

For Laboratory Use Only	
Lab ID:	
Preservation: Yes <input type="checkbox"/>	Temperature:
Initials:	

Division of Chemistry Phone: 701-328-6140 Fax: 701-328-6280
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Surface Water Sample Identification Code R (Water samples)
Samples received without this sheet or all necessary sections fully completed will be rejected and not analyzed.

Billing Information/Analytes

Account #:	Project Code:	Project Name:	
DEQ Program:	DEQ Project #:	DEQ Cost Center #:	
DEQ Contact/DPM:			
Analysis Requested:			

Sampler Information/Sample Collection

Sampled by:	Sampler Phone #:		
Site ID/STORET#:	Co-located Site ID:		
Site Location:			
Date Collected:	Time Collected:	Collection Method: (Circle One) DI* DWI** GRAB 0-2 meter column	
Matrix: Soil Water Other (specify)	Number of Bottles:	Cooler Number:	

* Depth Integrated ** Depth/Width Integrated

Field Information/Measurements

Temp: °C	Dissolved O₂: mg/L	Sp Cond: μ	pH:
Depth: M	Stage: Ft	Discharge: CFS	Turbidity: NTU
Comment:			

Relinquished by	Date and Time	Received by	Date and Time