

Hazardous Materials Laboratory Section

SAVE SAMPLE(S) REQUEST FORM

HML# _____ to _____

Save samples until _____
(date)

Do not save samples _____

Reason for saving samples: _____

(Phone #) (Signature of Collector) (Date)

If HMLS does not receive a completed "Save Sample(s) Request", the samples will be disposed 60 days from the date of the final analytical report.

Return completed form to: California Department of Health Services
Hazardous Materials Laboratory Section (HMLS)
2151 Berkeley Way
Room 235
Berkeley, CA 94704

LABORATORY REPORT
Purgeable Halocarbons

Junal

Collector's Name LARRY SEPO Date Received _____
 Sampling Location DUPERLY Collector's Sample # LS10057P to
10057 TESLA RD LIVERMORE CA 94550 LS10057A

Analytical Procedure: Direct Purge and Trap method followed by GC/Coulson Detector.

Solids: ug/g

Liquids: ug/mL

HML #	C721	C722	C723	Detection Limit/ Units (ug/g)
Collector's Sample #	LS10057P	LS10045	LS10057A	
Chloromethane	-	-	-	2.0
Bromomethane	-	-	-	2.0
Vinyl chloride	-	-	-	1.0
Chloroethane	-	-	-	1.0
Methylene chloride	-	-	-	0.5
1,1-Dichloroethene	-	-	-	0.5
1,1-Dichloroethane	-	-	-	0.5
trans 1,2 Dichloroethene	-	-	-	0.5
Chloroform	-	-	-	0.2
1,2-Dichloroethane	-	-	-	0.5
1,1,1-Trichloroethane	-	-	-	0.5
Carbon tetrachloride	-	-	-	0.5
Bromo-dichloromethane	-	-	-	1
1,2-Dichloropropane	-	-	-	1
cis-1,3 Dichloropropene	-	-	-	1
Trichloroethylene	-	-	-	0.5
Dibromochloromethane	-	-	-	0.5
1,1,2-Trichloroethane	-	-	-	0.5
trans-1,3 Dichloropropene	-	-	-	0.5
2-Chloroethyl vinyl ether	-	-	-	2.0
Bromoform	-	-	-	5.0
1,1,2,2-Tetrachloroethane	-	-	-	1.0
Tetrachloroethylene	-	-	-	0.5
Chlorobenzene	-	-	-	2.0

Note: (-) = Not detected
(blank) = Not determined

Analyst's Signature

Neelam Dhoot

(Date)

Signature of Supervising Chemist

Jannal Garcia

12/26/86

(Date)

HAZARDOUS MATERIALS SAMPLE ANALYSIS REQUEST

PRIORITY (Explain) OK by EK

HML No. C721
TO
C723

PART I: FIELD SECTION

Collector LARRY Seto Date Sampled 8/30/86 10/29/86 10/31/86 Time _____ Hours _____
Activity: Enforcement ASP H.W. Property Super Other

LOCATION OF SAMPLING: Name Duperly Tel. No. _____
Address 10057 Tesla Rd Livermore Ca 94550
Number Street City Zip

HML No. (Lab Only)	Collector's Sample No.	Type Of Sample*	FIELD INFORMATION
<u>C721</u>	<u>LS10057P</u>	<u>Liq.</u>	<u>from drug lab waste pit</u>
<u>C722</u>	<u>LS10045</u>	<u>Water</u>	<u>Water from possible affected well</u>
<u>C723</u>	<u>LS10057A</u>	<u>Water</u>	<u>Water from possible affected well</u>

Analysis Requested: Methylene Chloride

Chain of Custody:	Signature	Title	Inclusive Dates
1.	<u>[Signature]</u>	<u>Haz Mat Spec.</u>	<u>8-30-86</u> <u>10-31-86</u>
2.	<u>[Signature]</u>	<u>PH chemist II</u>	<u>10/31/86</u> <u>10/31/86</u>
3.	<u>[Signature]</u>	<u>LAB ASSY</u>	<u>10/31/86</u> _____
4.	_____	_____	_____

Special Remarks Please send results to Larry Seto Cal. Co 874-7237
(e.g., duplicate sample given to company, etc.)

PART II: LABORATORY SECTION

Received By Tom U Title PHC II Date 10-31-86
Sample Allocation: HML SCBL LBL Other
Analysis Required Methylene Chloride

*Indicate whether sample is sludge, soil, etc. Orig.—Lab. Dup.—File Trip.—Inspector

HAZARDOUS MATERIALS SAMPLE ANALYSIS REQUEST

PRIORITY

(Explain) _____

HML No. _____ To _____

PART I: FIELD SECTION

Collector LARRY SETO Date Sampled 8/30/86 10/29/86 10/31/86 Hours _____
Activity: Enforcement ASP H.W. Property Super Other

LOCATION OF SAMPLING:

Name Duperly Tel. No. _____
Address 10057 Tesla Rd Livermore Ca 94550
Number Street City Zip

HML No. (Lab Only)	Collector's Sample No.	Type Of Sample*	FIELD INFORMATION
	<u>LS10057F</u>	<u>Liq.</u>	<u>from drug lab waste pit</u>
	<u>LS10045</u>	<u>WATER</u>	<u>water from possible affected well</u>
	<u>LS10057A</u>	<u>WATER</u>	<u>water from possible affected well</u>

Analysis Requested: Methylene Chloride

Chain of Custody:

1.	<u>[Signature]</u>	<u>[Title]</u>	<u>10-31-86</u>
2.	<u>[Signature]</u>	<u>[Title]</u>	<u>[Inclusive Dates]</u>
3.	<u>[Signature]</u>	<u>[Title]</u>	<u>[Inclusive Dates]</u>
4.	<u>[Signature]</u>	<u>[Title]</u>	<u>[Inclusive Dates]</u>

Special Remarks From used canister to Larry Seto 10/26/86 874-7437
(e.g., duplicate sample given to company, etc.)

PART II: LABORATORY SECTION

Received By _____ Title _____ Date _____
Sample Allocation: HML SCBL LBL Other _____ Date _____

Analysis Required _____

* Indicate whether sample is sludge, soil, etc. Orig.—Lab. Dup.—File Trip.—Inspector

TO		<i>L. Suto</i>		ROOM/STA. NO.
FROM		<i>HmC</i>		ROOM/STA. NO.
REPRESENTING				
DATE	TIME	PHONE		
<i>1/2/87</i>		ATSS <input type="checkbox"/>		
<input type="checkbox"/> Telephoned	<input type="checkbox"/> Please Call	<input type="checkbox"/> Was In		
<input type="checkbox"/> Returned Call	<input type="checkbox"/> Will Call Again	<input type="checkbox"/> Wants To See You		
<input type="checkbox"/> Information	Note and	Reply		
<input type="checkbox"/> Comment	<input type="checkbox"/> Re-route	<input type="checkbox"/> My Signature		
<input type="checkbox"/> Investigate	<input type="checkbox"/> Return	<input type="checkbox"/> Copy Me		
<input type="checkbox"/> Contact Me	<input type="checkbox"/> File	<input type="checkbox"/> Forwarded Per Request		

MESSAGE/REMARKS

BY 