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LABORATORY ANALYTICAL REPORT

Prepared by Billings, MT Branch

Client: Fort Smith Water and Sewer Dist

Project: MT0004765

Client Sample ID: S6-Church

PWS ID: MT0004765 **Facility ID:** DS001 **Sample Point ID:** SP001

Facility Name: FORT SMITH WATER AND SEWER DISTRICT

Lab ID: B24030448-001A

Report Date: 03/08/24

Collection Date: 03/07/24 14:15

Received Date: 03/07/24 15:46

Matrix: Drinking Water

Sampled By: Sandy Kust

Compliance Sample: YES

Sample Type: RT

Residual Chlorine (Field): 0.62

Res Cl Type: Unspecified

Analyses	Result	Units	Safe/Unsafe	Qualifier	Method	Analysis Date / By
MICROBIOLOGICAL						
3100 Coliform, Total	Absent	per 100ml	SAFE		A9223 B	03/07/24 16:49 / spb
3014 Coliform, E-Coli	Absent	per 100ml			A9223 B	03/07/24 16:49 / spb

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:



Work Order Receipt Checklist

Fort Smith Water and Sewer Dist

B24030448

Login completed by: Addison A. Gilbert

Date Received: 3/7/2024

Reviewed by: Ilinn

Received by: LEL

Reviewed Date: 3/7/2024

Carrier name: Hand Deliver

Shipping container/cooler in good condition?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not Present <input type="checkbox"/>
Custody seals intact on all shipping container(s)/cooler(s)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>
Custody seals intact on all sample bottles?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>
Chain of custody present?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Chain of custody signed when relinquished and received?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Chain of custody agrees with sample labels?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Samples in proper container/bottle?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Sample containers intact?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Sufficient sample volume for indicated test?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
All samples received within holding time? (Exclude analyses that are considered field parameters such as pH, DO, Res Cl, Sulfite, Ferrous Iron, etc.)	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
Temp Blank received in all shipping container(s)/cooler(s)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
Container/Temp Blank temperature:	2.0°C On Ice		
Containers requiring zero headspace have no headspace or bubble that is <6mm (1/4").	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No VOA vials submitted <input checked="" type="checkbox"/>
Water - pH acceptable upon receipt?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>

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



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Chain of Custody (COC) & Analytical Request Record

Lab Workorder #: 1321030418

Project Information

Client: Fort Smith Water and Sewer Dist

Project: MT0004765

Purchase Order:

Contact/Phone: Josh McCraw (662) 419-7200

Comments: Monthly PWS Bacteria

Laboratory Use

Critical Hold Time: 30 Hours

of Samples: 1

Matrix: Drinking Water

Quote: N/A

BO#: 180667-S

EE#: 56355

Turn-Around Time: Standard



Analysis Requested

Hold Time (Days) 1.25

Residual Chlorine (circle one)

Total / Free (ppm)

of Containers

EPA/State Compliance

Bacteria, Public Water Supply (A9223 B)

Matrix

DW

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

Public Water Supply (PWS) Required System Information

PWS System ID

PWS Facility ID

PWS Sample Pt ID

MT0004765

DS001

SP001

Lab provided preservatives were used ☐ Yes ☐ No

Relinquished by (print) *Josh McCraw*

Relinquished by (print) *Josh McCraw*

Date/Time 3-7-24

Date/Time 1546

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Sampler Name (if different than Relinquished by):

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Sampler Phone:

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

Signature *Josh McCraw*

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Date Printed: 01/25/2024

EE: BL - 56355

COC: Page 1 of 1