



Laboratory Results

Results for the samples and analytes requested
 The lab is not directly responsible for the integrity of the sample before receipt at the lab and is responsible only for the certified tests

Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946

Lab No. : 70148593001
Client Sample ID.: S-31636

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 10/07/2020 08:30 AM Point S-31636
 Received : 10/07/2020 04:45 PM Location Well #1-3
 Collected By CLIENT

Analytical Method:EPA 200.7

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Iron	<0.020		1	mg/L	0.3	10/16/2020 6:37 PM	001 BP3N1/1
Manganese	0.017		1	mg/L	0.3	10/16/2020 6:37 PM	001 BP3N1/1

Analytical Method:EPA 353.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Nitrate as N	6.9		10	mg/L	10	10/07/2020 10:59	001 BP4U1/1
Nitrate-Nitrite (as N)	6.9		10	mg/L		10/07/2020 10:59	001 BP4U1/1

Analytical Method:EPA 353.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Nitrite as N	<0.050		1	mg/L	1	10/07/2020 8:40 PM	001 BP4U1/1

Analytical Method:EPA 522

Prep Method: EPA 522

Prep Date: 10/08/2020 11:02

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
1,4-Dioxane (p-Dioxane)	0.058		1	ug/L	1	10/09/2020 6:54 PM	001 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	95%		1	%REC		10/09/2020 6:54 PM	001 AG2R1/2

Analytical Method:SM22 9223B Colilert

Prep Method: SM22 9223B Colilert

Prep Date: 10/07/2020 5:55 PM

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	10/08/2020 11:55	001 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	001 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.
 ND - Not Detected at or above adjusted reporting limit.
 J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range
 U - Indicates the compound was analyzed for, but not detected

Kimberley Mack

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 Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.

Date Reported: 11/03/2020



575 Broad Hollow Road, Melville, NY 11747
 TEL: (631) 694-3040 FAX: (631) 420-8436
 www.pacelabs.com

Laboratory Results

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Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
 P.O. Box 1013
 Hampton Bays, NY 11946

Lab No. : 70148593002
 Client Sample ID.: S-24848

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 10/07/2020 09:00 AM Point S-24848
 Received : 10/07/2020 04:45 PM Location Well #1-2
 Collected By CLIENT

Analytical Method:EPA 200.7

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Iron	<0.020		1	mg/L	0.3	10/16/2020 6:39 PM	002 BP3N1/1
Manganese	0.59*		1	mg/L	0.3	10/16/2020 6:39 PM	002 BP3N1/1

Analytical Method:EPA 353.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Nitrate as N	7.4		10	mg/L	10	10/07/2020 11:00	002 BP4U1/1
Nitrate-Nitrite (as N)	7.4		10	mg/L		10/07/2020 11:00	002 BP4U1/1

Analytical Method:EPA 353.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Nitrite as N	<0.050		1	mg/L	1	10/07/2020 8:46 PM	002 BP4U1/1

Analytical Method:EPA 522

Prep Method: EPA 522

Prep Date: 10/08/2020 11:02

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
1,4-Dioxane (p-Dioxane)	0.039		1	ug/L	1	10/09/2020 7:10 PM	002 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	95%		1	%REC		10/09/2020 7:10 PM	002 AG2R1/2

Analytical Method:SM22 9223B Colilert

Prep Method: SM22 9223B Colilert

Prep Date: 10/07/2020 5:55 PM

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	10/08/2020 11:55	002 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	002 SP5T1/1

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Kimberley Mack

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Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
 P.O. Box 1013
 Hampton Bays, NY 11946

Lab No. : 70148593003
 Client Sample ID.: S-15687

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 10/07/2020 09:15 AM Point S-15687
 Received : 10/07/2020 04:45 PM Location Well #1-1
 Collected By CLIENT

Analytical Method:EPA 200.7

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Iron	<0.020		1	mg/L	0.3	10/16/2020 6:41 PM	003 BP3N1/1
Manganese	0.045		1	mg/L	0.3	10/16/2020 6:41 PM	003 BP3N1/1

Analytical Method:EPA 353.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Nitrate as N	5.5		10	mg/L	10	10/07/2020 11:01	003 BP4U1/1
Nitrate-Nitrite (as N)	5.5		10	mg/L		10/07/2020 11:01	003 BP4U1/1

Analytical Method:EPA 353.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Nitrite as N	<0.050		1	mg/L	1	10/07/2020 8:47 PM	003 BP4U1/1

Analytical Method:EPA 522

Prep Method: EPA 522

Prep Date: 10/08/2020 12:30

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
1,4-Dioxane (p-Dioxane)	0.048		1	ug/L	1	10/09/2020 7:58 PM	003 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	90%		1	%REC		10/09/2020 7:58 PM	003 AG2R1/2

Analytical Method:SM22 9223B Colilert

Prep Method: SM22 9223B Colilert

Prep Date: 10/07/2020 5:55 PM

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	10/08/2020 11:55	003 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	003 SP5T1/1

Qualifiers:

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Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
 P.O. Box 1013
 Hampton Bays, NY 11946

Lab No. : 70148593004
 Client Sample ID.: BLEND INF MAIN PLANT

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 10/07/2020 08:50 AM Point BLEND INF
 Received : 10/07/2020 04:45 PM Location MAIN PLANT
 Collected By CLIENT

Analytical Method:EPA 200.7

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Iron	<0.020		1	mg/L	0.3	10/16/2020 6:43 PM	004 BP3N1/1
Manganese	0.15		1	mg/L	0.3	10/16/2020 6:43 PM	004 BP3N1/1

Analytical Method:EPA 353.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Nitrate as N	6.7		10	mg/L	10	10/07/2020 11:03	004 BP4U1/1
Nitrate-Nitrite (as N)	6.7		10	mg/L		10/07/2020 11:03	004 BP4U1/1

Analytical Method:EPA 353.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Nitrite as N	<0.050		1	mg/L	1	10/07/2020 8:48 PM	004 BP4U1/1

Analytical Method:SM22 9223B Colilert Prep Method: SM22 9223B Colilert Prep Date: 10/07/2020 5:55 PM

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	10/08/2020 11:55	004 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	004 SP5T1/1

Qualifiers:
 DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.
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Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946
Attn To : Supt. McCuen

Lab No. : 70148593005
Client Sample ID.: S-50970

Federal ID : 5103704
 Collected : 10/07/2020 08:50 AM Point S-50970
 Received : 10/07/2020 04:45 PM Location Well #2-1
 Collected By CLIENT

<u>Analytical Method:</u> EPA 522		<u>Prep Method:</u> EPA 522			<u>Prep Date:</u> 10/08/2020 12:30		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
1,4-Dioxane (p-Dioxane)	0.034		1	ug/L	1	10/09/2020 8:30 PM	005 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	86%		1	%REC		10/09/2020 8:30 PM	005 AG2R1/2

<u>Analytical Method:</u> SM22 9223B Colilert		<u>Prep Method:</u> SM22 9223B Colilert			<u>Prep Date:</u> 10/07/2020 5:55 PM		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
E.coli	Absent		1		Absent	10/08/2020 11:55	005 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	005 SP5T1/1

Qualifiers:

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Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946

Lab No. : 70148593006
Client Sample ID.: S-74071

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 10/07/2020 06:15 AM Point S-74071
 Received : 10/07/2020 04:45 PM Location Well #2-2
 Collected By CLIENT

<u>Analytical Method:</u> EPA 522		<u>Prep Method:</u> EPA 522			<u>Prep Date:</u> 10/08/2020 12:30		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
1,4-Dioxane (p-Dioxane)	0.046		1	ug/L	1	10/09/2020 9:19 PM	006 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	90%		1	%REC		10/09/2020 9:19 PM	006 AG2R1/2

<u>Analytical Method:</u> SM22 9223B Colilert		<u>Prep Method:</u> SM22 9223B Colilert			<u>Prep Date:</u> 10/07/2020 5:55 PM		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
E.coli	Absent		1		Absent	10/08/2020 11:55	006 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	006 SP5T1/1

Qualifiers:

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Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946
Attn To : Supt. McCuen

Lab No. : 70148593007
Client Sample ID.: S-58350

Federal ID : 5103704
 Collected : 10/07/2020 07:35 AM Point S-58350
 Received : 10/07/2020 04:45 PM Location Well #3-1
 Collected By CLIENT

<u>Analytical Method:</u> EPA 522		<u>Prep Method:</u> EPA 522			<u>Prep Date:</u> 10/08/2020 12:30		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
1,4-Dioxane (p-Dioxane)	<0.020		1	ug/L	1	10/09/2020 9:35 PM	007 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	91%		1	%REC		10/09/2020 9:35 PM	007 AG2R1/2

<u>Analytical Method:</u> SM22 9223B Colilert		<u>Prep Method:</u> SM22 9223B Colilert			<u>Prep Date:</u> 10/07/2020 5:55 PM		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
E.coli	Absent		1		Absent	10/08/2020 11:55	007 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	007 SP5T1/1

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 Routine

Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946
Attn To : Supt. McCuen

Lab No. : 70148593008
Client Sample ID.: S-58351

Federal ID : 5103704
 Collected : 10/07/2020 07:15 AM Point S-58351
 Received : 10/07/2020 04:45 PM Location Well #3-2
 Collected By CLIENT

<u>Analytical Method:</u> EPA 522		<u>Prep Method:</u> EPA 522			<u>Prep Date:</u> 10/08/2020 12:30		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
1,4-Dioxane (p-Dioxane)	<0.020		1	ug/L	1	10/09/2020 9:51 PM	008 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	90%		1	%REC		10/09/2020 9:51 PM	008 AG2R1/2

<u>Analytical Method:</u> SM22 9223B Colilert		<u>Prep Method:</u> SM22 9223B Colilert			<u>Prep Date:</u> 10/07/2020 5:55 PM		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
E.coli	Absent		1		Absent	10/08/2020 11:55	008 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	008 SP5T1/1

Qualifiers:

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Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946

Lab No. : 70148593009
Client Sample ID.: S-58352

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 10/07/2020 07:50 AM Point S-58352
 Received : 10/07/2020 04:45 PM Location Well #3-3
 Collected By CLIENT

<u>Analytical Method:</u> EPA 522		<u>Prep Method:</u> EPA 522			<u>Prep Date:</u> 10/08/2020 12:30		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
1,4-Dioxane (p-Dioxane)	<0.020		1	ug/L	1	10/09/2020 10:07	009 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	88%		1	%REC		10/09/2020 10:07	009 AG2R1/2

<u>Analytical Method:</u> SM22 9223B Colilert		<u>Prep Method:</u> SM22 9223B Colilert			<u>Prep Date:</u> 10/07/2020 5:55 PM		
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Analyzed:</u>	<u>Container:</u>
E.coli	Absent		1		Absent	10/08/2020 11:55	009 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	009 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.
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Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
 P.O. Box 1013
 Hampton Bays, NY 11946

Lab No. : 70148593010
 Client Sample ID.: S-108065

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 10/07/2020 06:50 AM Point S-108065
 Received : 10/07/2020 04:45 PM Location Well #4-1
 Collected By CLIENT

Analytical Method:EPA 200.7

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Iron	0.75*		1	mg/L	0.3	10/16/2020 6:52 PM	010 BP3N1/2
Manganese	0.12		1	mg/L	0.3	10/16/2020 6:52 PM	010 BP3N1/2

Analytical Method:EPA 522

Prep Method: EPA 522

Prep Date: 10/08/2020 12:30

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
1,4-Dioxane (p-Dioxane)	<0.020		1	ug/L	1	10/09/2020 10:23	010 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	90%		1	%REC		10/09/2020 10:23	010 AG2R1/2

Analytical Method:SM22 9223B Colilert

Prep Method: SM22 9223B Colilert

Prep Date: 10/07/2020 5:55 PM

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	10/08/2020 11:55	010 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	010 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.
 ND - Not Detected at or above adjusted reporting limit.
 J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range
 U - Indicates the compound was analyzed for, but not detected

Kimberley Mack

Test results meet the requirements of NELAC unless otherwise noted.

This report shall not be reproduced except in full, without the written approval of the laboratory.

Result(s) reported meet(s) NYS Regulatory Limit(s).
 Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.

Date Reported: 11/03/2020



Laboratory Results

Results for the samples and analytes requested
 The lab is not directly responsible for the integrity of the sample before receipt at the lab and is responsible only for the certified tests

Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
 P.O. Box 1013
 Hampton Bays, NY 11946

Lab No. : 70148593011
 Client Sample ID.: S-108066

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 10/07/2020 06:40 AM Point S-108066
 Received : 10/07/2020 04:45 PM Location Well #4-2
 Collected By CLIENT

Analytical Method:EPA 200.7

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Iron	0.99*		1	mg/L	0.3	10/16/2020 6:58 PM	011 BP3N1/2
Manganese	0.12		1	mg/L	0.3	10/16/2020 6:58 PM	011 BP3N1/2

Analytical Method:EPA 522

Prep Method: EPA 522

Prep Date: 10/08/2020 12:30

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
1,4-Dioxane (p-Dioxane)	<0.020		1	ug/L	1	10/09/2020 10:39	011 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	90%		1	%REC		10/09/2020 10:39	011 AG2R1/2

Analytical Method:SM22 9223B Colilert

Prep Method: SM22 9223B Colilert

Prep Date: 10/07/2020 5:55 PM

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	10/08/2020 11:55	011 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	011 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.
 ND - Not Detected at or above adjusted reporting limit.
 J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range
 U - Indicates the compound was analyzed for, but not detected

Kimberley Mack

Test results meet the requirements of NELAC unless otherwise noted.

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Result(s) reported meet(s) NYS Regulatory Limit(s).
 Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.

Date Reported: 11/03/2020



Laboratory Results

Results for the samples and analytes requested
 The lab is not directly responsible for the integrity of the sample before receipt at the lab and is responsible only for the certified tests

Sample Information:

Type: Drinking Water
 Origin: Raw Well
 Routine

Hampton Bays Water District
 P.O. Box 1013
 Hampton Bays, NY 11946

Lab No. : 70148593012
 Client Sample ID.: S-127163

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 10/07/2020 05:25 AM Point S-127163
 Received : 10/07/2020 04:45 PM Location Well #5-1
 Collected By CLIENT

Analytical Method: EPA 522		Prep Method: EPA 522			Prep Date: 10/08/2020 12:30		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
1,4-Dioxane (p-Dioxane)	<0.020		1	ug/L	1	10/09/2020 10:56	012 AG2R1/2
Surr: 1,4-Dioxane-d8 (S)	91%		1	%REC		10/09/2020 10:56	012 AG2R1/2

Analytical Method: SM22 9223B Colilert		Prep Method: SM22 9223B Colilert			Prep Date: 10/07/2020 5:55 PM		
Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
E.coli	Absent		1		Absent	10/08/2020 11:55	012 SP5T1/1
Total Coliforms	Absent		1		Absent	10/08/2020 11:55	012 SP5T1/1

Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.
 ND - Not Detected at or above adjusted reporting limit.
 J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range
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Kimberley Mack

Test results meet the requirements of NELAC unless otherwise noted.

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Result(s) reported meet(s) NYS Regulatory Limit(s).
 Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.

Date Reported: 11/03/2020

WorkOrder :
70148593

Laboratory Certifications

Pace Analytical Services Long Island

575 Broad Hollow Rd, Melville, NY 11747
New York Certification #: 10478 Primary Accrediting Body
New Jersey Certification #: NY158
Pennsylvania Certification #: 68-00350
Connecticut Certification #: PH-0435
Maryland Certification #: 208
Rhode Island Certification #: LAO00340
Massachusetts Certification #: M-NY026
New Hampshire Certification #: 2987

Sample Request Form PUBLIC WATER SUPPLIER

KL Jarw To Lab 3
10/7/20 1045

WO#: 70148593



Date: 10-7-20

Collected By: *W Booth*
Accepted By: *W Booth*
Cooler Temp: *1.4* °C / *12.10*

WELL OFF LINE

WELL RUN TO SYSTEM

YES NO VOC'S PRESERVED WITH HCl

Sample Types	Purpose	Origin	Treatment Types
PW - Potable Water	RO - Routine	D - Distribution	AST - Air Stripper
GW - Groundwater	RE - Resample	RW - Raw Well	GAC - Granular Activated Charcoal
SW - Surface Water	S - Special	TW - Treated Well	N - Nitrate Removal Plant
WW - Waste Water		T - Tank	FE - Iron Removal Plant
AQ - Aqueous		MW - Monitoring Well	O - Other
S - Soil		I - Influent	
		E - Effluent	

Name or Code: _____
Address: _____
Phone #: _____
Attn: _____
Proj. # or (Name): _____
Bill To: _____
Copies To: _____

Sample Info:

Date/Time Collected:	Sample Type	Location	Origin	Treatment Type	Purpose	Field Readings Cl ₂ pH/Temp	Analysis	Lab No.
8:30 10-7-20	GW	Well 1-3	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT, NIN, ILM	001
9:00 10-7-20	GW	Well 1-2	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT, NIN, ILM	002
9:15 10-7-20	GW	Well 1-1	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT, NIN, ILM	003
8:50 10-7-20	GW	BLEND INF. PLANT	RW	-	RO		PFC, PACT, NIN, ILM	004
8:40 10-7-20	PW	BLEND EFF. PLANT	IS	-	RO	7.09	PFC, PACT, NIN, ILM	005
6:00 10-7-20	GW	Well 2-1	RW	-	RO	1.17	PFC, 1-4 Diox, Hex Val PACT	006
6:15 10-7-20	GW	Well 2-2	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT	007
7:35 10-7-20	GW	Well 3-1	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT	008
7:15 10-7-20	GW	Well 3-2	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT	009
7:50 10-7-20	GW	Well 3-3	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT	010
6:50 10-7-20	GW	Well 4-1	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT ILM	011
Remarks: 6:40 10-7-20	GW	Well 4-2	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT, ILM	
6:43 10-7-20	PW	BLEND 4-1,4-2	IS	-	RO	7.14	ILM	
5:25 10-7-20	GW	BLEND 4-1,4-2	RW	-	RO		PFC, 1-4 Diox, Hex Val PACT	012



Sample Condition Upon Receipt

WO#: 70148593

PM: KMM

Due Date: 10/20/20

CLIENT: HBW

Client Name: HBW

Courier: Fed Ex UPS USPS Client Commercial Pace Other

Tracking #: _____

Custody Seal on Cooler/Box Present: Yes No Seals intact: Yes No

Temperature Blank Present: Yes No

Packing Material: Bubble Wrap Bubble Bags Ziploc None Other

Type of Ice: Wet Blue None

Thermometer Used: TH091

Correction Factor: -0.2

Samples on ice, cooling process has begun

Cooler Temperature (°C): 1.4

Cooler Temperature Corrected (°C): 1.2

Date/Time 5035A kits placed in freezer _____

Temp should be above freezing to 6.0°C

USDA Regulated Soil (N/A, water sample)

Date and Initials of person examining contents: KW 10/7/20

Did samples originate in a quarantine zone within the United States: AL, AR, CA, FL, GA, ID, LA, MS, NC, NM, NY, OK, OR, SC, TN, TX, or VA (check map)? YES NO

Did samples originate from a foreign source (internationally, including Hawaii and Puerto Rico)? Yes No

If Yes to either question, fill out a Regulated Soil Checklist (F-LI-C-010) and include with SCUR/COC paperwork.

			COMMENTS:
Chain of Custody Present:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	2.
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	3.
Sampler Name & Signature on COC:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	5.
Short Hold Time Analysis (<72hr):	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	7.
Sufficient Volume: (Triple volume provided for MS/MSD)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	8.
Correct Containers Used:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	9.
-Pace Containers Used:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
Containers Intact:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved container.
Sample Labels match COC:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	12.
-Includes date/time/ID/Analysis Matrix SL <input checked="" type="checkbox"/> OIL			
All containers needing preservation have been checked	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A	13. <input type="checkbox"/> HNO ₃ <input type="checkbox"/> H ₂ SO ₄ <input type="checkbox"/> NaOH <input type="checkbox"/> HCl
pH paper Lot # <u>4c98032</u>			Sample #
All containers needing preservation are found to be in compliance with EPA recommendation? (HNO ₃ , H ₂ SO ₄ , HCl, NaOH>9 Sulfide, NaOH>12 Cyanide)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> N/A	Initial when completed: _____ Lot # of added preservative: _____ Date/Time preservative added: _____
Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water). Per Method, VOA pH is checked after analysis			
Samples checked for dechlorination:	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14. Positive for Res. Chlorine? Y N
KI starch test strips Lot #			
Residual chlorine strips Lot #			
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Present:	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	16.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if applicable): _____			

Client Notification/ Resolution:

Field Data Required? Y / N

Person Contacted: _____

Date/Time: _____

Comments/ Resolution: _____