

**Laboratory Information**

Laboratory:  
Technician:  
Sample By:

Test Method:  
Test Start Date:  
Report Date:

**Sample Information**

Structure:	
Work Area	
Source	
Sample Date:	
Sample Name:	
Sample Number:	
Material Type:	
Depth From:	
Depth To:	
North:	
East:	
Elevation:	

**Test Information**

Trial No.	
Tare Name.	
Microwave model	
Microwave power setting used	
Heat Sink used (Description)	
Tare Plus Wet Soil (g)	
Tare Plus Dry Soil (g) (____min)	
Tare Plus Dry Soil (g) (____min)	
Tare Plus Dry Soil (g) (____min)	
Tare Plus Dry Soil (g) (____min)	
Water, Ww (g)	
Tare (g)	
Dry Soil, Ws (g)	
Moisture Content (%)	

**Laboratory Comments**

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Reviewed By:\_\_\_\_\_

Date:\_\_\_\_\_