



HEALTH & HUMAN SERVICES
Environmental Health Department
Fort Bend County, Texas

281-342-7469 Office

281-342-5572 Fax

Water Sample Instructions

Regardless if a water well is new or existing, water sampling must be done with special consideration to obtain a good water sample and avoid additional contamination. Please read this document completely, as it outlines the correct procedure for taking a water sample.

- 1. Obtain an approved sterile sampling container and *current* Water Sample Form.** These may be picked up from our office or the City of Houston Water & Dairy Laboratory. Do not use jars or other containers from home or other sources. Use approved water sample containers only.
- 2. Select a cold water faucet or tap nearest the well.** Most wells have a faucet located on the water line exiting the tank. Samples should come directly from the well or the tank. If a water softening or filtration system is connected to the water source, the water sample should be taken from a tap or faucet prior to either of these types of system.
- 3. Remove anything attached to the faucet.** Hoses, aerators, or anything else attached to the sample faucet may cause contamination.
- 4. You want fresh well water in your sample.** Turn on the tap or faucet. Let it run for at least ten minutes so that the well pump is activated and you obtain a fresh supply of water from the well.
- 5. Do not get your hands dirty.** While the water source is running, wash your hands thoroughly with soap and water. Do not handle animals, place anything in your mouth, or do anything that might contaminate your hands and cause the water sample to become inadvertently contaminated.
- 6. Turn off the faucet and sanitize it.** If the faucet is metal, it can be done by heating it with a cigarette lighter or a propane torch. Heat the faucet until it is dry. If the sample is to be taken from a plastic or chrome faucet such as your kitchen sink, do not heat it. Swab inside and around the opening of the faucet with a cotton ball soaked in rubbing alcohol or use a spray bottle containing a water/bleach mixture.
- 7. Collect the sample.** Turn the faucet on to a slow trickle. Carefully open the water bottle making sure not to touch the inside the cap or the bottle threads. Avoid breathing into the bottle. Fill the bottle to the neck and secure the cap. While filling the bottle, do not lose or rinse out the white substance inside the bottle. This is sodium thiosulfate. Its purpose is to neutralize any chlorine in the water sample.

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8. **Protect the sample.** Keep the sample out of direct sunlight and away from heat. Until you are ready to bring the sample in, keep the sample cool, **not** frozen, in a refrigerator or cooler. After you take the sample, you have **twenty-eight (28)** hours to deliver it to the lab.
9. **Fill out a sample form.** Complete the form using **black ink** only. Make sure the information is complete. If you have a **Public Water System**, make sure to include the **ID number** in the space provided on the form. If you have a chlorinated well, make sure to test the chlorine residual and include that information in the space provided on the form. After completion the form, include a check or money order for **\$16.50** payable to the City of Houston. **No cash.** Wrap the form and payment around the bottle and secure it with a rubber band. If you have an account with the Houston Lab, include your account number on the form or the sample may not be processed.
10. **Get the sample to the lab.** As a courtesy, this office will courier water samples submitted on **Wednesdays** between the hours of 8:00am and noon. You should receive the laboratory report within 7-10 days. Should your report not arrive in two weeks, you may contact the laboratory by telephone. The following information will be required to locate the results: (1) the date the sample was brought in (2) the county in which the sample was collected and (3) the return address exactly as the form was completed. Should you need results for a real estate closing, please fill out the form for **FAXING RESULTS** which can be obtained in our office.
11. **What the laboratory report means.** If coliform organisms are **not found**, the water is bacteriologically safe to drink. If coliform organisms **are found**, the water contains bacteria commonly present in sewage which might include typhoid or other disease producing bacteria. Contaminated water **should not** be used for drinking or washing teeth, wounds, or vegetables which are to be eaten raw. Use bottled water until the water supply is decontaminated. Contaminated water may be boiled for a minimum of 20 minutes or may be treated with 6 to 10 drops of household chlorine bleach per gallon at least 30 minutes before use.
12. **How to treat a contaminated well.** Obtain 1 gallon of chlorine bleach. Dilute it with 5 gallons of water and pour it directly into the well casing. Connect a garden hose to a faucet near the well and let it flow into the well casing until the odor of bleach is detected from the hose. Shut off that faucet and open all other cold water faucets until the bleach odor is detected from each faucet. Then open all hot water faucets to allow the bleach into the cold water line serving the water heater. Let the bleach remain in the well and piping for at least 4 hours, preferably overnight. Then open one exterior faucet and let the water run until the bleach odor is gone. Next flush each cold water faucet similarly. Wait 3 days before taking a new sample to the laboratory. It is not unusual repeat this treatment 3 or 4 times before no contamination is found by laboratory tests. All wells should be tested for contamination at least twice each year.

Water samples are only tested for the presence of fecal coliform bacteria. If you desire your water tested for other substances, contact the Texas Commission of Environmental Quality at (713) 767-3500 for further information.

2/5/2013

Sample Form

- Fill out all information for each sample on the LEFT side of the bold center line on the form using BLACK ink.
- PUBLIC systems must include PWS ID number on all samples.
- PUBLIC systems must include Chlorine residual on all Routine and Repeat samples.
- PUBLIC systems may put up to 5 sample locations from the same system number on one form.
- The test result will be mailed to the name and address you write on the form. **Please write legibly** to ensure proper recording of all information.
 - If you have questions about the form, please call 832.393.3939 for help completing it.

Sample Transport

- **Deliver the sample to the laboratory within 28 hours of collection**
- **Water samples should be held and transported to the lab on ice or ice packs.**
- Do not allow the sample form to get wet during transport of the sample.
- If you cannot deliver the sample on the day of collection, store it in the refrigerator overnight and transport it on ice **within 28 hours of collection.**

Sample Results

- We will attempt to contact you by phone using the number you wrote on the form IF
 - Your sample was unsatisfactory for any reason and we were not able to analyze it.
 - Coliform organisms were present in your sample.
- Verbal results are available 24 hours after you drop off your sample
- Reports are mailed to the address you write on the form.
- You should receive your report within 5 to 7 business days.
- If your report does not arrive within 2 weeks, please contact the laboratory at 832.393.3939.
- To locate a report, we must have
 - The date the sample was submitted AND
 - The name of the return addressee exactly the way it was written on the form.

What do your results mean?

- If Total Coliform and/;. coli organisms are **ABSENT**
 - The water is bacteriologically safe to use at the time of sampling.
- If Total Coliform organisms are **PRESENT**
 - The water contains bacteria commonly found in run-off or surface water, which could include disease producing organisms.
- If E. coli organisms are **PRESENT**
 - The water contains bacteria that is commonly found in sewage (animal or human) which could include disease producing organisms.
 - If Total Coliform or E. coli organisms are **PRESENT** **The water is NOT SAFE to use for drinking, bathing, brushing teeth, washing hands, or washing any food you will eat raw.**
- Disinfect the well (see next page) and submit another sample before using the water.

DRINKING WATER (P/A) COLIFORM SUBMISSION FORM												City of Houston Health Department Water & Dairy Laboratory 2250 Holcombe Blvd, Houston, TX 77030 P (832)393-3939 F (832)393-3989 www.houstontx.gov/health/water.html WaterLab.info@houstontx.gov TCEQ Lab ID: 48012 / USEPA Lab ID: TX00006			Test results meet all requirements of NELAC unless stated otherwise.		
Public/Private Water System Identification & Sample Collection Information (Please PRINT legibly in black ink)												NELAP Certificate #: T104704253					
TCEQ Public Water System ID																	
Public Water System Name																	
County										COH Acct #, check or MO #, cc approval code							
Send Results To	Name										Date/Time Received						
	Address										Received by		Sample Iced? Yes No Temp °C				
	City										Client or Sampler notified		Client Notification of Positive or Unsuitable Sample - Lab Use Only			Notified by	
	State	Zip Code															
Phone #					Fax # or Email					Date/Time notified							
Sampler Name																	
Sampler Contact #										<input type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Other: _____		Notes:					
System Type (Circle one)			Water Source (Circle one)							CHLORINE RESIDUAL MANDATORY on ALL TCEQ Compliance samples including Routine, Raw & Repeat		LABORATORY USE ONLY					
PUBLIC	PRIVATE	BOTTLED/ VENDED	GROUNDWATER (WELL)	SURFACE (LAKE, RIVER)	GROUND W/ SURFACE INFLUENCE			Unsuitable sample Please re-submit	Laboratory Sample ID Number								
Sample Identification		Collected		Sample Type : (X) Mark ONLY ONE box					Free Chlorine mg/L	Total Chlorine mg/L	Rejection Code						
Use Specific Address/Location/Description <i>DO NOT USE SITE #</i> Raw Wells Use Source ID for Well Sampled; Ex. G1234567A		Date	Time	DIST/RT	CONST	RAW WELL	SPECIAL	REPEAT Include Sample # for Previous Positive									
		M/D/Y	Please circle AM or PM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
			am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
			pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
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			pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									