



Bureau of Narcotics and Dangerous Drugs Control
Oklahoma

ACS Notification Sheet

OBN Information

Container Location: _____

OBN Lab #: _____

Depositing Agency Information

Agency Name: _____

Case Number: _____

Case Officer: _____

Phone Number: _____

Officer Dismantling Lab: _____

Phone Number: _____

Clandestine Laboratory Information

Address: _____

City: _____

County: _____

Lab Type: ☐ Red P ☐ Nazi ☐ OneStep ☐ Other: _____

Approx. Weight of Waste: _____

