

INSTRUCTIONS REVERSE SIDE

Water System Name: WELLING SUBD. PWS ID No. 722013
 Collector: GARY PRESTON Date Collected: 9-24-20 County: FREMONT
 Person Transporting Sample to Lab: GARY PRESTON
 Condition of Transport: Cooled Mail Carrier Other
 Report Results To:
 Name: GARY PRESTON
 Address: PO BOX 495
 City: ISLAND PARK State: CO Zip Code: 83439
 Phone Number: 2093132858 Email: TINGEYK@BYUI.EDU
CAJERA@EMAIL.COM

IAS — ENVIROCHEM

3314 Pole Line Road • Pocatello, Idaho 83201
 Phone: (208) 237-3300 • Fax: (208) 237-3336

**COLIFORM BACTERIA ANALYSIS REPORT
 CONTAMINANT ID# 3100**

Public Drinking Water System
 Private Drinking Water

Shaded areas must be fully filled out or samples will not be run.
 Private samples need not have pws# or Chlorine residual. Clear areas are for lab use only.

Your sample will be analyzed for TOTAL COLIFORMS unless you specify another analysis under Remarks.

For PWS only, if this is a repeat sample, mark the date of the ORIGINAL POSITIVE SAMPLE.

LAB ID # ID00952

REPORT RESULTS TO:

Dist. 6 Health Dept.
 Dist. 7 Health Dept.
 Denver EPA
 Seattle EPA
 Idaho Falls DEQ
 Pocatello DEQ **(F)**

PAYMENT:

No Charge Prepaid
 Bill Pmt. Rec'd

R E S U L T S

Sample Number	Sample Type Code	Sampling Location	Time Collected	Chlorine Residual PPM	Original Sample Date	TOTAL COLIFORMS		FECAL COLIFORMS		ESCHERICHIA COLI		HPC
						Method Code	(P)resent (A)bsent #100ml	Method Code	(P)resent (A)bsent #100ml	Method Code	(P)resent (A)bsent #100ml	
5		WELL HOUSE	9:50AM			SM9223 B PA		SM9223 B PA		SM9223 B PA		
						SM9223 B PA		SM9223 B PA		SM9223 B PA		
						SM9223 B PA		SM9223 B PA		SM9223 B PA		
						SM9223 B PA		SM9223 B PA		SM9223 B PA		
						SM9223 B PA		SM9223 B PA		SM9223 B PA		

Sample Type Codes: S - Routine Sample U - Upstream Repeat E - Enforcement (Chain of Custody Required) W - Untreated (Source)
 P - Repeat Sample (At Original Tap) D - Downstream Repeat X - Other Repeat C - Construction/Special

Chain-of-Custody Information

Relinquished by	Date	Time	Received by	Date	Time
<u>Gary Preston</u>	<u>9-24-20</u>	<u>11:10</u>	<u>SRB</u>		

DATE/TIME RECEIVED: 092420 1621 22.1
 DATE/TIME ANALYZED: _____ ANALYST: _____
 DATE REVIEWED: _____ SUPERVISOR: _____

REMARKS

1 Sample

M009362
 Gary Preston

Received: 09/24/2020
 SRB