



# Maximum Safety - Field H2S Vendor Sampling Form

Sample Type	<input type="checkbox"/> Pre-start up <input checked="" type="checkbox"/> Alarm <input type="checkbox"/> Complaint <input type="checkbox"/> Wellbore Change <input type="checkbox"/> Periodic Test			
Well / Facility Name				
API or COGCC Facility Number	Trinity 43-7 PPC			
Sampling Company	Maximum Safety			
Sampler Name	Marc Goetz			
Stand by Personnel	Joe Goetz			
Date	6-20-14			
Time	8:40 am			
Description of sample point	Casing and tubing			
Distance to nearest occupied public structure	Feet Miles .5 Direction SW			
*Distance to the nearest occupied residence, school, church, park, school bus stop, places of business or other areas where the public could be reasonably be expected to frequent				
Distance to nearest public road	Feet Miles .3 Direction SW			
*Distance to the nearest Federal, State, County, or municipal road or highway owned and principally maintained for public use				
Electronic meter last calibration date	Date 3-21-14 <input type="checkbox"/> N/A			
If flowing (MCFD)		If not flowing (static), H2S reading 50 (ft.) from the source (ppm)	0 ppm	
Gas Meter				
Meter Number	PPM	Status	Type of sample	
		<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube	
		<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube	
		<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube	
		<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube	
Well Head				
Well Number	PPM	Status	Type of sample	Location
43-7	98.1	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input checked="" type="checkbox"/> Meter <input type="checkbox"/> Tube	<input type="checkbox"/> Tubing <input checked="" type="checkbox"/> Casing
43-7	N/P	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input checked="" type="checkbox"/> Meter <input type="checkbox"/> Tube	<input checked="" type="checkbox"/> Tubing <input type="checkbox"/> Casing
		<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube	<input type="checkbox"/> Tubing <input type="checkbox"/> Casing
		<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube	<input type="checkbox"/> Tubing <input type="checkbox"/> Casing
		<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube	<input type="checkbox"/> Tubing <input type="checkbox"/> Casing
		<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube	<input type="checkbox"/> Tubing <input type="checkbox"/> Casing
Storage Tank				
Tank Number	PPM	Type	Status	Type of sample
		<input type="checkbox"/> Oil <input type="checkbox"/> Water	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
		<input type="checkbox"/> Oil <input type="checkbox"/> Water	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
		<input type="checkbox"/> Oil <input type="checkbox"/> Water	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
Separator/ Treater				
Separator Number	PPM	Type	Status	Type of sample
		<input type="checkbox"/> Main <input type="checkbox"/> Test	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
		<input type="checkbox"/> Main <input type="checkbox"/> Test	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
		<input type="checkbox"/> Main <input type="checkbox"/> Test	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
		<input type="checkbox"/> Main <input type="checkbox"/> Test	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
		<input type="checkbox"/> Main <input type="checkbox"/> Test	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
		<input type="checkbox"/> Main <input type="checkbox"/> Test	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
		<input type="checkbox"/> Main <input type="checkbox"/> Test	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
		<input type="checkbox"/> Main <input type="checkbox"/> Test	<input type="checkbox"/> Flowing <input type="checkbox"/> Static	<input type="checkbox"/> Canister/Bag <input type="checkbox"/> Meter <input type="checkbox"/> Tube
Signature of Sampler	Marc R. Goetz			
Comments	Tubing no pressure			