

Sample Location: _____

Reporting Period (Year): _____

Description	Reference Value (mg/L)	Reporting Limit (mg/L)*	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter
Name of NV Certified Lab		---				
Lab Reference #		---				
Sample Date		---				
Lab Test Date		---				
Sampled By		---				
Water Elevation (ft amsl)		---				
Well Collar Elevation (ft amsl)		---				
Alkalinity, Bicarbonate (as CaCO ₃)	NA					
Alkalinity, Total (as CaCO ₃)	NA					
Aluminum	0.2					
Antimony	0.006					
Arsenic	0.010					
Barium	2.0					
Beryllium	0.004					
Cadmium	0.005					
Calcium	NA					
Chloride	400					
Chromium	0.1					
Copper	1.0					
Fluoride	4.0					
Iron	0.6					
Lead	0.015					
Magnesium	150					
Manganese	0.10					
Mercury	0.002					
Nitrate + Nitrite (as N)	10					
Nitrogen, Total (as N)	10					
pH (±0.1 SU)	6.5 - 8.5					
Potassium	NA					
Selenium	0.05					
Silver	0.1					
Sodium	NA					
Sulfate	500					
Thallium	0.002					
Total Dissolved Solids	1000					
Uranium	0.01					
WAD Cyanide	0.2					
Zinc	5.0					

Notes: Metal parameters shall be analyzed for the dissolved fraction. All other parameters shall be analyzed using the procedures outlined in their respective NDEP approved methods. Analyses must be performed by a NDEP certified laboratory.

* Current reporting period

Version: 20210824