Company Name/Address:
ECMC
1120 Lincoln St. Suite 801
Denver, CO 80203

Billing Information:
Same

Report to: Laurel Anderson + Nikki Graber

Email To: laurel.anderson@state.co.us
nikki.graber@state.co.us

Project Description:
Johnson 1 Flowline (IKPK)

City/State Collected: Frederick, CO

Please Circle: PT (MT) CT ET

Phone: 970-404-9911

Client Project #: Spill ID # 485936

Lab Project #

Collected by (print): Laurel Anderson + Nikki Graber

Site/Facility ID #: 446598

P.O. #: 2021*056

Collected by (signature):

Immediately Packed on Ice N ___ Y X

Rush? (Lab MUST Be Notified)
___ Same Day ___ Five Day
X Next Day ___ 5 Day (Rad Only)
___ Two Day ___ 10 Day (Rad Only)
___ Three Day

Quote #

Date Results Needed

Pres Chk

Analysis / Container / Preservative

Sample ID	Comp/Grab	Matrix*	Depth	Date	Time	No. of Cntrs	BTEX, Naphthalene, 1,2,4-TMB, 1,3,5-TMB SW8260	Total Dissolved Solids	Chloride Ion	Sulfate Ion	Remarks	Sample # (lab only)
Excavation	Grab	SW	16:10	7.22.24	Surface	4	X	X	X	X	Rush	-01
Outside Excavation	Grab	SW	1625	7.22.24	Surface	3	X				Rush	-02
Outside Fence	Grab	SW	1635	7.22.24	Surface	3	X				Rush	-03

Chain of Custody Page 1 of 1

Pace
PEOPLE ADVANCING SCIENCE

12065 Lebanon Rd Mount Juliet, TN 37122
Phone: 615-758-5858 Alt: 800-767-5859

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at: https://info.pacelabs.com/hubfs/pas-standard-terms.pdf

SDG # L1759607

H064

Table #

Acctnum:

Template:

Prelogin:

PM:

PB:

Shipped Via:

* Matrix:
SS - Soil AIR - Air F - Filter
GW - Groundwater B - Bioassay
WW - WasteWater
DW - Drinking Water
OT - Other SW (Surface Water)

Remarks:

pH ___ Temp ___
Flow ___ Other ___

Samples returned via:
__ UPS __ FedEx __ Courier __ ___

Tracking # 4047 5439 9834

Sample Receipt Checklist
COC Seal Present/Intact: NP __Y __N
COC Signed/Accurate: X Y __N
Bottles arrive intact: X Y __N
Correct bottles used: X Y __N
Sufficient volume sent: X Y __N
If Applicable
VOA Zero Headspace: X Y __N
Preservation Correct/Checked: __Y __N
RAD Screen <0.5 mR/hr: X Y __N

Relinquished by: (Signature)	Date:	Time:	Received by: (Signature)	Trip Blank Received: Yes / No HCL / MeoH TBR	
	7/23/2024	10:30			
Relinquished by: (Signature)	Date:	Time:	Received by: (Signature)	Temp: 6.0A°C 2.4+0.3=2.7	Bottles Received: 10
	7/23/24	15:40			
Relinquished by: (Signature)	Date:	Time:	Received for lab by: (Signature)	Date:	Time:
	7-23-24	18:00	Fedex Evelyn Orozco	7/24/24	09:00

If preservation required by Login: Date/Time

Hold:

Condition: NCF / (OK)