CHAIN OF CUSTODY RECORD

Pg 1 of 2

ETI ENVIRONMENTAL TESTING, INC.

Oilab

SAMPLE SERIES #: 2012070471

DUE DATE: ____-____-____

COMPANY: Bachman Services

PHONE#: 405-677-8296

P.O. #:

CLIENT CONTACT: Carla Hayes

PROJECT #: / MANAGER:

SITE LOCATION: 1372 Bachman

Chayes@bachmanservices.com

SAMPLE TYPE
1. WATER
2. SOIL
3. SLUDGE
4. OIL
5. OTHER

CONTAINER TYPE
P - PLASTIC
G - GLASS
V - VOA
O - OTHER
T - TEFLON

ANALYSES

ETI SAMPLE #	CLIENT SAMPLE IDENTIFICATION	SAMPLE TYPE	CONTAINER SIZE	CONTAINER TYPE	CONTAINER #	SAMPLING DATE	SAMPLING TIME	PRESERVATIVES	8260	8270	PP Metals/Hardness	BOD/TSS	O+G	NH3						LAB COMMENTS
1	1372		40oz	G	2	07/27/12	9:59	HCl	X											
			1L	G	1			NP		X										
			250	P	1			HNO3			X									
			1L	P	1			NP				X								
			1L	G	1			HCL					X							
			250	P	1			H2SO4						X						

SAMPLE CONDITION: Rec on ice 0.8°C

E0084

SAMPLER:

FIELD PH:
TIME:
CALIB: 4 7 10
TEMP:
COND:

RELINQUISHED BY:	DATE: 07/27/12	RECEIVED BY:	DATE: 07/27/12
[signature]	TIME: 11:30	[signature]	TIME: 11:30
RELINQUISHED BY:	DATE:	RECEIVED BY:	DATE:
	TIME:		TIME:
RELINQUISHED BY:	DATE:	RECEIVED BY:	DATE:
	TIME:		TIME:

SPECIAL INSTRUCTIONS: Excess BOD

☒ RUSH DATE REQUIRED (ADDITIONAL COST MAY APPLY)

☐ REGULAR

COMMENTS:

9531473

CHAIN OF CUSTODY RECORD

PG 2 of 2

ETI ENVIRONMENTAL TESTING, INC.

Oilab

SAMPLE SERIES #: 2012070471

DUE DATE: ____-____-____

COMPANY: Bachman Services

PHONE#: 405-677-8296

P.O. #:

CLIENT CONTACT: Carla Hayes

PROJECT #: / MANAGER:

SITE LOCATION: Frac Tank FT 1617 Bachman

chayes@bachmanservices.com

SAMPLE TYPE
1. WATER
2. SOIL
3. SLUDGE
4. OIL
5. OTHER

CONTAINER TYPE
P - PLASTIC
G - GLASS
V - VOA
O - OTHER
T - TEFLON

ANALYSES

ETI SAMPLE #	CLIENT SAMPLE IDENTIFICATION	SAMPLE TYPE	CONTAINER SIZE	CONTAINER TYPE	CONTAINER #	SAMPLING DATE	SAMPLING TIME	PRESERVATIVES	8260	8270	PP Metals / Total Hardness	~~Total Hardness~~ 07/27/12	BOD/TSS	O&G	NH3					LAB COMMENTS
2	Frac Tank FT1617	1	40oz	G	2	07/27/12	11:00	HCl	X											
			1L	G	1			NP		X										
			250	P	1			HNO3			X									
			1L	P	1			NP					X							
			1L	G	1			HCL						X						
			250	P	1			H2SO4							X					

SAMPLE CONDITION: Reconice 0.8°C E0084

SAMPLER:

FIELD PH:
TIME:
CALIB: 4 7 10
TEMP:
COND:

RELINQUISHED BY:	DATE: 07/27/12	RECEIVED BY:	DATE: 07/27/12
[signature]	TIME: 11:30	[signature]	TIME: 11:30
RELINQUISHED BY:	DATE:	RECEIVED BY:	DATE:
	TIME:		TIME:
RELINQUISHED BY:	DATE:	RECEIVED BY:	DATE:
	TIME:		TIME:

SPECIAL INSTRUCTIONS:

☒ RUSH DATE REQUIRED (ADDITIONAL COST MAY APPLY) Except BOD

☐ REGULAR

COMMENTS:

Environmental Testing Inc. 488-2400

F039.007

Sample/Cooler Receipt Form

Sample Series # 2012070471

1. Were samples received on ice? YES NO NA
2. Temperature of representative sample or temperature blank 0.8 °C
3. If item (2) is 0°C or less, was the representative sample or temp blank frozen? YES NO NA
4. Did all containers arrive in good condition (unbroken)? YES NO
5. Were VOA vials received? YES NO
   a. Was there any observable headspace present in any VOA vial? YES NO NA
6. Were the correct containers used for the analysis requested? YES NO
7. Was there sufficient amount of sample to perform the requested tests in each container? YES NO
8. Were the samples received with sufficient time left to meet holding time requirements? YES NO
9. On preserved containers, did pH strips suggest preservation reached the correct pH level? YES NO NA
   (DO NOT OPEN VOA VIALS TO CHECK pH)
10. Did the containers indicate the correct preservatives were used for the requested analysis? YES NO NA
11. Were chain-of-custody forms properly filled out (conforms to ETI Sample Acceptance Policy)? YES NO
12. If samples were not in compliance, was the client notified of the nonconformity? YES Date:_____ Initial: _____
    a. If yes, does the client wish to proceed with analysis? YES NO
13. Was the client notified of the intent to subcontract work that will NOT be performed by ETI? YES Date:_____ Initial: _____

Preservative ID(s) E120025, A0019 LOT 0227101V HCL 4.0mL LOT 50267

I certify that all of the above checks were completed. (Initial) CW

I certify the project was entered into the LIMS, and a label with the unique LIMS number was attached to each container. (Initial) CW

Notes:

Report and Accompanying Data Reviewed by: _____ Date: _____