



April 02, 2024

AUTUMN WALKER
BREESE II WATER SYSTEM
209 GURNSEY DRIVE
RED BLUFF, CA 96080

RE: DRINKING WATER MONITORING

Enclosed are the results of analyses for samples received by our laboratory on 3/25/2024. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

A handwritten signature in black ink that reads "Ricky Jensen".

Ricky Jensen For Nikki Aceituno
Client Services Manager



2218 Railroad Avenue
Redding, California 96001
voice 530.243.7234
fax 530.243.7494

Analytical Report

Report To: BREESE II WATER SYSTEM
209 GURNSEY DRIVE
RED BLUFF, CA 96080
Attention: AUTUMN WALKER
Project: DRINKING WATER MONITORING

Lab No: 24C0634
Reported: 04/02/24
Phone: (530) 527-0170

The following pages contain the laboratory results for Work Order 24C0634, received on 03/25/24. 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.

Samples in this Report

Lab ID	Sample	Matrix	Date Sampled	Date Received
24C0634-01	120 GURNSEY DRIVE	Drinking Water	03/25/2024	03/25/2024
24C0634-02	WELL 1	Drinking Water	03/25/2024	03/25/2024
24C0634-03	WELL 1	Drinking Water	03/25/2024	03/25/2024



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Analytical Report

Sample Results

Description: 120 GURNSEY DRIVE	Lab ID: 24C0634-01	Sampled: 03/25/24 07:30
Matrix / Type: Drinking Water (Routine)		Received: 03/25/24 14:50

Microbiology - Redding Location

Analyte	Units	Results	Qualifier	MDL	RL	Method	Analyzed	Prepared	Batch / Analyst
Total Coliforms	Present/Absent	Absent				SM 9223 B Coliort-13	03/26/24 11:10	03/25/24 17:10	B4C1909 / MCM
E. Coli	Present/Absent	Absent				SM 9223 B Coliort-18	03/26/24 11:10	03/25/24 17:10	B4C1909 / MCM



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Analytical Report

Description: WELL 1 **Sampled:** 03/25/24 07:42
Matrix / Type: Raw Water (Source) **Lab ID:** 24C0634-02 **Received:** 03/25/24 14:50

Microbiology - Redding Location

Analyte	Units	Results	Qualifier	MDL	RL	Method	Analyzed	Prepared	Batch / Analyst
Total Coliforms	MPN/100 ml	<1			1	SM 9223 B Colbert-18	03/26/24 11:10	03/25/24 17:10	B4C1908 / MCM
E. Coli	MPN/100 ml	<1			1	SM 9223 B Colbert-18	03/26/24 11:10	03/25/24 17:10	B4C1908 / MCM



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Analytical Report

Description: WELL 1 **Sampled:** 03/25/24 07:42
Matrix / Type: Raw Water (Grab) **Lab ID:** 24C0634-03 **Received:** 03/25/24 14:50

General Chemistry - Redding Location

Analyte	Units	Results	Qualifier	MDL	RL	Method	Analyzed	Prepared	Batch / Analyst
Nitrate as N	mg/l	5.94			0.20	EPA 300.0	03/26/24 10:53	03/26/24 10:53	B4C1904 / RRS

Quality Control Data

Analyte	Result	RL	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit	Qualifier
General Chemistry - Redding Location Batch B4C1904 - General Prep - GC										
Blank										
Nitrate as N	ND	0.10	mg/l							
LCS										
Nitrate as N	0.91	0.10	mg/l	1.00		91.3	90-110			
Duplicate	Source: 24C0640-02									
Nitrate as N	0.46	0.10	mg/l		0.46			0.130	20	
Matrix Spike	Source: 24C0640-02									
Nitrate as N	1.43	0.10	mg/l	1.00	0.46	96.8	80-120			

Notes and Definitions

- ND Analyte NOT DETECTED at or above the detection limit
- RPD Relative Percent Difference
- MDL Method Detection Limit
- RL Reporting Limit
- * or # The laboratory does not hold CA-ELAP accreditation for this analyte or method. Accreditation may not be available from CA-ELAP for this analyte or method.
- ** The laboratory holds accreditation for this analyte or method with WA-ECY Lab ID: Lab ID C783. Accreditation is not offered for this method by CA-ELAP
- Note 2 According to 40 CFR Part 136 Table II, the following tests should be analyzed in the field within 15 minutes of sampling: pH, chlorine, dissolved oxygen, and sulfite

Accreditations Held:
 Redding Location: CA-ELAP - Cert # 1677
 Chico Location: CA-ELAP - Cert # 2718



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Analytical Report

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.

A handwritten signature in black ink that reads "Ricky Jensen".

Approved By: _____

Ricky Jensen For Nikki Aceituno, Client Services Manager

Pace Analytical Services LLC - Redding CA

The data included in this report relate only to the specific items as received, recorded on the Chain of Custody, and analyzed at the laboratory. All data is expressed on a wet-weight basis unless otherwise noted. 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, and may not be modified in any way without prior written approval from Pace Analytical. Use of this report in whole or part for public advertising or any other commercial purpose requires prior written authorization.



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Analytical Report

BREESE II WATER SYSTEM
AUTUMN WALKER
209 GURNSEY DRIVE
RED BLUFF CA 96080

Report Date: 04/02/24
Lab Sample ID: 24C0634-01

System Name: BREESE SUBDIVISION 2
PS Code:
Client Sample ID: 120 GURNSEY DRIVE
Sampled By: Michael Hetzler
Sample Type: Routine

Field Chlorine (mg/l): 0.75
Sample Date: 03/25/24 07:30
Sample Received: 03/25/24 14:50
System Number: CA5200008

Test results listed below with a valid CLIP code will be electronically submitted the state's drinking water database via the California Laboratory Intake Portal (CLIP). A copy all of the results on this page (with or without a valid CLIP code) will also be submitted directly to the appropriate regulatory agency as required by law. If you believe any information on this report to be inaccurate, please let us know as soon as possible.

Regulatory Agency CC: Tehama County Environmental Health

CLIP	MICROBIOLOGY	RESULTS	UNITS	RL	DLR	PRIMARY MCL / AL	SECONDARY MCL
	Total Coliforms	Absent	Present/Absent				
	E. Coli	Absent	Present/Absent				



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Analytical Report

BREESE II WATER SYSTEM
AUTUMN WALKER
209 GURNSEY DRIVE
RED BLUFF CA 96080

Report Date: 04/02/24
Lab Sample ID: 24C0634-02

System Name: BREESE SUBDIVISION 2
PS Code: CA5200008_001_001
Client Sample ID: WELL 1
Sampled By: Michael Hetzler
Sample Type: Source

Field Chlorine (mg/l): 0.00
Sample Date: 03/25/24 07:42
Sample Received: 03/25/24 14:50
System Number: CA5200008

Test results listed below with a valid CLIP code will be electronically submitted the state's drinking water database via the California Laboratory Intake Portal (CLIP). A copy all of the results on this page (with or without a valid CLIP code) will also be submitted directly to the appropriate regulatory agency as required by law. If you believe any information on this report to be inaccurate, please let us know as soon as possible.

Regulatory Agency CC: Tehama County Environmental Health

CLIP	MICROBIOLOGY	RESULTS	UNITS	RL	DLR	PRIMARY MCL / AL	SECONDARY MCL
	Total Coliforms	<1	MPN/100 ml	1			
	E. Coli	<1	MPN/100 ml	1			



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Analytical Report

BREESE II WATER SYSTEM
 AUTUMN WALKER
 209 GURNSEY DRIVE
 RED BLUFF CA 96080

Report Date: 04/02/24
 Lab Sample ID: 24C0634-03

System Name: BREESE SUBDIVISION 2
 PS Code: CA5200008_001_001
 Client Sample ID: WELL 1
 Sampled By: Michael Hetzler
 Sample Type: Grab

Field Chlorine (mg/l):
 Sample Date: 03/25/24 07:42
 Sample Received: 03/25/24 14:50
 System Number: CA5200008

Test results listed below with a valid CLIP code will be electronically submitted the state's drinking water database via the California Laboratory Intake Portal (CLIP). A copy all of the results on this page (with or without a valid CLIP code) will also be submitted directly to the appropriate regulatory agency as required by law. If you believe any information on this report to be inaccurate, please let us know as soon as possible.

Regulatory Agency CC: Tehama County Environmental Health

CLIP	INORGANIC CHEMICAL	RESULTS	UNITS	RL	DLR	PRIMARY MCL / AL	SECONDARY MCL
1040	Nitrate as N	5.94	mg/l	0.20	0.40	10	

Note 2 According to 40 CFR Part 136 Table II, the following tests should be analyzed in the field within 15 minutes of sampling: pH, chlorine, dissolved oxygen, and sulfite.

* Stars denote tiered Maximum Contaminant and/or Action Levels (* 250-500-800, ** 900-1600-2200, *** 500-1000-1500).

ND Not detected at the reporting limit

DLR California's Detection Limit for the purpose of reporting

RL Laboratory's Reporting Limit

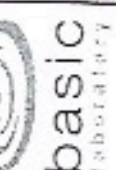
MCL / AL Maximum Contaminant Level or Action Level

SECONDARY MCL California recognizes secondary MCLs, set to protect the odor, taste, and appearance of drinking water.

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

2215 Railroad Avenue, Redding, CA 96001 (530) 243-7234 FAX (530) 243-7494
 3860 Morrow Lane, Suite F Chico, CA 95928 (530) 854-8966 FAX: (530) 854-5143

LABORATORY WORK ORDER #
 2410634



PAGE 1 OF 1
 PWS # (if Applicable)
 5200008 TEHAMA

PROJECT NAME
 DRINKING WATER MONITORING

PROJECT / PO #
 5200008 TEHAMA

REPORT TO NAME / ATTENTION
 AUTUMN WALKER

TURN AROUND TIME REQUESTED
 Standard Rush

PHONE
 530-527-170

ANALYSES REQUESTED
 Total Coliforms / E. coli (Enumerated - Quant-Tray) 300.0 Nitrate

E-MAIL
 breesewater@gmail.com

REGULATORY AGENCY
 Tehama Co Environmental Health

REGULATORY ID / SOURCE CODE (if Applicable)

NUMBER OF CONTAINERS
 1 0.75 ✓
 1 0.00 ✓
 1 ✓

NAME: MIKE BUTLER
 Phone: 530-680-7079
 All contact for positive results

FIELD CHLORINE RESIDUAL (mg/L)

Weekend contact for positive results:
 Name: MIKE BUTLER
 Phone: 530-660-7079

SAMPLE LOCATION / IDENTIFICATION / DESCRIPTION

120 Gurnsey Drive
 Well 1

REGULATORY ID / SOURCE CODE (if Applicable)
 CA5200008_001_001
 CA5200008_001_001

NAME: MIKE BUTLER
 Phone: 530-660-7079

SAMPLE TYPE

1
 5A
 DWS

DATE SAMPLED

03/25/24 0730
 03/25/24 0742
 03/25/24 0742

TIME SAMPLED

AV PW
 AV PW
 AV PW

DATE

03/25/24
 03/25/24
 03/25/24

DATE

03/25/24 1450

DATE

RECEIVED BY
 RECEIVED BY
 RECEIVED BY LAB

DATE/TIME
 DATE/TIME
 DATE/TIME

SIGNATURE
 SIGNATURE
 SIGNATURE

DATE
 DATE
 DATE

SAMPLE TYPE CODES (NR = Non-Registered)
 1. Routine
 2. Repeat
 3. Re-analysis
 4. Special (Not for Regulatory)
 4A. Source Groundwater
 4B. Source Surface Water
 5. Other (Specify Regulatory)

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

SAMPLED BY: please print Michael Helzer / Pace Analytical - Redding
 RELINQUISHED DATE / TIME: 03/25/24 1450
 I authorize Basic Laboratory to perform the indicated tests. By signing I agree to the TERMS and CONDITIONS. (www.basiclab.com/terms)
 NAME: PER AUTHORITY AGREEMENT
 RECEIVED BY: [Signature]
 DATE: 3/25/24 1450
 RECEIVED BY LAB: [Signature]
 DATE: 3/25/24 1450
 For Official Lab Comments Only
 Effective Date: 7/1/2020
 A, B



SAMPLE RECEIPT CHECKLIST

WO NUMBER 240634

Samples Received Via:		
Fed-Ex <input type="checkbox"/>	Client Walk-In <input type="checkbox"/>	Counter <input type="checkbox"/>
UPS <input type="checkbox"/>	Pace Field Service <input checked="" type="checkbox"/>	Other <input type="checkbox"/>

Samples Received By: TC Date: 3/25/24 Time: 1450
 Are samples for regulatory compliance? Yes No

THERMAL PRESERVATION

Were samples received in a cooler? Yes No If no, take temperature of representative sample container and record below.
 If no, do they require thermal preservation? Yes No If no, why not? Non-regulatory Not Required by Method
 Samples received on ice? Yes No Ice type? Wet Ice Packs Other _____
 Samples received the same day collected? Yes No

Therm. ID (Circle one): Therm-36(IR) Therm-S9(IR) Therm-72(IR) Therm-73(IR) Therm-C01(IR) Therm-C02(IR) Other _____

Cooler #1 Init. Temp °C 9.3 Correction °C +0.3 Corrected Temp °C 9.6
 Cooler #2 Init. Temp °C _____ Correction °C _____ Corrected Temp °C _____
 Cooler #3 Init. Temp °C _____ Correction °C _____ Corrected Temp °C _____

No Cooler - Representative Sample Temperature: Init. Temp °C _____ Correction °C _____ Corrected Temp °C _____

Do samples received meet thermal preservation requirements? Yes No N/A

Thermal Preservation Notes/Discrepancies/Nonconformances: _____

SAMPLE CONDITION AND PROCESSING

Do all sample IDs on labels match the COC? Yes No
 Custody seals present? Yes No N/A
 Samples in proper containers? Yes No
 Sample containers damaged? Yes No
 Sufficient sample volume for indicated tests? Yes No
 Samples received with sufficient holding time? Yes No
 Are VOA vials free of headspace? Yes No N/A

CHEMICAL PRESERVATION

Were the sample containers received with labels that indicate that appropriate preservatives were present for the indicated tests? Yes No N/A
 Were samples received properly dechlorinated? Yes No N/A For Dechlorination checks done by analysts, were dechlor. agent labels present? Yes No
 Are any of the pH verification checks or dechlorination checks being performed by a subcontract laboratory? Yes No N/A

Preservation checked by Sample Receiving? Initials _____ Date & Time _____ Test Strip (ID) _____

If preservative(s) were added by Sample Receiving, where they added at the same time as pH verification? Yes No N/A If no, Date & Time _____

Yes	No	NA
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

H2SO4 preserved samples confirmed to pH <2 (i.e., E350.1, SM5220, SM5310)?
 HNO3 preserved samples confirmed to pH <2 (i.e., E200.7, E200.8, 6010)?
 NaOH preserved samples confirmed to pH >10 (cyanide) or >9 (sulfide)?

Added upon sample receipt? Yes No

Were any additional preservatives added after receipt because of a failed pH verification? Yes No Initial pH: _____ Final pH: _____

If yes, is addition of preservatives allowed by the method? Yes No Were additional preservatives added on the date of sampling? Yes No

List preservatives added at receipt:

Type: _____ Volume Added: _____ ID: _____ Type: _____ Volume Added: _____ ID: _____
 Type: _____ Volume Added: _____ ID: _____ Type: _____ Volume Added: _____ ID: _____

COMMENTS, DISCREPANCIES, ANOMALIES, NONCONFORMANCES

