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# DEPARTMENT OF ENVIRONMENTAL PROTECTION

B

# BACTERIOLOGICAL ANALYSIS REPORT - CONTAMINANT ID#3100

| PWS ID # | Public Water System Name | Town/City | Laboratory Name & ID # |
|---|---|---|---|
| 1191000 | Monson Water & Sewer Dept. | Monson | Spectrum Analytical, Inc. M-MA138 |

| | | DEP Approved Sample Site | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Sample Type | Lab Sample ID # | Code # | Location | Collection Date | Collection Time | Analysis Date | TCM Code # | Tot Coliform/ 100ml** | FC/ECM Code # | Fecal - E.Coli/ 100ml** | Chlor. Residual | HPC/ ml | Sample Collected by: |
| RS | SA52310-01 | 001 | Gate House | 10/10/06 | 08:32 | 10/10/06 | *303 | 0 | *303 | | | | Tom Murphy |
| RS | SA52310-02 | 003 | Middle School | 10/10/06 | 08:50 | 10/10/06 | *303 | 0 | *303 | | | | Tom Murphy |
| RS | SA52310-03 | 009 | MDC Meter Bld. | 10/10/06 | 09:03 | 10/10/06 | *303 | 0 | *303 | | | | Tom Murphy |
| RS | SA52310-04 | 007 | Fire Station | 10/10/06 | 09:25 | 10/10/06 | *303 | 0 | *303 | | | | Tom Murphy |
| RW | SA52310-06 | | Bunyan Road Well | 10/10/06 | 09:11 | 10/10/06 | *303 | 0 | *303 | | | | Tom Murphy |
| RW | SA52310-07 | | Palmer Road Well | 10/10/06 | 09:17 | 10/10/06 | *303 | 0 | *303 | | | | Tom Murphy |
| | | | | | | | | | | | | | |

| SAMPLE TYPE KEY |
|---|
| RS- ROUTINE SAMPLE |
| RO- ORIGINAL SITE REPEAT |
| UR- UPSTREAM REPEAT |
| DR- DOWNSTREAM REPEAT |
| AR- ADD. REPEAT(DIST SYSTEM) |
| RW- RAW WATER |
| SS- SPECIAL |
| PT- PLANT TAP SAMPLE |

| TOTAL COLIFORM METHOD(TCM) CODE # | | | |
|---|---|---|---|
| MF | 3 | 0 | 3 |
| MTF | 3 | 0 | 5 |
| P-A | 3 | 0 | 7 |
| ONPG | 3 | 0 | 9 |
| *** | 3 | 1 | 1 |

| FECAL COLIFORM/ E. COLI METHOD (FC/ECM) CODE # | | | |
|---|---|---|---|
| EC | 4 | 0 | 0 |
| SWTR-MFC raw water | 4 | 0 | 1 |
| MMO-MUG | 4 | 0 | 6 |
| EC-MUG | 4 | 0 | 8 |
| NA-MUG | 4 | 1 | 0 |

REMARKS: *303=EPA Method 1604: Total Coliforms and Escherichia coli in Water by Membrane Filtration Using a Simultaneous Detection Technique (MI Medium)

SUBCONTRACTED LAB (IF APPLICABLE):

ANALYZED BY: Spectrum Analytical, Inc. (LAB USE) DATE: 10/10/06

AUTHORIZED BY: (LAB USE) DATE: 10/18/06

* LAB ID# ASSIGNED BY STATE CERTIFICATION PROGRAM
** CAN BE EXPRESSED AS #/100ML, PRESENT(P), ABSENT(A), OR TOO NUMEROUS TO COUNT (TNTC)
*** COLISURE METHOD - THIS CAN DO TOTAL COLIFORM and E.COLI SIMULTANEOUSLY, HOWEVER THE SAMPLE MUST BE INCUBATED 28 TO 48 HOURS.

**COPY 1: COPY TO DEP REGIONAL OFFICE; COPY 2: OWNER COPY; COPY 3: LAB COPY**

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