

PROVIDE THE FOLLOWING INFORMATION FOR EACH WELL SAMPLED

Well Name (No.): _____ Owner/Field: _____
Date Collected: _____ Collection Point: _____
Was Well idle for more than 24 hours before collection?: Yes () No ()
Sample Submitted by: _____
City/State: _____ Phone: _____
Fax: _____ Attn: _____

FOR CHEMICAL ESTIMATION:

Well Total Depth _____ Age of Well _____
Well Diameter _____ Orig. GPM _____
Borehole Diameter _____ Orig. Sp. Cap. _____
Static Water Level _____ Current GPM _____
Total Feet of Screen/Perforations _____ Current Sp. Cap. _____
Material of Construction of Screen and Casing _____
Does the well have a gravel pack? _____ size and material: _____

OTHER INFORMATION:

Has well been treated before? _____ How long ago? _____
What was used? _____
Any noticeable odors or turbidity? _____
Type of Well: _____ Potable Water Well _____ Recovery Well _____ Injection Well
_____ Remediation Well _____ Other - please specify: _____

STATEMENT OF PROBLEM:

CHECK TYPE OF ANALYSIS REQUIRED:

Complete Profile: _____ Inorganic Chemistry Only: _____
Scale/Deposit Analysis: _____ Monitoring Test: _____
Bacterial Assessment Only: _____ Other: _____

CHECK TYPE OF REPORT REQUIRED: () Complete Report with Recommendations
() Complete Report with Interpretation Only () Report Data Only

Send Report To: _____ **Bill To:** _____

Purchase Order #: _____

NOTE: Please **DO Not** add preservative to sample. Submit a minimum of 1-quart (1000 ml) in a tightly sealed plastic container. Fill completely before sealing to minimize entrapped air. Send via UPS or Fed-Ex, overnight or 2nd day is acceptable (scheduled to arrive Tuesday through Thursday).

**Ship to: Lab-Water Systems Engineering Inc.
3201 Labette Terrace
Ottawa, Kansas 66067**