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Analytical Report

Report To: BREESE II WATER SYSTEM
209 GURNSEY DRIVE
RED BLUFF, CA 96080
Attention: AUTUMN WALKER
Project: DWM - Non-Regulatory

Lab No: 2211202
Reported: 09/29/22
Phone: (530) 527-0170

Included in this report are laboratory results for work order 2211202, received on 09/28/22. All analyses were performed in strict adherence to our established Quality Manual. Any qualifications or abnormalities are listed in the Notes and Definitions and/or the Case Narrative section of this report. The project Chain of Custody and laboratory sample receipt record are included as attachments to this report.

System Name:
System Number:

Sampled By: Tony Casados
Employed By:

Sample Results

Sample ID: 120 Gurnsey Drive (2211202-01) **Sampled:** 09/28/22 07:45
Sample Type: Grab **Received:** 09/28/22 12:27
Source Name: **Receipt Temp (c):** 10.4
Chlorine (mg/l): 1.57

Analyte	Units	Results	Qualifier	Method	Analyzed	Prepared	Batch / Analyst
Total Coliforms	Present/Absent	Absent		SM 9223 B Collert-18	09/29/22 08:28	09/28/22 14:28	B211568 / CPY
E. Coli	-	Absent		-	-	-	-

Approved By

I certify that these results meet the requirements of the applicable accreditation standard, and were performed in compliance with the stated analytical methods unless otherwise noted in the qualifications or Case Narrative section of this report.

Approved By: 
Nikki Aceituno, Microbiologist
Pace Analytical Services LLC - Redding CA
California ELAP Cert #1677

cc:

The data included in this report relate only to the specific items as received. Interpretation and use of the information included in this report is the sole responsibility of the client. This report may not be reproduced except in full.

BASIC LABORATORY, INC. - CHAIN OF CUSTODY (FOR DRINKING WATER) - MICROBIOLOGY

2211202

LABORATORY WORK ORDER # 2211202
PAGE 1 OF 1

BREESE II WATER SYSTEM

MAILING ADDRESS
PO BOX 9052
RED BLUFF, CA 96080

PROJECT NAME

DWM-Non Regulated

PROJECT / PO #

5200008 TEHAMA

Client Name: MIKE BUTLER
Phone: 530-680-7079
Alt. contact for positive results
Name: MIKE BUTLER
Phone: 530-680-7079

Report to: Email Mail Handcopy
Name / Attention: AUTUMN WALKER
Phone: 530-527-170
Email: breeewater@gmail.com
Regulatory Agency: Tehama Co Environmental Health

TURN AROUND TIME REQUESTED
 Standard Rush

SPECIAL INSTRUCTIONS / PO

CC REPORTS TO MIKE BUTLER

Sample Location / Identification / Description: 120 GURNESEY DRIVE

ID #	DATE SAMPLED	TIME SAMPLED	SAMPLE TYPE*	REGULATORY ID / SOURCE CODE (if Applicable)		ANALYSES REQUESTED
				REGULATORY ID	SOURCE CODE	
1	9-28-22	0745	NR		1	Field Chlorine Residual (mg/L) Total Coliforms / E. coli (Present / Absent) Total Coliforms / E. coli (Enumerated - Grand-Tray)

SAMPLING / ANALYSIS COMMENTS: Total Coliform/E. coli method used is SM 9223B, unless otherwise noted.

SAMPLED BY: (please print) TONY CASABOS / PACE ANALYTICAL - REDDING
RELINQUISHED DATE / TIME: 9-28-22 1220
Signature: Tony Casabos
DATE: 9/28/22 1227
Relinquished by: [Signature]

PER AUTHORIZATION AGREEMENT
RECEIVED BY: [Signature]
DATE/TIME: 9/28/22 1227
RELINQUISHED BY: [Signature]
DATE/TIME: 9/28/22 17:52
LOGGED BY LAB: [Signature]

RECEIVED BY LAB: [Signature]
DATE/TIME: 9/28/22 17:52



SAMPLE RECEIPT CHECKLIST

WO NUMBER 22F1202

SHIPPING INFORMATION	
Walk-In	<input type="checkbox"/>
Courier	<input type="checkbox"/>
FedEx	<input type="checkbox"/>
UPS	<input type="checkbox"/>
Other	<input checked="" type="checkbox"/> T
Cooler Present?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Samples Received By: NSA Date: 9/28/22

Samples received on ice? Yes No

Samples received the same day collected? Yes No

Ice type? Wet Blue Other _____

SAMPLE TEMPERATURES AT RECEIPT Therm. ID (Circle one): Therm-36 Therm-37 Therm-59 Other: _____

Sample ID	Corr Temp (°C)	Sample ID	Corr Temp (°C)	Sample ID	Corr Temp (°C)	Sample ID	Corr Temp (°C)
-01	<u>10.4</u>	-06		-11		-16	
-02		-07		-12		-17	
-03		-08		-13		-18	
-04		-09		-14		-19	
-05		-10		-15		-20	

SAMPLE CONDITION AND PROCESSING

Samples Processed and Labeled By: NSA Date: 9/28/22

Custody seals present? Yes No NA

Samples in proper containers? Yes No NA

Sample containers damaged? Yes No NA

Sufficient sample volume for indicated tests? Yes No NA

Samples received within holding times? Yes No NA

Are VOA vials free of headspace? Yes No NA

Dechlor. agent labels present (i.e., colliert, TTHMs)? Yes No NA

SAMPLE PRESERVATION NA

Preserved in the field? Yes No NA

Preserved in the lab? Yes No NA Lab Preservation Date & Time _____

H2SO4 (ID _____) HNO3 (ID _____) NaOH (ID _____)

Other (ID _____) Other (ID _____) Other (ID _____)

H2SO4 preserved samples confirmed to pH <2 (i.e., E350.1, SM5220, SM5310)? Yes No NA

HNO3 preserved samples confirmed to pH <2 (i.e., E200.7, E200.8, 6010)? Yes No NA

NaOH preserved samples confirmed to pH >10 (cyanide) or >9 (sulfide)? Yes No NA

Hexavalent Chromium (DW) preserved samples confirmed to pH >8 & Chlorine <0.1 mg/l? Yes No NA

Hexavalent Chromium (W) preserved samples confirmed to pH 9.3 - 9.7? Yes No NA By: _____ Meter ID: _____

Are proper preservation labels present? Yes No NA

Preservation checked at Lab? Date & Time _____ Test Strip (ID _____)

Preservation and Preservation Checks performed by: _____

COMMENTS, DISCREPANCIES, ANOMALIES

