



Alpha

Alpha Analytical Laboratories, Inc.

email: clientservices@alpha-labs.com

Corporate: 208 Mason Street | Ukiah, CA 95482 | T: 707-468-0401 | F: 707-468-5267 | ELAP# 1551

29 September 2021

Volcano CSD

Attn: Nick Lawson

P O Box 72

Volcano, CA 95689

RE: Routine - Coliform

Work Order: 2112628

Enclosed are the results of analyses for samples received by the laboratory on 09/21/21 14:00. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Jeanette L. Poplin For Karen L. Lantz

Project Manager



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P O Box 72
Volcano, CA 95689

Project Manager: Nick Lawson
Project: Routine - Coliform
Project Number: 0300016

Reported:
09/29/21 10:29

Bay Area: 262 Rickenbacker Circle | Livermore, CA 94551 | T: 925-828-6226 | F: 925-828-6309 | ELAP# 2728
Central Valley: 9090 Union Park Way Suite 113 | Elk Grove, CA 95624 | T: 916-686-5190 | F: 916-686-5192 | ELAP# 2922
North Bay: 110 Liberty Street | Petaluma, CA 94952 | T: 707-769-3128 | F: 707-769-8093 | ELAP# 2303
San Diego: 2722 Loker Avenue West Suite A | Carlsbad, CA 92010 | T: 760-930-2555 | F: 760-930-2510 | ELAP# 3055

ANALYTICAL REPORT FOR SAMPLES

Sample ID	Laboratory ID	Matrix	Date Sampled	Date Received
Odd Month: 0300016 Routine @ 16430 Clapboard	2112628-01	Water	09/21/21 07:45	09/21/21 14:00



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Result	Reporting Limit	Dilution	Batch	Prepared	Analyzed	ELAP#	Method	Note
Odd Month: 0300016 Routine @ 16430 Clapboard (2112628-01)			Sample Type: Water			Sampled: 09/21/21 07:45		
Conventional Chemistry Parameters by APHA/EPA Methods								
pH	6.86 pH Units	1.68	1	AI14417	09/21/21 15:05	09/21/21 15:05	2922 SM4500-H+ B	T-14
Total Residual Chlorine	0.60 mg/L	0.10	1	AI14420	09/21/21 15:31	09/21/21 15:31	2922 SM4500-Cl F	T-14
Microbiological Parameters by APHA Standard Methods								
Total Coliforms	Absent	1	1	AI14305	09/21/21 14:39	09/22/21 16:16	2922 Colisure	
E. Coli	Absent	1	1	AI14305	09/21/21 14:39	09/22/21 16:16	2922 Colisure	

The results in this report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety.



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Notes and Definitions

A Absent

P Present

T-14 Residual chlorine, dissolved oxygen, sulfite, and pH must be analyzed in the field to meet the EPA specified 15 minute hold time.

ND Analyte NOT DETECTED at or above the reporting limit

dry Sample results reported on a dry weight basis

RPD Relative Percent Difference

Chain of Custody - Work Order

Reports and Invoices delivered by email in PDF format

Lab No 2152628 Pg of

Report to		Invoice to (if different)		Project Information										Signature below authorizes work under terms stated on reverse side.																																																											
Company: Volcano CSD		Contact:		Project ID:										<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="10">Analysis Request</th> <th colspan="2">TAT</th> <th colspan="2">Temp upon Receipt °C</th> </tr> <tr> <td colspan="10" rowspan="3"> <div style="text-align: center; font-size: 2em; font-weight: bold;"> CV - Chlorine Residual <i>SEAN M. GUNN</i> </div> </td> <td colspan="2">Standard 10 days</td> <td colspan="2">Ukiah temp:</td> </tr> <tr> <td colspan="2">Standard 5 days X 48 hours</td> <td colspan="2">Dublin temp:</td> </tr> <tr> <td colspan="2">Other: ____ days</td> <td colspan="2">Elk Grove temp: <div style="text-align: center; font-size: 2em; font-weight: bold;">5.5</div></td> </tr> <tr> <td colspan="10" style="text-align: center;">Lab preapproval required</td> <td colspan="4">Sample Notes or CDPH Source Numbers:</td> </tr> </table>										Analysis Request										TAT		Temp upon Receipt °C		<div style="text-align: center; font-size: 2em; font-weight: bold;"> CV - Chlorine Residual <i>SEAN M. GUNN</i> </div>										Standard 10 days		Ukiah temp:		Standard 5 days X 48 hours		Dublin temp:		Other: ____ days		Elk Grove temp: <div style="text-align: center; font-size: 2em; font-weight: bold;">5.5</div>		Lab preapproval required										Sample Notes or CDPH Source Numbers:			
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Address: PO Box 72 Volcano, CA 95689		Address:		PO Number:																																																																					
Phone/Fax: 209-304-7628		Phone/Fax:		Internal Lab Use: 189, 189(a) & 190, 190(a)																																																																					
Email Address: nlwsn49@gmail.com																																																																									
Field Sampler - Printed Name & Signature:																																																																									
Sample Identification		Sampling		Container					Preservative					Matrix					Total Number of Containers per Sample ID	CV - PH	CV - Chlorine Residual	CV - PA	Courier	CDPH Write On EDT Transmission?																																																	
		Date	Time	40ml Vial	Poly	Glass	Sleeve	Other	HCl	HNO3	NaOH	Na2S2O3	None	Water DW	Soil	Other	Yes	No																																																							
EVEN MONTH: 0300016				X	X							X	X					1	X	X		X																																																			
Routine @ country store				X							X		X					1		X																																																					
ODD MONTH: 0300016		9-21-07	0745	X	X							X	X					1	X	X		X																																																			
Routine @ 16430 Clapboard		1		X							X		X					1		X																																																					
Relinquished by		Received by		Date		Time		CDPH Write On EDT Transmission?		Yes		No		State System Number:		If "Y" please enter the Source Number(s) in the column above		Mail Hardcopy to DDW- ?		Yes		No		Hardcopy to DDW attn:																																																	
<i>A</i>		ISP		9-21-07		1400		State System Number:						Mail Hardcopy to DDW- ?		Yes		No		Hardcopy to DDW attn:				Travel and Site Time:																																																	
																								Mileage:																																																	
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