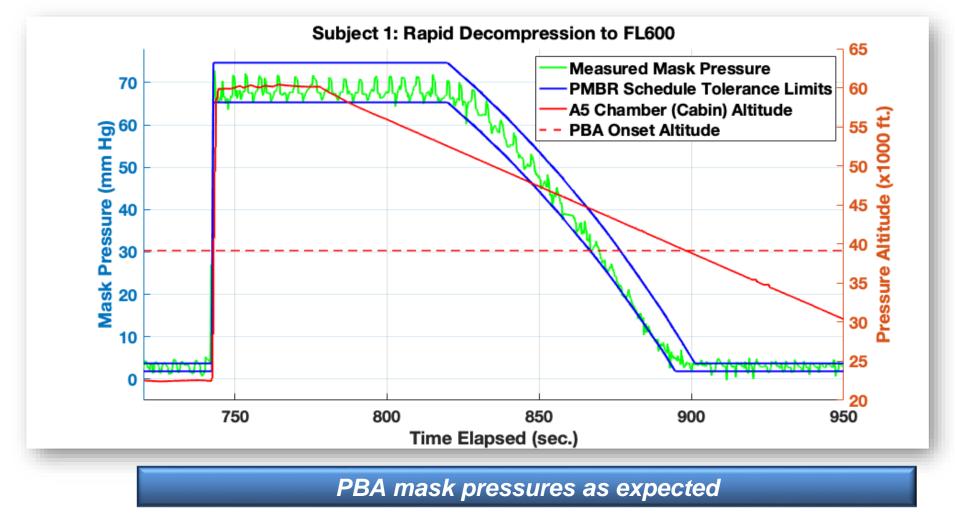
- Manned Rapid Decompression Testing
 - Time history of live subject RD from FL200 to FL500







- Manned Rapid Decompression Testing
 - Time history of live subject RD from FL225 to FL600





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T-38 Head Flow Restrictor

- System Goals & Objectives
 - O2 capacity large enough to sustain operations up to FL600
 - Provide pressures & flows required by CRU-122 RITB input
 - Minimize ejection seat modifications, to include NO change to EOS activation
- Problems during LSS integration and Bench Testing.
 - Seat mounted EOS bottle head flow restrictor throttled too much pressure (down to 1-2 psi)
 - Modifications to this head proved challenging to provide reliable performance and introduced airworthiness challenges.

Solution

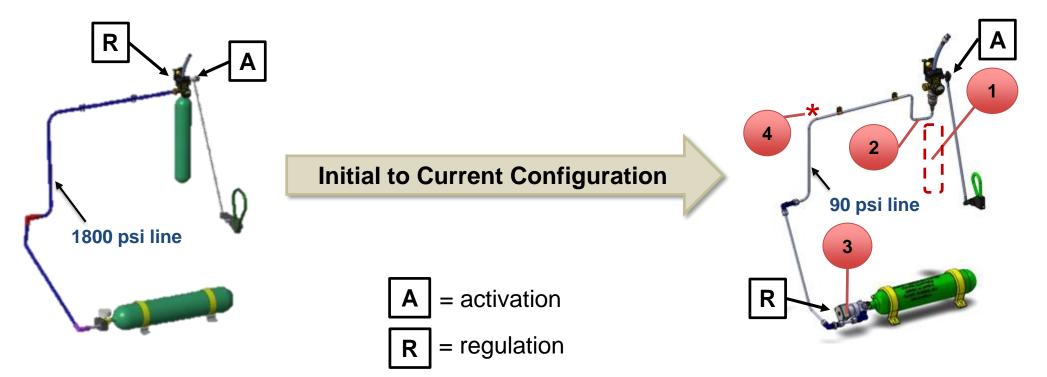
- Use a <u>Regulated</u>-EOS (REOS) head and bottle delivers very stable pressures and flowrates required for the CRU-122
- Remove flow restriction from the T-38 head activation only
- No major ejection seat modifications required

Developed a workable design without major ejection seat modifications



Recent Emergency Oxygen System (EOS) Developments





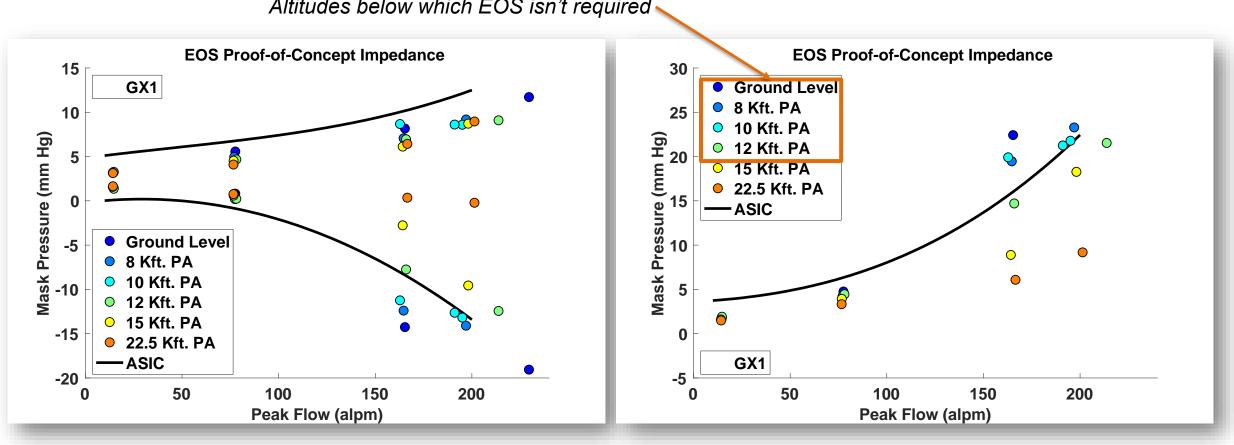
1	22.5 cu inch bottle removed, but its head (ports and activation mechanism) are retained	
2	Input from 50 cu inch bottle routed from 22.5 head's fill port to bottle source port	
3	50 cu in bottle head changed from simple valve to a Regulated EOS (REOS) head.	
4	No need for gauge to monitor 50 cu in bottle in this location.	

Meets goals and satisfied requirements, Testing underway





GX.1: EOS Proof-of-Concept initial impedance testing results



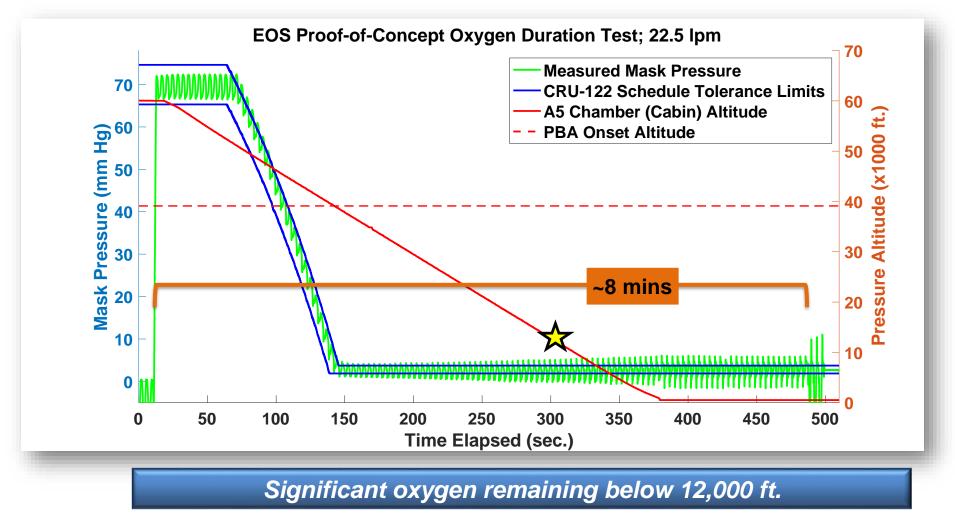
Altitudes below which EOS isn't required

Great impedance results down to altitude where EOS is not required





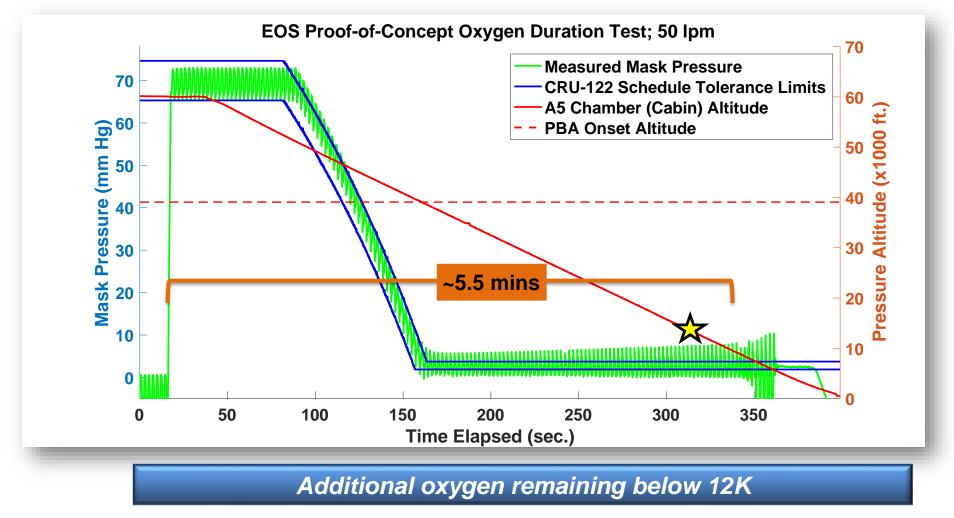
- Unmanned EOS Proof-of-Concept Oxygen Duration Testing Initial Results
 - Time history of breathing simulator; profile 2: 22.5 lpm, 10,000 fpm descent







- Unmanned EOS Proof-of-Concept Oxygen Duration Testing Initial Results
 - Time history of breathing simulator; profile 3: 50 lpm, 10,000 fpm descent





Summary



- Flow analysis completed and supported system test planning
- Primary Oxygen system has completed testing and has meet all requirements
- Emergency Oxygen System design solution found and initial proof-of-concept tests completed successfully
- Final EOS testing to be completed in early 2020

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