

| | | | |
|-------------------------|------------------------------|------------------------|-------------------------|
| Form Number LLCF-051 | Issue Date 01/01/11 | Revision Date 06/15/23 | Form Number LLCF-051 |
| | NORM Chain of Custody | | |

| | | | | | |
|-------------------|-------------------|-----------------|--|------------------------------|-------------------|
| Location: | Fourchon facility | Project: | | Job No.: | |
| Collector: | Ed Hamlett | Date: | | Special Instructions: | 3 Hour Turnaround |

| Lab Information | | | | | | | | | |
|-------------------------|----------------------------------|------------------|-----------------------|-------------------|--|------------------------|--|-------------|--|
| Lab: | American Radiation Services | Address: | 2607 North River Road | | | Phone: | 225-381-2991 | Fax: | |
| Contact: | | Due Date: | | Lab Notes: | | | | | |
| Invoice Sent To: | PO Box 820 – Galliano, LA, 70354 | | | | | Report Sent To: | edh@gisy.com | | |

| Boring or Well Number | Sample Number | Depth | Sample Type | Container Type | Gamma Spectrum | RA-226 / RA-228 | P6 – 210 | Air Sample Analysis | Radon Emanation | Smear / Wipe Test | Gross Alpha / Beta | | Field Notes | Total Number of Containers | Laboratory Notified |
|--------------------------------|------------------|-------|----------------|-------------------|----------------|-----------------|----------|---------------------|-----------------|-------------------|--------------------|--|-------------|-------------------------------|------------------------|
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |

| Transfer Information | | | | | | | |
|--------------------------------|--|--------------|--|--------------|--|----------------------------|--|
| Relinquished By: (Sign) | | Date: | | Time: | | Received By: (Sign) | |
| Relinquished By: (Sign) | | Date: | | Time: | | Received By: (Sign) | |
| Relinquished By: (Sign) | | Date: | | Time: | | Received By: (Sign) | |