

AquaLab Water Analysis
 P.O. Box 356
 Twain Harte CA 95383

State Certification # 1359
 (209) 586-3400
 Fax: (209) 586-1492

BACTERIOLOGICAL EXAMINATION OF WATER

CENTRAL SIERRA
 ENVIRONMENTAL RESOURCE COUNCIL
 P O BOX 396
 TWAIN HARTE CA 95383

LAB TURBIDITY
 NTU= 0.59

Phone: 586 7440 JOHN BUCKLEY

Date: 6-1-09

Sampler: LM, JB

| Source | | Reason | Type |
|----------------------|--------------------|------------|--|
| 1) Surface/ Spring | 4) Reservoir | A) Routine | C) Total Coliform |
| 2) Well Head | 5) Distribution | B) Repeat | F) Fecal Coliform |
| 3) Well Distribution | 6) Treatment Plant | C) Special | H) Heterotrophic Plate Count E) E. coli |

| 1497-I Collection Data | | | | | | | | Five Portions | | | | | | Presence/Absence | | | CFU mL 35 C @ 48HR |
|------------------------|-------|----------|-----|--------|--------|------|--------------------|------------------|-------------|-------------|-------------|-------------|-------------|------------------|-------|-------|--------------------------|
| Lab ID Bottle ID | Time | Location | CL2 | Source | Reason | Type | Vol mL | # Positive Tubes | | | | | | Coliform | | | |
| | | | | | | | | Prsmpt | | Confirmed | | | | P/A or MPN | | | |
| | | | | | | | | 24 | 48 | 24 | 24 | 48 | 48 | # | Total | Fecal | |
| M53 | 10:10 | LRM | - | I | C | H | 10.0 1.0 0.1 | 1 1 0 | 4 2 0 | 1 1 - | 0 0 - | 4 2 - | 5 3 0 | 80 | 4 | 2 | 52 |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |

Notification/Comments: Temp^c Lab Recd = 5.0^{cc}

Set-Up: Date/Time/By: 6-1 1200 ASC

Completed: Date/By: 6-5-09 NJ