SAMPLE LIST FOR SOIL MECHANICS LABORATORY

State: _____ County: _____

Site Name: _____

Project Type: _____ Fund / Program: _____

(repair, new dam, AWHP, etc.) (WF-08, WRHB, EQIP, etc)

Contact Person: _____ Phone: _____

E-Mail: _____

Testing Facility		To Be Filled in by Originating Office			
Laboratory Number	Sample Weight	Field Number	Description of Location	Depth (in Feet)	Size (small bag, bucket, etc.)

Testing Requested:

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