

FIGURE 1 - FIELD INFORMATION FORM
 (Health Protection Zone Water Quality Data
 Collection)

Sample ID:	Sample Date/Time:
Sample Type/Purpose (i.e., Groundwater, Surface Water, Other):	Oilfield/Operator Name:
Drinking Water (Y/N):	
Service Company Name/Personnel:	Lease/Facility Name/API (if applicable):
Sample Collection Company Name/Personnel:	Others Present:
DESCRIBE THE SAMPLE POINT OR WELL TO BE SAMPLED (attach a map, photo, or well diagram if necessary):	
Location Data (Lat / Long Coordinates):	
Location Collection Device (online mapping tool, smart phone app, consumer GPS, etc):	
Survey Datum:	
DESCRIBE ANY WELL OR SAMPLE POINT MODIFICATIONS MADE IN PREPARATION FOR SAMPLING:	
RECORD ANY PRE-SAMPLE PURGING AND PURGE MONITORING ACTIVITIES (if applicable)	
Well Depth:	
Well Type:	
Static Water Level:	
Pumping Rate:	

RECORD THE FINAL FIELD WATER QUALITY MONITORING RESULTS (include units of measure)				
Electrical Conductivity:	Temp:	pH:	Dissolved Oxygen:	Other:
Water Quality Meter Type/Model No:			Date Meter Calibrated:	
Sample appearance or odor:				
Obvious contamination Issues:			Decontamination activities performed:	
Laboratory performing the analyses:				
Field Observations: (e.g., weather conditions, site activities, equipment malfunctions)				