



First District Health Unit
 Environmental Laboratory
 801 11th Ave SW, Minot ND 58701
 Main Phone: 852-1376; OR
 Lab Direct: (701) 837-5119
www.fdh.org
IGNORE LINE ON BOTTLE, FILL BOTTLE TO TOP

Water Testing Sample Submission

Received _____

Name/Company: _____ Phone: () _____

Contact: _____ Email: _____

Mailing: _____ City: _____ State: _____ Zip Code: _____

Send Results and Invoices By (Choose only one): Mail (paper copies) Email (electronic copies)

Date Collected:* _____ Time Collected:* _____ Collector: _____

Collection Point: _____

*Samples must arrive to lab within 30 hours of filling the bottle. If sample is over 24 hours old, notify lab personnel.

Reason for Sample (Check One Box):

- Routine
 Construction
 Repeat (Original Location)
 Repeat Upstream
 Repeat Downstream
 Repeat After Failed Test
 Triggered Source
 Other _____

Source

Indicate the water source by checking the appropriate box on the left and filling in the corresponding information.

Public Water System # _____ RCTCR _____

Private Supply (Circle One):
 Well Cistern Spring Other _____

Recreational Water (Circle One):
 Pool Spa Wading Other _____

Wastewater
 ID#/Site: _____

Other (explain): _____

On-Site Measurements			
Free Chlorine	mg/L	Total Chlorine	mg/L
pH		Other	
Water Treatment (Private Supplies Only) (Check All That Apply):			
<input type="checkbox"/>	Filter	<input type="checkbox"/>	Softener
<input type="checkbox"/>	RO	<input type="checkbox"/>	Other

Analysis Requested (Check box of desired analysis)

2025

<input type="checkbox"/>	Coliform/E. Coli Presence/Absence (standard test for drinking water - results available in 48 hours)	\$ 30.00
<input type="checkbox"/>	Coliform/E. Coli Quantification	\$ 45.00
<input type="checkbox"/>	Recreational Water (coliform presence/absence and heterotrophic plate count)	\$ 35.00
<input type="checkbox"/>	Rapid Coliform/E. Coli Presence/Absence (for drinking water - results available in 18-22 hours)	\$ 45.00
Chemistry Analysis: (NOTE: BOTTLE NOT PROVIDED; 1 QUART MINIMUM REQUIRED)		
<input type="checkbox"/>	Routine (pH, conductivity, total dissolved solids, total hardness, iron, manganese, nitrates, sodium, sulfates, chloride)	\$ 85.00
<input type="checkbox"/>	Agricultural Water (pH, conductivity, total dissolved solids, hardness, calcium/magnesium, iron, sodium, chloride, nitrates)	\$ 60.00
<input type="checkbox"/>	Livestock Water (pH, conductivity, total dissolved solids, sulfates, nitrates)	\$ 30.00
Individual tests: pH/Conductivity/TDS Hardness Iron Manganese Nitrates Sulfates Chloride Potassium Fluoride Calcium/Magnesium		\$ 15.00 EACH

~ Notice ~

- ~ Testing days for coliform or HPC samples are Monday, Tuesday and Wednesday by 4:00 p.m.
- ~ Non-testing day fee is double standard fee. Non-testing day samples must have prior approval- call 837-5119

**For Laboratory
Use Only**

Sample # _____ Total: _____ Received by: _____
 Cash Check# _____ CC _____

SAMPLE COLLECTION INSTRUCTIONS

Care must be taken to collect samples that are representative of the water system being tested and to avoid contamination of the sample at the time of collection.

BACTERIOLOGICAL TESTING

The sample tap must be free of any aerator, strainer, or hose.

Leaking taps that allow water to flow over the outside of the tap must be avoided as sampling points.

SPECIFIC SAMPLING INSTRUCTIONS ARE AS FOLLOWS:

1. Do not rinse the sample bottle. It is sterile and contains a chemical additive.
2. Open the sample tap fully and allow the water to run 4-5 minutes.
3. Restrict the flow to allow the collection of the sample without splashing.
4. **Fill the sample to the neck of the bottle, leaving a small air space.**
5. Samples must arrive at the laboratory within 30 hours of collection. Notify lab if samples are over 24 hours old. Samples received on non-testing days or that are more than 30 hours old will be rejected.
6. Complete the paperwork and return the sample to the lab on an **approved** testing day before 4pm.

CHEMISTRY TESTING

Samples submitted for Routine Chemistry Water Analysis must include at least **one quart** of water.

- The container must be clean, made of glass or plastic, and be a container that has not previously been used to store bleach, soap, or vinegar. Do not use a metal container.
- Wash container, then rinse the container five times with the sample water before filling and capping.

COMPLETING THE REPORT FORM

The Sample Submission Form must be fully and completely filled out. Add additional information if necessary.

Samples with incomplete forms will be rejected. Errors or omissions on this form may cause reporting errors.

FEE FOR SERVICE

The laboratory will charge for each water analysis performed. Make checks payable to First District Health Unit. Any questions should be directed to the Lab at 701-837-5119.

January						
S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

February						
S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	

March						
S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

April						
S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30			

May						
S	M	T	W	T	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

June						
S	M	T	W	T	F	S
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30					

July						
S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

August						
S	M	T	W	T	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

September						
S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

October						
S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

November						
S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

December						
S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

FDHU 2025 Water Lab Schedule

January	
01-03: New Year Holiday	
20: M L King Day	
February	
17: Presidents' Day	
March	
April	
16-18: Good Friday Holiday	
May	
26: Memorial Day	
19-23: NDEHA Conference	
June	
July	
June 30-July 4: Independence Day Holiday	
August	
September	
08: Labor Day	
October	
November	
11: Veterans Day	
24-28: Thanksgiving Holiday	
December	
22-26: Christmas Holiday	
BACTERIOLOGICAL TESTING LAB SCHEDULE: FOR DRINKING WATER, WASTE- WATER, AND AQUATIC VENUES	
☐ Contact lab at 837-5119 for testing options. Lab only accepts samples by appointment on these days. Additional charges will apply.	
☐ Lab open to receive all samples.	
☐ Lab closed: no samples accepted.	