

P O BOX 356, (209) 586-3400
TWIN HARTE, CA 95383

GENERAL MINERAL & PHYSICAL & INORGANIC ANALYSIS (9/99)

Date of Report: 03/03/27

Sample ID No.

Laboratory

Signature Lab

Name:

Director: _____

Name of Sampler:

Employed By:

Date/Time Sample

Date/Time Sample

Date Analyses

Collected: / / /

Received @ Lab: / / /

Completed: / /

System

System

Name: ODD FELLOWS SIERRA REC ASSOC

Number: 5510016

Name or Number of Sample Source: WELL 04 - ABANDONED

* User ID: AGE

Station Number: 5510016-005 *

* Date/Time of Sample: | | | | |

Laboratory Code: *

* YY MM DD TTTT

YY MM DD *

* Date Analysis completed: | | | | *

* Submitted by: _____ Phone #: _____ *
