

3100 Coliform, Total

3014 Coliform, E-Coli

Absent

Absent

06/10/24 14:13 / caa

06/10/24 14:13 / caa

LABORATORY ANALYTICAL REPORT

Prepared by Billings, MT Branch

Analyses		Result	Units	Sale/Unsale	Qualifier	WEITOU	Analysis Dale / Dy
Analyses		Result	Units	Safe/Unsafe	Qualifier	Method	Analysis Date / By
Compliance Sam	ole: YES	Sample Type: F	RT	Residual Chlorine (Field): 1.10)	Res Cl Type: Unspecified
Lab ID:	B24060750	0-001A					
Facility Name:	FORT SMI	TH WATER AND	SEWEF	RDISTRICT		S	ampled By: Josh McCraw
PWS ID:	MT000476	5 Facility ID:	DS001	Sample Point ID:	SP001		Matrix: Drinking Water
Client Sample ID:	S6					Rec	eived Date: 06/10/24 12:15
Project:	MT000476	5				Colle	ction Date: 06/10/24 10:15
Client:	Fort Smith	Water and Sewer	^r Dist			R	eport Date: 06/11/24

SAFE

A9223 B

A9223 B

per 100ml

per 100ml

 Comments:
 The notation "SAFE" indicates that the water was bacteriologically SAFE when sampled.

 The notation "UNSAFE" indicates that the water was bacteriologically UNSAFE when sampled.

Qualifiers:



B24060750

Work Order Receipt Checklist

Fort Smith Water and Sewer Dist

Login completed by:	Kyelie L. Pflock		Date	Received: 6/10/2024	
Reviewed by:	Ibarlage		Re	ceived by: LEL	
Reviewed Date:	6/10/2024		Car	rier name: Hand Deliver	
Shipping container/cooler in	good condition?	Yes 🗹	No 🗌	Not Present	
Custody seals intact on all sl	hipping container(s)/cooler(s)?	Yes 🗹	No 🗌	Not Present	
Custody seals intact on all sa	ample bottles?	Yes	No 🗌	Not Present 🗹	
Chain of custody present?		Yes 🗹	No 🗌		
Chain of custody signed whe	en relinquished and received?	Yes 🗹	No 🗌		
Chain of custody agrees with	n sample labels?	Yes 🗹	No 🗌		
Samples in proper container,	/bottle?	Yes 🗹	No 🗌		
Sample containers intact?		Yes 🗹	No 🗌		
Sufficient sample volume for	indicated test?	Yes 🗹	No 🗌		
All samples received within h (Exclude analyses that are c such as pH, DO, Res CI, Su	onsidered field parameters	Yes 🗹	No 🗌		
Temp Blank received in all s	hipping container(s)/cooler(s)?	Yes 🗹	No 🗌	Not Applicable	
Container/Temp Blank tempe	erature:	7.2°C On Ice	- From Field		
Containers requiring zero he bubble that is <6mm (1/4").	adspace have no headspace or	Yes	No 🗌	No VOA vials submitted	
Water - pH acceptable upon	receipt?	Yes	No 🗌	Not Applicable	

Standard Reporting Procedures:

Lab measurement of analytes considered field parameters that require analysis within 15 minutes of sampling such as pH, Dissolved Oxygen and Residual Chlorine, are qualified as being analyzed outside of recommended holding time.

Solid/soil samples are reported on a wet weight basis (as received) unless specifically indicated. If moisture corrected, data units are typically noted as –dry. For agricultural and mining soil parameters/characteristics, all samples are dried and ground prior to sample analysis.

The reference date for Radon analysis is the sample collection date. The reference date for all other Radiochemical analyses is the analysis date. Radiochemical precision results represent a 2-sigma Total Measurement Uncertainty.

For methods that require zero headspace or require preservation check at the time of analysis due to potential interference, the pH is verified at analysis. Nonconforming sample pH is documented as part of the analysis and included in the sample analysis comments.

Contact and Corrective Action Comments:

None

Chain of Custody (COC) & Analytical Request Record

A1401070 # 4 1 ah Marke

www.energylab.com	iylab.com				-					Lab Wo	Lab Workorder #: DAYU 60 150	DAXO	09/09
Project Information	ation								Labor	Laboratory Use			
Client:	Fort Smith Water	and	Sewer Dist		Quote: N/A	A			Critica	Critical Hold Time:	ne: 30 Hours	ſS	1
Project:	MT0004765				BO#: 18	182994-S			# of S	# of Samples:	÷		ない
Purchase Order:					<i>EE#</i> : 58	58671			Matrix:	e	Drinking	Drinking Water	記念回
Contact/Phone:	Josh McCraw	(66	(662)419-7200		Turn-Around Time:	nd Time		Standard					
Comments: M	Monthly PWS Bacteri	eria				Anal	ysis F	Analysis Requested					
					Hold Time (Days)	e (Days)	-	1.25		₽.	Public Water Supply (PWS) Required System Information	upply (PWS) n Informatio	Required
							the second s						
*Please fill in the Samp	*Please fill in the Sample Type below using one of the acceptable sample types for	he acceptabl	e sample types for	Public Water	Chlorine	LS	And in case of the local diversity of the local diversity of the local diversity of the local diversity of the	(8 8)					
Bacteria Samples R=Routine RP=Repeat	peat S=Special GWF	GWR=Groundwater Rule	ter Rule		(circle one)	ənistr	-	222A		-			
	entification	Samp Tvpe*	Collection	n Date/Time	Total / Free (ppm)	# of Con	st2\Aq3 sacteria) ƙidding	_		PWS System ID	PWS Facility ID	PWS Sample Pt ID
1 56		ď	c/10/24		1,10	-	×	×		M	MT0004765	DS001	SPOOL
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4					-								
5											-		
9													
7					-								
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10					<u>1</u>								
Ħ													
Custody	Lab provided preservatives were used	ervatives No		Sampler Name (if different than Relinquished by):	(if different th	lan Reli	nquish	led by):	Sampl	Sampler Phone:			
MUST be	Relinquished by print)	Cat	C /10 DY ())	Signature	J	Receiv	Received by (print)	-	õ	Date/Time	Signature	Le la	
signed	Relinquished by (print)	Dat	Date/Time	Signature	*	Receiv	ceived by Laborat	Received by Laporajory (pr.M)		4 (10/24 12,15	12,15 Signatur	"pet	chance
Date Printed: 04/10/2024	10/2024			Ξ	EE: BL - 58671	-						COC	COC: Page 1 of 1