



Sample Receipt Confirmation

Report Distribution:

Company Name: EDI ENVIRONMENTAL DYNAMICS INC.

Contact: Lyndsay Doetzel
Address: 2195 - 2nd Ave,
Whitehorse, YT, Y1A 3T8

Phone: 867-393-4882
Fax: --

Email: ldoetzel@edynamics.com
emilie.hamm@gov.yk.ca
erik.pit@gov.yk.ca

EDD Email: --

Distribution: Hard Copy: N Email: Y Fax: N EDD: N

Invoice Distribution:

Acct Name: EDI ENVIRONMENTAL DYNAMICS INC.

Contact: Accounts Payable
Address: 2195 2nd Avenue,
Whitehorse, YT, Y1A 3T8

Phone: 867-393-4882

Fax: 867-393-4883

Invoice Email: sjenner@edynamics.com
ldoetzel@edynamics.com

Project #: N/A

Account #: EDI100

Client Information:

Job Reference #: MOUNT NANSEN 16-Y-0089

Project PO #:

Legal Site Description: N/A

Quote #: Q55559

Date Sampled: 03-OCT-16

Date Received: 06-OCT-16

Sampled By: GR AM

Chain Of Custody: --

Workorder Summary:

Lab Work Order #: L1840282

Estimated completion date: 18-OCT-16

20 Samples received at ALS in VANCOUVER

Note: There are sample integrity issues with your samples submitted. Please see Sample Integrity Observations below for more details.

Client Job #: MOUNT NANSEN 16-Y-0089

Account Manager: Shane Ramos

Estimated sample disposal date: See Sample Disposal Information section below.

Lab Sample ID	Client Sample ID	Date Sampled	Date Received	Sample Due Date	Priority Flag	Sample Type
L1840282-1	WQ-VC-UMN	03-OCT-16 15:15	06-OCT-16 14:40	18-OCT-16		Water
L1840282-2	WQ-VC-R	03-OCT-16 14:30	06-OCT-16 14:40	18-OCT-16		Water
L1840282-3	WQ-VC-DBC	04-OCT-16 16:45	06-OCT-16 14:40	18-OCT-16		Water
L1840282-4	WQ-BC	04-OCT-16 18:30	06-OCT-16 14:40	18-OCT-16		Water
L1840282-5	WQ-VC-U	04-OCT-16 18:10	06-OCT-16 14:40	18-OCT-16		Water
L1840282-6	WQ-TP	04-OCT-16 12:15	06-OCT-16 14:40	18-OCT-16		Water
L1840282-7	WQ-PW	05-OCT-16 09:30	06-OCT-16 14:40	14-OCT-16		Water
L1840282-8	WQ-PC-U	04-OCT-16 09:40	06-OCT-16 14:40	18-OCT-16		Water
L1840282-9	WQ-PC-D	04-OCT-16 09:00	06-OCT-16 14:40	18-OCT-16		Water
L1840282-10	WQ-PC-D-R	04-OCT-16 09:10	06-OCT-16 14:40	18-OCT-16		Water
L1840282-11	WQ-DC-R	03-OCT-16 16:40	06-OCT-16 14:40	18-OCT-16		Water
L1840282-12	FIELD BLANK	05-OCT-16 08:50	06-OCT-16 14:40	18-OCT-16		Water
L1840282-13	TRAVEL BLANK	05-OCT-16 00:00	06-OCT-16 14:40	18-OCT-16		Water
L1840282-14	WQ-SEEP-LC50	04-OCT-16 11:30	06-OCT-16 14:40	17-OCT-16		Water
L1840282-15	WQ-SEEP	04-OCT-16 11:30	06-OCT-16 14:40	18-OCT-16		Water
L1840282-16	WQ-SEEP-R	04-OCT-16 11:40	06-OCT-16 14:40	18-OCT-16		Water
L1840282-17	WQ-DC-DX+105	03-OCT-16 18:25	06-OCT-16 14:40	18-OCT-16		Water
L1840282-18	WQ-DC-D16	03-OCT-16 19:25	06-OCT-16 14:40	18-OCT-16		Water
L1840282-19	WQ-DC-B	04-OCT-16 12:40	06-OCT-16 14:40	18-OCT-16		Water
L1840282-20	WQ-DC-U	04-OCT-16 10:55	06-OCT-16 14:40	18-OCT-16		Water



Analysis Requested :

	Alkalinity Species by Titration	Anions by Ion Chromatography Cyanate	Thiocyanate by Colour	Total Cyanide in water by CFA	Weak Acid Diss. Cyanide in water by CFA	E.coli and Total by Colilert [Health]	Conductivity [Automated]	Drinking Water Full Package	Ion Balance Calculation	Dissolved Metals in Water + Hg [BC MDG]	Total Metals in Water + Hg [BC MDG]	Ammonia in Water by Fluorescence	pH by Meter [Automated]	Total Dissolved Solids by Gravimetric	Trout Bioassay LC50 [96 Hour] - Nautilus	Total Suspended Solids by Gravimetric	Hold
WQ-VC-UMN	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-VC-R	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-VC-DBC	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-BC	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-VC-U	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-TP	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-PW						✓		✓									
WQ-PC-U	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-PC-D	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-PC-D-R	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-DC-R	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
FIELD BLANK	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
TRAVEL BLANK	✓	✓		✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	✓
WQ-SEEP-LC50															✓		
WQ-SEEP	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-SEEP-R	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-DC-DX+105	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-DC-D16	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-DC-B	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	
WQ-DC-U	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓			✓	



Analysis Requested :

Hold	Hold	Sample Handling and Disposal Fee

WQ-VC-UMN			✓
WQ-VC-R			✓
WQ-VC-DBC			✓
WQ-BC			✓
WQ-VC-U			✓
WQ-TP			✓
WQ-PW			✓
WQ-PC-U			✓
WQ-PC-D			✓
WQ-PC-D-R			✓
WQ-DC-R			✓
FIELD BLANK			✓
TRAVEL BLANK	✓	✓	✓
WQ-SEEP-LC50			✓
WQ-SEEP			✓
WQ-SEEP-R			✓
WQ-DC-DX+105			✓
WQ-DC-D16			✓
WQ-DC-B			✓
WQ-DC-U			✓

Hold Time Exceedences: The following samples have exceeded recommended holding times prior to sample receipt.

Analysis Requested	Lab Sample ID	Recommended Hold Time	Date Sampled	Date Received
Nitrate in Water by IC (Low Level)	L1840282-2	3 days	03-OCT-16	06-OCT-16
Nitrite in Water by IC (Low Level)	L1840282-2	3 days	03-OCT-16	06-OCT-16
pH by Meter (Automated)	L1840282-1, 2, 11, 17, 18	0.25 hours	03-OCT-16	06-OCT-16
pH by Meter (Automated)	L1840282-3, 4, 5, 6, 8, 9, 10, 15, 16, 19, 20	0.25 hours	04-OCT-16	06-OCT-16
pH by Meter (Automated)	L1840282-7, 12, 13	0.25 hours	05-OCT-16	06-OCT-16



Sample Integrity Observations:

Observation

Samples listed on COC but not received

Details

No Total Metals bottle received for sample "WQ-PW". A sub sample will be taken from 500ml plastic bottle provided.

Client submitted one bottle for cyanide and cyanate analysis for sample "Travel Blank". Sample will be labeled for cyanide and cyanate analysis will be deleted.

Metals bottle and Hg vial received for sample "Travel Blank" but did not indicate if it is for total or dissolved. Both bottles will be placed on hold and a sub sample will be taken from the 500ml bottle as a replacement.

Notice of Sub-contract Laboratory Service

Please be advised that the following tests will be subcontracted to the corresponding laboratory:

Cyanate subcontracted to: ALS ENVIRONMENTAL - WATERLOO, ONTARIO, CANADA
Trout Bioassay LC50 (96 Hour) - Nautilus subcontracted to: NAUTILUS ENVIRONMENTAL

Please contact your Account Manager immediately should you have questions or concerns regarding this arrangement. Approval of this arrangement shall be implied unless otherwise notified by you.

Sample Disposal Information:

Where possible, ALS will store samples for 30 days from the date a final report is issued, or 30 days from the date samples are placed on hold without analytical requests, after which samples may be discarded. Air samples collected on re-usable media are an exception, and are stored for 7 days from the date a final report is issued. Longer storage times are available upon request.

For information about ALS accreditations and certifications please contact your Account Manager or visit our webpage at www.alsglobal.com (see Canada downloads).

ALS Group strives to deliver on-time results to our clients at all times. However, there are times when due to capacity issues or other unforeseen circumstances we are unable to meet our expected turnaround times. The information above is related to a recent workorder you have submitted to our laboratory. In the event that you have an inquiry, please refer to the Lab Work Order # when calling your Account Manager.

ALS Group appreciates your business. Thank you for the opportunity to work with you.



Report To		Report Format / Distribution		Select Service Level Below (Rush Turnaround Time (TAT) is not available for all tests)	
Company:	EDI	Select Report Format:	<input checked="" type="checkbox"/> PDF <input checked="" type="checkbox"/> EXCEL <input type="checkbox"/> EDD (DIGITAL)	R <input checked="" type="checkbox"/> Regular (Standard TAT if received by 3 pm - business days)	
Contact:	Lyndsay Doetzel	Quality Control (QC) Report with Report	<input type="checkbox"/> Yes <input type="checkbox"/> No	P <input type="checkbox"/> Priority (2-4 bus. days if received by 3pm) 50% surcharge - contact ALS to confirm TAT	
Address:	2195 - 2nd Avenue Whitehorse, YT Y1A 3T8	<input type="checkbox"/> Criteria on Report - provide details below if box checked		E <input type="checkbox"/> Emergency (1-2 bus. days if received by 3pm) 100% surcharge - contact ALS to confirm TAT	
Phone:	867-393-4882	Select Distribution:	<input checked="" type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> FAX	E2 <input type="checkbox"/> Same day or weekend emergency - contact ALS to confirm TAT and surcharge	
		Email 1 or Fax:	ldoetzel@edynamics.com	Specify Date Required for E2, E or P:	
		Email 2:	Emilie.Hamm@gov.yk.ca		
		Email 3:	erik.pit@gov.yk.ca		

Invoice To		Invoice Distribution		Analysis Request											
Same as Report To <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Select Invoice Distribution: <input checked="" type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> FAX		Indicate Filtered (F), Preserved (P) or Filtered and Preserved (F/P) below											
Copy of Invoice with Report <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Email 1 or Fax: sienner@edynamics.com													
Company: EDI		Email 2: ldoetzel@edynamics.com													
Contact: S Jenner		Project Information													
ALS Quote #: Q55559		Oil and Gas Required Fields (client use)													
Job #: MOUNT NANSEN 16-Y-0089		Approver ID:													
PO / AFE:		GL Account:													
LSD:		Routing Code:													
		Activity Code:													
		Location:													

ALS Lab Work Order # (lab use only)	ALS Contact: Craig Flaherty	Sampler: GR M
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ALS Sample # (lab use only)	Sample Identification and/or Coordinates (This description will appear on the report)	Date (dd-mmm-yy)	Time (hh:mm)	Sample Type	ALK-PCT-VA	EC-PCT-VA	PH-PCT-VA	ANIONS-ALL-IC-WR	TSS-MAN-WR	CN-WAD-CFA-VA	CN-T-CFA-VA	CN-CNO-WT	CN-SCN-VA	NHG-F-VA	MET-T-BCMDG-VA	MET-D-BCMDG-VA	IONBALANC-VA	TDS-CALC-VA	Number of Containers
	WA-VC-UMN	3 -Oct-16	15:15	Water	R	R	R	R	R	R	R	R	R	R	R	R	R	R	9
	WA-VC-R	3 -Oct-16	14:30	Water	R	R	R	R	R	R	R	R	R	R	R	R	R	R	9
	WQ-VC-DBC	4 -Oct-16	16:45	Water	R	R	R	R	R	R	R	R	R	R	R	R	R	R	9
	WB-BC	4 -Oct-16	18:30	Water	R	R	R	R	R	R	R	R	R	R	R	R	R	R	9
	WA-VC-U	4 -Oct-16	18:10	Water	R	R	R	R	R	R	R	R	R	R	R	R	R	R	9
	WQ-TP	4 -Oct-16	12:15	Water	R	R	R	R	R	R	R	R	R	R	R	R	R	R	9
		-Oct-16		Water	R	R	R	R	R	R	R	R	R	R	R	R	R	R	9

Short Holding Time
Rush Processing

Drinking Water (DW) Samples¹ (client use)		Special Instructions / Specify Criteria to add on report (client Use)		SAMPLE CONDITION AS RECEIVED (lab use only)											
Are samples taken from a Regulated DW System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Frozen: <input type="checkbox"/> SIF Observations: Yes <input type="checkbox"/> No <input type="checkbox"/>											
Are samples for human drinking water use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Ice packs: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Custody seal intact: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>											
				Cooling initiated: <input type="checkbox"/>											
				INITIAL COOLER TEMPERATURES °C: 11.0 FINAL COOLER TEMPERATURES °C: 11.0											

SHIPMENT RELEASE (client use)			INITIAL SHIPMENT RECEPTION (lab use only)			FINAL SHIPMENT RECEPTION (lab use only)		
Released by:	Date:	Time:	Received by:	Date:	Time:	Received by:	Date:	Time:
ALEX. MISCHLER	05-OCT-16	13:55	[Signature]	2016 5071	14:06	[Signature]	2016 11	14:40



Report To		Report Format / Distribution			Select Service Level Below (Rush Turnaround Time (TAT) is not available for all tests)						
Company:	EDI	Select Report Format: <input checked="" type="checkbox"/> PDF <input checked="" type="checkbox"/> EXCEL <input type="checkbox"/> EDD (DIGITAL)			R <input checked="" type="checkbox"/> Regular (Standard TAT if received by 3 pm - business days)						
Contact:	Lyndsay Doetzel	Quality Control (QC) Report with Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			P <input type="checkbox"/> Priority (2-4 bus. days if received by 3pm) 50% surcharge - contact ALS to confirm TAT						
Address:	2195 - 2nd Avenue Whitehorse, YT Y1A 3T8	<input type="checkbox"/> Criteria on Report - provide details below if box checked			E <input type="checkbox"/> Emergency (1-2 bus. days if received by 3pm) 100% surcharge - contact ALS to confirm TAT						
Phone:	867-393-4882	Select Distribution: <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> FAX			E2 <input type="checkbox"/> Same day or weekend emergency - contact ALS to confirm TAT and surcharge						
		Email 1 or Fax: ldoetzel@edynamics.com			Specify Date Required for E2,E or P:						
		Email 2: Emille.Hamm@gov.yk.ca									
		Email 3: erik.pit@gov.yk.ca									
Invoice To		Invoice Distribution			Analysis Request						
Same as Report To	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Select Invoice Distribution: <input checked="" type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> FAX			Indicate Filtered (F), Preserved (P) or Filtered and Preserved (F/P) below						
Copy of Invoice with Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Email 1 or Fax: sienner@edynamics.com			Number of Containers						
Company:	EDI	Email 2: ldoetzel@edynamics.com									
Contact:	S Jenner	Oil and Gas Required Fields (client use)									
Project Information		Approver ID:	Cost Center:	FULL-TOT-DW-WR							
ALS Quote #:	Q55556	GL Account:	Routing Code:								
Job #:	MOUNT NANSEN 16-Y-0089	Activity Code:									
PO / AFE:		Location:									
LSD:											
ALS Lab Work Order # (lab use only)		ALS Contact:	Craig Flaherty	Sampler:	AM GR						
ALS Sample # (lab use only)	Sample Identification and/or Coordinates (This description will appear on the report)	Date (dd-mmm-yy)	Time (hh:mm)	Sample Type							
	WQ-PW	05 - Oct-16	09:30	Water							
Drinking Water (DW) Samples¹ (client use)		Special Instructions / Specify Criteria to add on report (client use)			SAMPLE CONDITION AS RECEIVED (lab use only)						
Are samples taken from a Regulated DW System?					Frozen <input type="checkbox"/> SIF Observations <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>						
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					Ice packs Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Custody seal intact <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>						
Are samples for human drinking water use?					Cooling Initiated <input type="checkbox"/>						
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					INITIAL COOLER TEMPERATURES °C: [] FINAL COOLER TEMPERATURES °C: []						
					7.10 [] [] [] [] [] [] [] [] [] []						
SHIPMENT RELEASE (client use)		INITIAL SHIPMENT RECEPTION (lab use only)			FINAL SHIPMENT RECEPTION (lab use only)						
Released by:	Date:	Time:	Received by:	Date:	Time:	Received by:				Date:	Time:
ALEX. MISCHLER	05-OCT-16	13:55	[Signature]	05-OCT-16	14:00	[Signature]				05-OCT-16	14:40



L1840282-COFC

Report To		Report Format / Distribution			Select Service Level Below (Rush Turnaround Time (TAT) is not available for all tests)												
Company:	EDI	Select Report Format:	<input checked="" type="checkbox"/> PDF	<input checked="" type="checkbox"/> EXCEL	<input type="checkbox"/> EDD (DIGITAL)	R <input checked="" type="checkbox"/> Regular (Standard TAT if received by 3pm - business days) P <input type="checkbox"/> Priority (2-4 bus. days if received by 3pm) 50% surcharge - contact ALS to confirm TAT E <input type="checkbox"/> Emergency (1-2 bus. days if received by 3pm) 100% surcharge - contact ALS to confirm TAT E2 <input type="checkbox"/> Same day or weekend emergency - contact ALS to confirm TAT and surcharge											
Contact:	Lyndsay Doetzel	Quality Control (QC) Report with Report	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Specify Date Required for E2,E or P:												
Address:	2195 - 2nd Avenue Whitehorse, YT Y1A 3T8	<input type="checkbox"/> Criteria on Report - provide details below if box checked															
Phone:	867-393-4882	Select Distribution:	<input checked="" type="checkbox"/> EMAIL	<input type="checkbox"/> MAIL	<input type="checkbox"/> FAX												
		Email 1 or Fax:	doetzel@edynamics.com														
		Email 2:	Emilie.Hamm@gov.yk.ca														
		Email 3:	erik.pit@gov.yk.ca														
Invoice To		Invoice Distribution			Analysis Request												
Same as Report To	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Select Invoice Distribution:	<input checked="" type="checkbox"/> EMAIL	<input type="checkbox"/> MAIL	<input type="checkbox"/> FAX	Indicate Filtered (F), Preserved (P) or Filtered and Preserved (F/P) below											
Copy of Invoice with Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Email 1 or Fax:	sjenner@edynamics.com														
Company:	EDI	Email 2:	doetzel@edynamics.com														
Contact:	S Jenner	Oil and Gas Required Fields (client use)															
Project Information		Approver ID:															
ALS Quote #:	Q55559	GL Account:															
Job #:	MOUNT NANSEN 16-Y-0089	Routing Code:															
PO / AFE:		Activity Code:															
LSD:		Location:															
ALS Lab Work Order # (lab use only)		ALS Contact:	Craig Flaherty			Sampler:			GR AM								
ALS Sample # (lab use only)	Sample Identification and/or Coordinates (This description will appear on the report)	Date (dd-mmm-yy)	Time (hh:mm)	Sample Type	ALK-PCT-VA	ANIONS-ALL-IC-WR	CN-WAD-CFA-VA	CN-CNO-WT	CN-SCN-VA	NH3-F-VA	MET-T-BCMDG-VA	MET-D-BCMDG-VA	IONBAL-ANC-VA	TDS-CALC-VA	Number of Containers		
	WQ-PC-U	4 -Oct-16	9:40	Water	R	R	R	R	R	R	R	R	R	R	9		
	WQ-PC-D	4 -Oct-16	9:00	Water	R	R	R	R	R	R	R	R	R	R	9		
	WQ-PC-D-R	4 -Oct-16	9:10	Water	R	R	R	R	R	R	R	R	R	R	9		
	WQ-PC-R	3 -Oct-16	16:40	Water	R	R	R	R	R	R	R	R	R	R	9		
	FIELD BLANK	5 -Oct-16	8:50	Water	R	R	R	R	R	R	R	R	R	R	9		
	TRAVEL BLANK	5 -Oct-16		Water	R	R	R	R	R	R	R	R	R	R	9		
		-Oct-16		Water	R	R	R	R	R	R	R	R	R	R	9		
<div style="border: 2px solid black; padding: 10px; background-color: black; color: white; font-weight: bold; font-size: 1.2em;"> Short Holding Time Rush Processing </div>																	
Drinking Water (DW) Samples ¹ (client use)		Special Instructions / Specify Criteria to add on report (client use)															
Are samples taken from a Regulated DW System?		SAMPLE CONDITION AS RECEIVED (lab use only) Frozen <input type="checkbox"/> SIF Observations ² Yes <input type="checkbox"/> No <input type="checkbox"/> Ice packs Yes <input type="checkbox"/> No <input type="checkbox"/> Custody seal intact Yes <input type="checkbox"/> No <input type="checkbox"/> Cooling initiated <input type="checkbox"/>															
Are samples for human drinking water use?		INITIAL COOLER TEMPERATURES °C: <input type="text"/> FINAL COOLER TEMPERATURES °C: <input type="text"/> 7.0 10.0 10.0 10.0 10.0 10.0 10.0 10.0 10.0 10.0 10.0 10.0 10.0 10.0 10.0															
SHIPMENT RELEASE (client use)		INITIAL SHIPMENT RECEPTION (lab use only)				FINAL SHIPMENT RECEPTION (lab use only)											
Released by:	Date:	Time:	Received by:	Date:	Time:	Received by:	Date:	Time:									
ALEX. MISCHLER	05-Oct-16	13:55	[Signature]	05-Oct-16	14:30	[Signature]	05-Oct-16	14:40									



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Chain of Custody (COC) / Analytical Request Form

Canada Toll Free: 1 800 668 9878



L1840282-COFC

COC Number: 14 -

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Report To Company: EDI Contact: Lyndsay Doetzel Address: 2195 - 2nd Avenue Whitehorse, YT Y1A 3T8 Phone: 867-393-4882		Report Format / Distribution Select Report Format: <input checked="" type="checkbox"/> PDF <input checked="" type="checkbox"/> EXCEL <input type="checkbox"/> EDD (DIGITAL) Quality Control (QC) Report with Report <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Criteria on Report - provide details below if box checked Select Distribution: <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> FAX Email 1 or Fax: ldoetzel@edynamics.com Email 2: erk.pit@gov.yk.ca Email 3: Emille.Hamm@gov.yk.ca		Select Service Level Below (Rush Turnaround Time (TAT) is not available for all tests) R <input checked="" type="checkbox"/> Regular (Standard TAT if received by 3 pm - business days) P <input type="checkbox"/> Priority (2-4 bus. days if received by 3pm) 50% surcharge - contact ALS to confirm TAT E <input type="checkbox"/> Emergency (1-2 bus. days if received by 3pm) 100% surcharge - contact ALS to confirm TAT E2 <input type="checkbox"/> Same day or weekend emergency - contact ALS to confirm TAT and surcharge Specify Date Required for E2, E or P:	
Invoice To Same as Report To <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Copy of Invoice with Report <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Company: EDI Contact: S Jenner		Invoice Distribution Select Invoice Distribution: <input checked="" type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> FAX Email 1 or Fax: sjenner@edynamics.com Email 2: ldoetzel@edynamics.com		Analysis Request Indicate Filtered (F), Preserved (P) or Filtered and Preserved (F/P) below	
Project Information ALS Quote #: Q55559 Job #: MOUNT NANSEN 16Y0089 PO / AFE: LSD:		Oil and Gas Required Fields (client use) Approver ID: Cost Center: GL Account: Routing Code: Activity Code: Location:		Rainbow Trout LC50 Number of Containers	
ALS Lab Work Order # (lab use only)		ALS Contact: Sean Stuppert (RAID FLAHERTY) Sampler: GR AM			
ALS Sample # (lab use only)	Sample Identification and/or Coordinates (This description will appear on the report)	Date (dd-mmm-yy)	Time (hh:mm)	Sample Type	
	1650 (WQ SEEP) WQ-SEEP-LC50	4-Oct-16	11:30	Water	R 2
Drinking Water (DW) Samples (client use) Are samples taken from a Regulated DW System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Are samples for human drinking water use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Special Instructions / Specify Criteria to add on report (client Use)		SAMPLE CONDITION AS RECEIVED (lab use only) Frozen <input type="checkbox"/> SIF Observations <input type="checkbox"/> Yes <input type="checkbox"/> No Ice packs Yes <input type="checkbox"/> No <input type="checkbox"/> Custody seal intact Yes <input type="checkbox"/> No Cooling Initiated <input type="checkbox"/>	
SHIPMENT RELEASE (client use)		INITIAL SHIPMENT RECEPTION (lab use only)		FINAL SHIPMENT RECEPTION (lab use only)	
Released by: ALEX. MISCHLER Date: 05-OCT-16 Time: 13:55	Received by: [Signature] Date: 2016 5 OCT Time: 14:00	Received by: [Signature] Date: 05 OCT 16 Time: 14:40			



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Chain of Custody (COC) / Analytical Request Form

Canada Toll Free: 1 800 668 9878



L1840282-COFC

COC Number: 14 -

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Report To		Report Format / Distribution		Select Service Level Below (Rush Turnaround Time (TAT) Is not available for all tests)							
Company:	EDI	Select Report Format:	<input checked="" type="checkbox"/> PDF <input checked="" type="checkbox"/> EXCEL <input type="checkbox"/> EDD (DIGITAL)	R <input checked="" type="checkbox"/> Regular (Standard TAT if received by 3 pm - business days) P <input type="checkbox"/> Priority (2-4 bus. days if received by 3pm) 50% surcharge - contact ALS to confirm TAT E <input type="checkbox"/> Emergency (1-2 bus. days if received by 3pm) 100% surcharge - contact ALS to confirm TAT E2 <input type="checkbox"/> Same day or weekend emergency - contact ALS to confirm TAT and surcharge							
Contact:	Lyndsay Doetzel	Quality Control (QC) Report with Report	<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify Date Required for E2, E or P:							
Address:	2195 - 2nd Avenue Whitehorse, YT Y1A 3T8	<input type="checkbox"/> Criteria on Report - provide details below if box checked									
Phone:	867-393-4882	Select Distribution:	<input checked="" type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> FAX								
		Email 1 or Fax	ldoetzel@edynamics.com								
		Email 2	Emilie.Hamm@gov.yk.ca								
		Email 3	erik.pit@gov.yk.ca								

Invoice To		Invoice Distribution		Indicate Filtered (F), Preserved (P) or Filtered and Preserved (F/P) below													
Same as Report To	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Select Invoice Distribution:	<input checked="" type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> FAX														
Copy of Invoice with Report	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Email 1 or Fax	sienner@edynamics.com														
Company:	EDI	Email 2	ldoetzel@edynamics.com														
Contact:	S Jenner	Oil and Gas Required Fields (client use)															
Project Information		Approver ID:	Cost Center:														
ALS Quote #:	Q55559	GL Account:	Routing Code:														
Job #:	MOUNT NANSEN 16-Y-0089	Activity Code:															
PO / AFE:		Location:															
LSD:		ALS Contact:	Craig Flaherty	Sampler:	AM GR												

ALS Sample # (lab use only)	Sample Identification and/or Coordinates (This description will appear on the report)	Date (dd-mmm-yy)	Time (hh:mm)	Sample Type	ALK-PCT-VA, EC-PCT-VA, PH-PCT-VA	ANIONS-ALL-IC-WR, TSS-MAN-WR	CN-WAD-CFA-VA, CN-T-CFA-VA	CN-CNO-WT	CN-SCN-VA	NH3-F-VA	MET-T-BCMDG-VA	MET-D-BCMDG-VA	IONBALANC-VA, TDS-CALC-VA	Number of Containers
	WA - SEEP	04 -Oct-16	11:30	Water	R	R	R	R	R	R	R	R	R	9
	WA - SEEP - R	04 -Oct-16	11:40	Water	R	R	R	R	R	R	R	R	R	9
	WA - DC - DX + 105	03 -Oct-16	18:25	Water	R	R	R	R	R	R	R	R	R	9
	WA - DC - D1b	3 -Oct-16	19:25	Water	R	R	R	R	R	R	R	R	R	9
	WA - DC - B	4 -Oct-16	12:40	Water	R	R	R	R	R	R	R	R	R	9
	WA - DC - U	4 -Oct-16	10:55	Water	R	R	R	R	R	R	R	R	R	9
		-Oct-16		Water	R	R	R	R	R	R	R	R	R	9

**Short Holding Time
Rush Processing**

Drinking Water (DW) Samples¹ (client use)		Special Instructions / Specify Criteria to add on report (client Use)		SAMPLE CONDITION AS RECEIVED (lab use only)													
Are samples taken from a Regulated DW System? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Frozen <input type="checkbox"/> SIF Observations <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Ice packs <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Custody seal intact <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Cooling Initiated <input type="checkbox"/>													
Are samples for human drinking water use? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				INITIAL COOLER TEMPERATURES °C: 7.5 FINAL COOLER TEMPERATURES °C: 4.10/NA													
SHIPMENT RELEASE (client use)		INITIAL SHIPMENT RECEPTION (lab use only)		FINAL SHIPMENT RECEPTION (lab use only)													
Released by:	ALEX MISCHLER	Date:	05-oct-16	Time:	13:55	Received by:	[Signature]	Date:	2016 05 OCT	Time:	14:06	Received by:	[Signature]	Date:	05/16	Time:	14:40