

EnviroMatrix



Analytical, Inc.

24 March 2017

Wynola Water District
Attn: Tim Taschler
PO Box 153
Santa Ysabel, CA 92070

EMA Log #: 17C0498

Project Name: WYNOLA WATER DISTRICT

Project Desc./#: PS 3701837

Enclosed are the results of analyses for samples received by the laboratory on 03/15/17 10:53. Samples were analyzed pursuant to client request utilizing EPA or other ELAP approved methodologies. I certify that this data is in compliance both technically and for completeness.

A handwritten signature in black ink, appearing to read 'Dan Verdon', is written over a light gray circular stamp.

Dan Verdon
Laboratory Director

CA ELAP Certification #: 2564

4340 Viewridge Avenue, Suite A - San Diego, California 92123 - (858) 560-7717 - Fax (858) 560-7763
Analytical Chemistry Laboratory

Client Name: Wynola Water District
Project Name: WYNOLA WATER DISTRICT

EMA Log #: 17C0498

ANALYTICAL REPORT FOR SAMPLES

Sample ID	Laboratory ID	Matrix	Date Sampled	Date Received
4701 MB	17C0498-01	Drinking Water	03/15/17 08:31	03/15/17 10:53

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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Microbiological Parameters by Standard Methods

Analyte	Result	Reporting Limit	Units	Dilution	Batch	Date Prepared Date Analyzed	Method	Notes
4701 MB (17C0498-01) Drinking Water								
Sampled: 03/15/17 08:31 Received: 03/15/17 10:53								
Total Coliforms	Present		None	1	7031559	03/15/17 13:25 03/16/17 13:27	SM9223	
E. Coli	Absent		"	"	"	03/15/17 13:25 03/16/17 13:27	"	

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Notes and Definitions

A-02 Present
ND Analyte NOT DETECTED at or above the reporting limit
NR Not Reported
RPD Relative Percent Difference

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1760499 1760498 - EnviroMatrix ^{EMA} Analytical, Inc.

CHAIN-OF-CUSTODY RECORD

4340 Viewridge Ave., Ste. A - San Diego, CA 92123 - Phone (858) 560-7717 - Fax (858) 560-7763

EMA LOG #: _____

Client: WYNOZA WATER DISTRICT

Attn: TIM TASCHLER

Sampler(s): DAN THAYER

Address: 1234 LAKE DALE RD.
SANTA YSABEL, CA 92070

Phone: (760) 315-6300

Email: tim.taschler@gmail.com

Billing Address: _____

ID #	Client Sample ID	Sample Date	Sample Time	Sample Matrix	Container # / Type
1	1701 MB	3/15	8:31	DW	120
2					
3					
4					
5					
6					
7					
8					
9					
10					

Matrix Codes: A = Air, DW = Drinking Water, GW = Groundwater, SW = Storm Water
 WW = Wastewater, S = Soil, SED = Sediment, SD = Solid, T = Tissue, O = Oil, L = Liquid

Shipped By: Courier UPS FedEx USPS Client Drop Off Other

Turn-Around-Time: Same Day 24 hr 3 day 4 day 5 day STD (7 day)

Reporting Requirements: Fax/PDF Excel Geotracker/EDF Hard Copy EDT

Sample Disposal: By Laboratory Return to Client PU or Delivery Archive

Sample Integrity
 Correct Containers: Yes No N/A
 Custody Seals Intact: Yes No N/A
 COC Labels Agreed: Yes No N/A

Containers Properly Preserved: Yes No N/A
Temp. & Receipt: COC NOC NOC
Sampled By: Client/EMA Autosampler

Requested Analysis		RELINQUISHED BY	DATE/TIME	RECEIVED BY
<input type="checkbox"/> Oil & Grease <input type="checkbox"/> 413.1 <input type="checkbox"/> 413.2 <input type="checkbox"/> 1664	<input type="checkbox"/> 8015B (TPH) <input type="checkbox"/> Gas <input type="checkbox"/> Diesel <input type="checkbox"/> Ext	Signature: DAN THAYER	3/15/17	Signature: Dave Southcott
<input type="checkbox"/> 624/8260 (VOC) Full BTXE MTBE Oxy Nap	<input type="checkbox"/> 625 / 8270 (SVOC) <input type="checkbox"/> PAH only	Print: DAN THAYER	8:31	Print: Dave Southcott
<input type="checkbox"/> 608 / 8081 (Organochlorine Pesticides)	<input type="checkbox"/> 608 / 8082 (Polychlorinated Biphenyls)	Company: _____		Company: PHM W.C.
<input type="checkbox"/> 8141 (Organophosphorus Pesticides)	<input type="checkbox"/> TBT (Organotin Compounds)	Signature: _____	3/15/17	Signature: Dave Southcott
<input type="checkbox"/> pH <input type="checkbox"/> EC <input type="checkbox"/> TSS <input type="checkbox"/> TDS	<input type="checkbox"/> Nitrate <input type="checkbox"/> Nitrite <input type="checkbox"/> TKN <input type="checkbox"/> NH3	Print: _____	10:53	Print: M. K. Major
<input type="checkbox"/> CAC Title 22/CAM17 Metals <input type="checkbox"/> TLC <input type="checkbox"/> STLC	<input type="checkbox"/> TCLP (RCRA) <input type="checkbox"/> Metals <input type="checkbox"/> Organics	Company: PHM W.C.		Company: EMA
<input type="checkbox"/> Cd <input type="checkbox"/> Cr <input type="checkbox"/> Cu <input type="checkbox"/> Pb <input type="checkbox"/> Ni <input type="checkbox"/> Ag <input type="checkbox"/> Zn <input type="checkbox"/> Dissolved	<input type="checkbox"/> Coliform. <input type="checkbox"/> Total (MTF) <input type="checkbox"/> Fecal (MTF)	Signature: _____		Signature: _____
<input type="checkbox"/> Coliform, T+E, Coli <input type="checkbox"/> MP/A <input type="checkbox"/> Enumeration	<input type="checkbox"/> Enterococcus <input type="checkbox"/> MTF <input type="checkbox"/> Enterolert	Print: _____		Print: _____
<input type="checkbox"/> Heterotrophic Plate Count (HPC)	<input type="checkbox"/> BOD <input type="checkbox"/> COD <input type="checkbox"/> Cyanide	Company: _____		Company: _____

Project ID: _____

Project #: _____

PO #: _____

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Temp. & Receipt: COC NOC NOC
Sampled By: Client/EMA Autosampler

Project/Sample Comments:

*Additional costs may apply, consult a project manager for details.
 **EMA reserves the right to return any samples that do not match our waste profile.
 NOTE: By relinquishing samples to EMA, Inc., client agrees to pay for the services requested on this COC form and any additional analyses performed on this project. Payment for services is due within 30 days from date of invoice. Samples will be disposed of 7 days after report has been finalized unless otherwise noted. All work is subject to EMA's terms and conditions.