Groundwater Monitoring Well Chain of Custody Form

| Date/Time Collected | | | | | | | | | | |
|---------------------|------------------------|--------|----------------------|-----------|--------------|-------------------|---|-----------------------|--|----------|
| Project Name | | | | | | | | | | |
| Project Number | | | | | | | | | | |
| Client Name | | | | | | | | | | |
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| Sampled By | | | | | | | | | | |
| Location/Well No. | | | | | | | | | | |
| Lab Name | | | | | | | | | | |
| SAMPLE | INFORM | MATION | 1 | | | | | | | |
| Sample ID | Well Sampl No. Date | | ole Sample e Time | | Preservative | Container Type | | Analysis Requested | | Comments |
| | | | | | | | | | | |
| CHAIN OI | F CUST | | | Date/Time | Receive | d By | [| Date/Time | | Purpose |
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| REMARK | S: | | | | | | | | | |
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