

## Underground Storage Tank Management Division Field Data Information Sheet – Sampling

Site Information												
Date:	Site ID #:		Site N	Site Name:				Field Personnel:				
County:	Project Ma	nager:	'	General Weather Conditions:			'		Ambient Air Temp (°F):			
Quality Assurance												
Meter Name			Serial #: Calibration:									
YSI 63 (pH, Specific Conductivity, Temperature)					pH 4.0: Y or N		pH 7.0: Y or N		pH 10.0: Y or N		S.C.: Y or N	
YSI 55 (Dissolved Oxygen)			Y or N									
LaMotte (Turbidity)				1 0.0				1.0 NTU: Y or N		10.0 N	10.0 NTU: Y or N	
Well Information												
Well ID: Well Diameter (ft.):			Conversion Factor (C): 1" well = 0.047, 2" well = 0.652					16,	Method of Purging/Sample Collection:BailerPump			
MWIWR Private WSWPr	Screened Interval (ft.): to						Total Well Depth (TWD) (ft.):					
Depth to Free Product (DFP) (ft.):			Depth to Groundwater (DGW) (ft.):					Free I	Free Product Thickness (ft.):			
			g volume		3 casing volumes 3*CV)(gals):			1	5 casing volumes (5*CV)(gals):			
(LWC=TWD-DGW)(ft.): (CV=LWC*C)(gals): 3*CV)(gals): (5*CV)(gals):   Purging Data												
	1 <sup>st</sup> Vol.	2 <sup>nd</sup> Vol.			4 <sup>th</sup> Vol.	5 <sup>th</sup> Vol. Post S		Sampling				
Valuma Durgad (gallana)		Initial	1 701.	2 W VOI.	3 (	701.	4" VOI.	- 5	··· VOI.	FUSI	Sampling	
Volume Purged (gallons)												
Time (military)												
PH (s.u.)												
Specific Conductivity (µS/cm)												
Water Temperature (°C)												
Turbidity (NTU)												
Dissolved Oxygen (mg/L)												
Sampling Data												
Sampled By: Sampling T			Sampling Time	g Time: Duplicate: Y or			: Y or N	or N If yes, Duplicate Time:				
Notes:												
[ <del></del>												
Signature:												

## -UST Field Data Information Sheet - Sampling

- -Purpose of the form is to record information gathered during a well sampling event
- -DHEC UST Project Managers and Field Staff
- -Item-by-item instructions for completing the form:

Fill in all Site Information boxes

Record applicable calibration information in the Quality Assurance boxes

Fill in applicable Well Information boxes

If purging is necessary, record Purging Data boxes

Record Sampling Data

Record any applicable notes

Sign the form

-Form is scanned and saved electronically; Record Group Number 169, Retention Schedule 10304