Water & Environmental Analysis Lab
UW-Stevens Point, College of Natural Resources
Phone (715)346-3209 or Toll Free (877)383-8378
www.uwsp.edu/cnr-ap/weal

Center for Watershed Science and Education
College of Natural Resources
University of Wisconsin-Stevens Point

Extension
UNIVERSITY OF WISCONSIN-MADISON

Instructions:

- Sample your water the same day it is brought back to the drop-off site.
- Step-by-step directions for collecting your water sample(s) are on the back of this form.
- Fill out this sheet as completely as possible, if you do not know an answer to a question leave that section blank.
- ****You must fill in the sampling date and time or we will not be able to analyze for bacteria.****

WELL INFORMATION:

WI Unique Well Number* (*if known*)

_____

(*This is a 5 or 6 digit code that is assigned to wells, mostly those installed after 1988. Ex.: SP298 or 8SP298)

Well Address_____

City_____

State_____Zip_____

County_____

Town_____

Year well installed_____

Casing Diameter: (*check one*)

☐ 3" or less ☐ 4-9" ☐ 10-18" ☐ 18+"

Total well depth _____ft

Depth of casing _____ ft

Depth to water _____ft

SOURCE:

(complete only if not a private well)

☐ Municipal ☐ Spring

☐ Other_____

TREATMENT SYSTEM(s) OWNED:

(*check all that apply*)

☐ Water softener ☐ Reverse Osmosis

☐ Carbon filter ☐ Neutralizer

☐ Particle filter ☐ Iron filter

☐ Other _____

PROBLEMS OBSERVED:

(*check all that apply*)

☐ Color ☐ Taste ☐ Odor

☐ Corrosion ☐ Health ☐ None

☐ Other _____

LAST DATE TESTED: (*check one*)

☐ Never ☐ Unknown

☐ Less than 1 year ☐ 1-2 years

☐ 2-5 years ☐ 5-10 years

☐ Greater than 10 years

REASON FOR TESTING:

☐ Curious about water quality

☐ Suspect water quality problems

☐ Regularly test my well

☐ Required by lending institution

☐ Retest of positive bacteria test

☐ Retest following well disinfection

☐ Infant/pregnant woman or daycare

☐ Other_____

MAIL RESULT TO:

Last Name_____

First Name_____

Address_____

City_____

State_____Zip_____

Phone (_____)_____

Email (optional):

_____

This section to be filled in at time of sample collection

SAMPLE(s) COLLECTED

Date* _____

Time* _____

(Date and Time are REQUIRED)*

SAMPLE(s) TAKEN FROM:

(*if more than one sample check all that apply*)

☐ Pressure tank

☐ Kitchen faucet

☐ Bathroom faucet

☐ Outside faucet

☐ Barn

☐ Other_____

Lab Number_____

For office use only: Date Received: _____

Samples Requested: Homeowner Package ☐ Metals Package ☐ DACT Screen ☐ Comprehensive (HOP,Metals,DACT) ☐

Sampling Protocol for Drinking Water Testing



Video instructions available at:
https://youtu.be/eqEF3y9Y5iY

Your water test results will be most accurate if you collect the samples following the procedure below. **COLLECT YOUR SAMPLES ON THE DESIGNATED DAY ONLY! Samples more than 40 hours old when they reach the lab cannot be accurately analyzed for bacteria.**

IF YOU ARE TAKING MORE THAN ONE TYPE OF SAMPLE COLLECT IN THE FOLLOWING ORDER:

1. METALS PACKAGE

The Metals Package bottle has a blue cap and red tape around the cover. ***Ideally this sample should be taken first thing in the morning, before any water is run.***
CAUTION: This bottle contains a small drop of an acid which acts as a preservative. DO NOT rinse the bottle or you will lose the preservative.

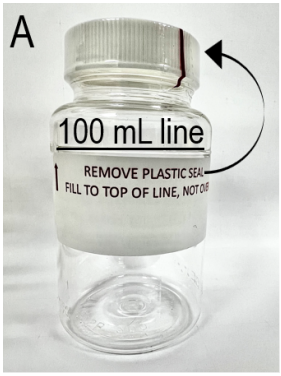


- **Choose a faucet in your home which supplies most of your drinking water.**
- Turn the faucet on and adjust to a trickle.
- Allow water to run for 5-10 seconds then fill the Metals Package bottle to within ¼ inch from the top. DO NOT ALLOW TO OVERFLOW. Avoid splashing when you are filling the bottle. *If you splash preservative on your skin, rinse affected area for 5 minutes under cold water.*
- Replace cap tightly, dry the bottle, and reattach red tape around cover.

2. HOMEOWNERS PACKAGE

The Homeowners Package will require that you fill two bottles.

- **<u>Choose a faucet where water is not softened or otherwise treated</u> (ideally a non-swivel metal faucet).**
- Remove any faucet screens, aerators, or other attachments.
- Wash your hands thoroughly with soap and water.
- Run water on high **for at least 10 minutes, 15 minutes is better** *(the goal is to sample water from the well so you may want to let water run until you hear the well pump turn on or until water gets as cold as it can).*
- Slow the water stream down until it is about the width of a pencil.



Bottle A (Bacteria):

- Remove and dispose of **clear plastic seal** from Bottle A.
- Carefully remove cap. Do not let fingers or anything else touch inside of bottle or inside of cap. *Do not rinse.*
- ***Fill bottle to 100 mL line,*** then replace cap making sure that it's on securely.



Bottle B:

- Carefully remove the cover of Bottle B.
- ***Fill the bottle to within ½ inch from the top*** and replace cap making sure it's on securely.

3. DIAMINOCHLOROTRIAZINE (DACT) SAMPLE

The DACT sample bottle is cylindrical and has a blue or purple cap.



- **<u>Choose a faucet where water is not softened or otherwise treated</u>.**
- Run water for 5 minutes.
- *Rinse* the plastic sample container 3 times with water from the tap.
- ***Fill the bottle to within ½ inch from the top***, and replace cap making sure that it is on securely.

QUESTIONS OR ADDITIONAL COMMENTS. Do you have particular questions about groundwater or drinking water quality that you would like more information on?

Disclaimer: The analyses run on your sample only cover some of the more common water quality characteristics. Safe levels of these chemicals or bacteria do not guarantee that your water is free of all toxic chemicals. If you suspect gasoline residues, pesticides, or other trace chemicals you would need to request additional analyses.

Rev. 2023