## 2004 Drinking Water Monitoring Schedules

Vater Systen	n					Ту	ре	Source	Population	A	ctivity Date
00207504	MEADOV	V MOUNTAIN WS			С		SW	80		3/1/1988	
	SAMPI GROU		SCHED BEGIN		SAMI RQI						
3100 Total Co	oliform		1/1/1991	1	per	Mon	ith				
Analyte Name			Sample Requirement					Due in 2004			
COPPER				5	per	3Y		V			<b>✓</b>
LEAD				5	per	3Y					✓
FACILITY (	001	TYPE TP	MEADOW MTN	WTP N	O 1				SAMPLE PT	001	TYPE EP
	Analyte Gro	up Name		Sa	ample	Requ	irem	ents			Due in 2004
CDS FOR NIT	RATE	Nitrate			1	per	QT				<b>✓</b>
CDS FOR INC	ORGANICS	Inorganic Chemicals			1	per	YR				<b>✓</b>
CDS FOR FLU	JORIDE	Fluoride			1	per	YR				<b>✓</b>

## **Water Facility Inventory Report**

		Water	denity	IIIVCI	itory i	CP						
PWS PW	S Name		Di	strict	33 M	STAT	CLASS	SRC	-	AOP	CONN	POI
CO0207504 M	EADOW	MOUNTAIN WS	OI	QCD, CO F PUBLIO EALTH &	С	Α	С	SW	1/1	to 12/31	32	80
			Co	ntacts								
ROLE NAME					PHON	E	BUS	PH#		EXT	<b>EMERG</b>	PH#
AC LANDV	VER, DOI	NALD			303-74	7-2066	303-7	47-20	66			•
			Sam	ple Poir	nts							
WSF/TAG	TYPE	NAME	SP-ID	TYPE	DESCI	RIPTIC	NC			ACT	IVITY	
DS001	DS	DISTRIBUTION SYSTEM	RPDN	DS	REPEA	AT DO	WNSTRE	EAM		Α	6,	 /1/1974
DS001	DS	DISTRIBUTION SYSTEM	RPOR	DS	REPEA	AT OR	IGINAL			Α	6/	/1/1974
DS001	DS	DISTRIBUTION SYSTEM	RPOT	DS	REPEA	TO TA	HER			Α	6	/1/1974
DS001	DS	DISTRIBUTION SYSTEM	RPUP	DS	REPEA	AT UP	STREAM			Α	6	/1/1974
DS001	DS	DISTRIBUTION SYSTEM	RTOR	DS	ROUTI	NE OI	RIGINAL			Α	6	/1/1974
DS001	DS	DISTRIBUTION SYSTEM	THM01	DS						Α	11/1	1/2003
002	IN	WILLOW CREEK	002	RW						Α	1,	/1/2002
003	IN	FOX CREEK	003	RW						Α	1,	/1/2002
001	TP	MEADOW MTN WTP NO 1	001	EP						Α	1,	/1/2002
			Water Sy	stem F	acilities							
WSF/TAG#	NAI	ME	TY	/PE	CONSTR		ACTIVIT	Υ	AVAIL	WATER	. A	OP
DS001	DIS	TRIBUTION SYSTEM		)S		Α	6/1/	1974	Р			
003	FO	X CREEK	IN		A 6/1/1974		Р	SW				
002	WIL	LOW CREEK	IN			Α	6/1/	1974	Р	SW		
001	ME	ADOW MTN WTP NO 1	7	ГР		Α	6/1/	1974	Р	SW		

## LEAD & COPPER

## Colorado Department of Public Health and Environment Compliance Monitoring and Data Management Unit

## REPORTING FORM FOR <u>LEAD & COPPER</u> ANALYSES

PWSID #:CO-207504		COUNT	Y:B	oulder		
SYSTEM/ESTABLISHMENT I	NAME: Meadow Mountain V	Vater Company	8		er .	
- 1012.1112D1C155.	P.O. Box 162, Allens STREET ADDRESS/PO BOX	CITY	STATE	ZIP		
CONTACT PERSON:	Steve Tedord		PHONE:	(303)747-206	66	
LEFT COLUMN – To be f	illed out by water system authority	RIGH	T COLUMN	— To be filled o	ut by State Cert	ified Lab
SAMPLE # 404	<u>095</u>	LABORATO	RY RESULT	ΓS IN mg/L		
DATE COLLECTED: 7 / 12	2 / 04	LABORATO	RY JOB#_	1115-013 (4	04095)	
TIME: 6:30 am ar	n/pm	DATE ANAI	YZED:	7/15 & 8/	30 / 04	
SAMPLE COLLECTED BY:  Steve Tedford		ELEMENT	RESULT	EPA <u>ACTN LVL</u>	METHOD	LAE MD
SAMPLE LOCATION ADDRESS	5:	LEAD	BDL	0.015	200.9	0.00
<u>A</u>		COPPER	0.11	1.3	200.7	0.01
.ABORATORY NAMESte	wart Environmental Consultants, Inc.		LAI	B PHONE#	(970) 226-5	500
ATE SAMPLES RECEIVED IN	LABORATORY 7/12/04	8 (8)	TO	TAL NUMBER	RECEIVED	5
AB COMMENTS:		2 u		8	F 0	
eviewed & Approved by	Ope:	rations Manager Title	,	8	/ 31 / 04 Date	
		*		2		
AIL RESULTS TO:			QUE:	STIONS? CALI	L:	
Colorado Department of Po ATTN: Debbie Getz WQCD-CMDM-B2	ublic Health and Environment	as .	Debb	ie Getz at 303-69	92-3549	
4300 Cherry Creek Drive S Denver CO 80246-1530	outh					
R CDPHE OFFICE USE ONLY:	Entered on Data Entry Form on		INITL	ALS:		
	LEAD 90 <sup>th</sup> PERCENTILE =	CC	PPER 90 <sup>th</sup> P	ERCENTILE =		

#### PLEASE MAKE AS MANY COPES OF THIS PAGE AS NECESSARY

Colorado Dept. of Public Health and Env. - CMDM Unit

REPORTING FORM FOR LEAD & COPPER ANALYSES

PWSID <u>CO-207504</u> SYSTEM/ESTABLIS	SHMENT NAME Meadow Mountain Water Company
LEFT COLUMN – To be filled out by water system authority	RIGHT COLUMN – To be filled out by State Certified Lab
SAMPLE #404096	LABORATORY RESULTS IN mg/L
DATE COLLECTED: 7/12/04	LABORATORY JOB #1115-013 (404096)
TIME: 6:30 am am/pm	DATE ANALYZED: 7/15 & 8/30/04
SAMPLE COLLECTED BY:  Steve Tedford	EPA LAB ELEMENT RESULT ACTN LVL METHOD MDL
SAMPLE LOCATION ADDRESS:	LEAD <u>0.011</u> 0.015 <u>200.9</u> <u>0.005</u>
B	COPPER ND 1.3 200.7 0.01
SAMPLE #404097	LABORATORY RESULTS IN mg/L
DATE COLLECTED: 7 / 12 / 04	LABORATORY JOB #1115-013 (404097)
TIME: 6:30 am am/pm	DATE ANALYZED:7/15 & 8/30/04
SAMPLE COLLECTED BY:  Steve Tedford	EPA LAB <u>ELEMENT RESULT ACTN LVL METHOD MDL</u>
SAMPLE LOCATION ADDRESS:	LEAD <u>BDL</u> 0.015 <u>200.9</u> <u>0.005</u>
<u>C</u>	COPPER <u>0.24</u> 1.3 <u>200.7</u> <u>0.01</u>
SAMPLE#404098	LABORATORY RESULTS IN mg/L
DATE COLLECTED: 7/12/04	LABORATORY JOB #1115-013 (404098)
ITME: 6:30 am am/pm	DATE ANALYZED: 7/15 & 8/30/04
SAMPLE COLLECTED BY:  Steve Tedford	EPA LAB ELEMENT RESULT ACTN LVL METHOD MDL
AMPLE LOCATION ADDRESS:	LEAD <u>BDL</u> 0.015 <u>200.9</u> <u>0.005</u>
<u>D</u>	COPPER <u>0.20</u> 1.3 <u>200.7</u> <u>0.01</u>

#### PLEASE MAKE AS MANY COPES OF THIS PAGE AS NECESSARY

Colorado Dept. of Public Health and Env. – CMDM Unit REPORTING FORM FOR <u>LEAD & COPPER</u> ANALYSES

SYSTEM/ESTABLISHMENT NAME Meadow Mountain Water Company PWSID CO-207504 RIGHT COLUMN – To be filled out by State Certified Lab LEFT COLUMN – To be filled out by water system authority SAMPLE # \_\_\_\_\_\_\_ 404099 LABORATORY RESULTS IN mg/L LABORATORY JOB # \_\_\_\_\_1115-013 (404099) DATE COLLECTED: 7/12/04 DATE ANALYZED: 7 / 15 & 8 / 30 / 04 TIME: 6:30 am am/pm LAB EPA SAMPLE COLLECTED BY: MDL ELEMENT RESULT ACTN LVL METHOD Steve Tedford 0.010 0.015 200.9 0.005 SAMPLE LOCATION ADDRESS: LEAD COPPER ND 1.3 200.7 0.01 E LABORATORY RESULTS IN mg/L SAMPLE# DATE COLLECTED: LABORATORY JOB # TIME: DATE ANALYZED: am/pm LAB SAMPLE COLLECTED BY: **EPA** ELEMENT RESULT ACTN LVL **METHOD** MDL 0.015 200.9 0.005 SAMPLE LOCATION ADDRESS: LEAD 1.3 200.7 0.01 COPPER SAMPLE# LABORATORY RESULTS IN mg/L DATE COLLECTED: LABORATORY JOB # DATE ANALYZED: TIME: am/pm SAMPLE COLLECTED BY: LAB **EPA** ACTN LVL **METHOD** MDL ELEMENT RESULT 200.9 0.005 0.015 SAMPLE LOCATION ADDRESS: LEAD 200.7 1.3 0.01 COPPER

DAYTIME PHONE:	(703) 747-2066	PWSID# Carron 505
CERTIFIED OPERATOR SIGNATURE:	Styl 1 1/10	NAME OF WATER SYSTEM: MOHDOW HOLEN CHANGE
OPER. NAME PRINTED:	Storfor V Traper	COUNTY: BOULDER

MONTH/YEAR:

## II. A. CHLORINATION - DISTRIBUTION SYSTEM

Plant Number or Name: #: - NAME:

А	Number of Chlorine Residual measurements taken from the distribution system this month
В	Number of Chlorine Residual measurements in the distribution where NO Chlorine was Detected 4
С	Percent of Chlorine Residual measurements with NO Chlorine detected (Note: C = B/A X 100) 6 %
D	Are the measurements as TOTAL or FREE chlorine?
NOTE:	<ul> <li>(A) An undetectable residual disinfectant concentration within the distribution system in more than 5% of the samples per month for any two consecutive months is considered a treatment technique violation.</li> <li>(B) Whenever you collect a routine bacteriological water sample, you must <u>always</u> determine the chlorine level, using a DPD chlorine test kit, and record the value on the bacteriological lab form.</li> </ul>

## II. B. CHLORINATION - TREATMENT PLANT

NOTE: If the filter plant is SHUT OFF but treated water is still entering the distribution system from a clear well, you must CONTINUE to take chlorine residual readings and continue to maintain a minimum chlorine residual of .2 mg/l at all times at the entry point to the distribution system.

Day	Lowest Residual Reading	Number of Measurements per day	Check if Residual is < .2 mg/l	CDH Notified YES or NO	If CDH Notified, Date & Time	COMMENTS For Chlorine or Turbidity
11	1.2					
2	_1.0	(			·	
3	1.1	Ì				
4	7. 1					
5	1.0	ĺ				
6	and the second					
7	).1	1				
8	1.2	/				
9	1.2					
10	1.0	j				
11	10			,		
12	, 9	1				
13	.5	Ì				
14	1.0	1				
15	1.1	Acceptance of the Control of the Con				
16	1.2					
17	1.2	1				
18	1.1	1				
19	1.1	/				
20	1,2					
21	1.2					
22						
23	1.0					
24	0.9	1				
25	0.9	Marie Carrier Control				
26	0.9					
27	0.9					
28	0.9					
29	08	ĵ				
30	0.8	1				
31	0.5					

- Enter the level of the lowest residual disinfectant entering the distribution system into the first column.

  Enter "Continuous" into the "Number of Measurements per day" column if you are using continuous monitoring equipment.

## TURBIDITY & DISINFECTION REPORT Return completed form to:

Colorado Department of Public Health & Environment WCCD-CMDM-B2 4300 Cherry Creek Drive South Deriver, CO 80246-1530

(303) 692-3500

PLEASE FILL IN ALL FIELDS (both sides)

PWSID#	600 JOS 50x
NAME OF WATER SYSTEM:	MRUBOW MOUNTHTH WITTH
COLINTY	Bour sad

MONTH/YEAR:

FILTER PLANT NUMBER OR FLITER PLANT NAME:

OPEFATOR SIGNATURE:

CERTIFIED

## I. TURBIDITY SECTION

	easure nent PLAIY Type of Filtration Bog eg. conventional, direct, slowsand, DE, etc.
Require	d number of Turbidity of readings per day Check One: [ ] Continuous   Grab Samples
Turbidity	MCL NTU (1.0 or 0.5 or other MCL per written notification from this Department)
Α	Total number of Turbidity readings this month
В.	Number of Turbidity measurements which are greater than the MCL
C	Percent of Turbidity measurements which are greater than the MCL (Note: C = B/A x 100)
D	If C is greater than 5%, notify this Department and attach proof of Public Notice.
E I	Did any readings exceed 5.0 NTU? [] Yes [/]No If yes, was CDH Notified? [] Yes [] No
	CHECK here if filter plant was OFF THE ENTIRE MONTH. You rr ust turn in a turbidity report for every WTP even if the report is to tell us the plant did not operate.

		100	TURBI	DITY MEASU	REMEN'S				
	Time:	Time:	Time: 10.000 A	Time:	Time:	Time: _/0/20P		HIGHEST of all	
DAY	Midnight - A: s.m.	4 - 8 A;m.	8 - Hoon	Hoon - A p.m.	4 - 8 p.m.	B - Hidnight	Chack If	Readings for the DAY	Highast Reading TIME
11			Ø.	.70				,70	1:00P
2					10			.15	6.000
3					70			04.	7:004
4					.29			-29	6301
5					136			136	5,61
- 6			.57	. / ^				, 57	9:15
7			7.2	. 43				.43	1:300
8			,42					242	11:30
· 8			. 27					.27	10:451
10				.29				129	1:00P
-11			20			.25		.25.	8.304
12			, 22					,22	9:00,A
13				.22	.2/			.22	12006
14			90		1 200/				4:30
15			-20	.20				120	11:30 F
16			.19	,20				,20 ,19	5:30 F
17			- []					, 20	9:00 4
16				, 20	, 20			,20	500 P
19				19	. 20			.19	12:151
20			19					19	9:45 A
21			. 20					,20	11:00 A
23					.74			.24	5.308
24		·	. 23					.23	8:454
25						. 34		.36	9:30-
26			.43					43.	9:00 A
27				30				.30	1:000
28					.27			•27	5:00,0
29			. 25	25				.25	9:00 A
30 1			,27					.27	11-00A
31			. 3\					. 31	11:30 A
					HIGHEST DE	EADING OF THE	MONTR.		
					minuesi Ki	SPING OF THE	PROFILE.	,70	1:00 F

INSTRUCTIONS: 1. If you use a CONTINUOUS monitoring turbidimeter, record the value at the same times each day.

2.

3.

If you perform GRAB sampling, collect your grab samples at the same time each day.

Fecord the IME you take your readings at the TOP of the appropriate column.

Fecord the highest turbidity reading recorded over the day. If you use a continuous monitoring turbidimeter, 4. the reading could occur at ANY time during the day, not just your designated four hour reading.

5 Enter PO for plant off if the treatment plant did not operate within the designated 4 hour block. If turbidity readings are greater than the MCL refer to the "TURBIDIT"! MCL RESPONSE FOLICY".

DAYTIME PHONE:	(387) >4> 2066	PWSID# 600207504
DERTIFIED DPERATOR SIGNATURE:	the My	NAME OF WATER SYSTEM: MONDOW MONDING WIST
OPER. NAME PRINTED:	STONER L. (BUTOUS)	COUNTY: BOULDIZA

MONTHMEAR: FBB/04

II. A. CHLORINATION - DISTRIBUTION SYSTEM

Α	Number of Chlorine Residual measurements taken from the distribution system this month
В	Number of Chlorine Residual measurements in the distribution where NO Chlorine was Detected
С	Percent of Chlorine Residual measurements with NO Chlorine detected (Note: C = B/A X 100)
D .	Are the measurements as TOTAL or FREE chlorine? [ANG)
NOTE:	<ul> <li>(A) An undetectable residual disinfectant concentration within the distribution system in more than 5% of the samples per month for any two consecutive months is considered a treatment technique violation.</li> <li>(B) Whenever you collect a routine bacteriological water sample, you must <u>always</u> determine the chlorine level, using a DPD chlorine test kit, and record the value on the bacteriological lab form.</li> </ul>

II. B. CHLORINATION - TREATMENT PLANT NOTE: If the filter plant is SHUT OFF but treated water is still entering the distribution system from a clear well, you must CONTINUE to take chlorine residual readings and continue to maintain a minimum chlorine residual of .2 mg/l at all times at the entry point to the distribution system.

Day	Lowest Residual Reading	Number of Measurements per day	Check if Residual is < .2 mg/l	CDH Notified YES or NO	If CDH Notified, Date & Time	COMMENTS For Chlorine or Turbidity
1	1-1					
2	1.1	/				
3	1.2	1				
4	1,1					
5	(, )	1				
6		\ .				
7	1.1	/				
8	1-0	1.				
9	1,(	(				
10	1.)	1				
11	1.1	1				
12	(.)	l				
13	***************************************	1				2 .
14	1.2	1				
15	1.2	(				
16	1.0	/				
17	1.0	ĺ				
18	10	Ì				
19	1.0	1				
20	1.0	\				
21	1.0	<i>j</i> `				
22	1.0	ĺ				
23	1.2	1				
24	1.1					
25		and property of the second of	ga andrew and construction of the second	AND THE ROOMS		
26	,8	. //				
27	.9	1				
28	1.0	/				
29	09					
30						ì
31						

#### INSTRUCTIONS:

- Enter the level of the lowest residual disinfectant entering the distribution system into the first column.

  Enter "Continuous" into the "Number of Measurements per day" column if you are using continuous monitoring equipment.

Plant Number or Name: #:

- NAME:

#### TURBIDITY & DISINFECTION REPORT Return completed form to:

Colorado Department of Public Health & Environment WCCD-CMDM-B2 4300 Cherry Creek Drive South Der ver, CO 80246-1530

(303) 692-3500

PWSID#	600707504
NAME OF WATER SYSTEM:	MITHION MOUNTATE WATE
COUNTY:	BOULDAD

FRB 104 MONTH/YEAR:

FILTER PLANT NUMBER OR FLITER PLANT NAME:

CERTIFIED OPEFATOR SIGNATURE:

	/	
#	NAME:	
<	417001	
)	400	-
	. //	

#### I. TURBIDITY SECTION PLEASE FILL IN ALL FIELDS (both sides)

Point of N	Measurement DLANT Type of Filtration Bag eg. conventional, direct, slowsand, DE, etc.
Require	ed number of Turbidity of readings per day Check One: [ ] Continuous 🕅 Grab Samples
Turbidit	y MCL NTU (1.0 or 0.5 or other MCL per written notification from this Department)
Α	Total number of Turbidity readings this month Do NOT count PO entries (Maximum = 186 from 6 columns)
В.	Number of Turbidity measurements which are greater than the MCL
C	Percent of Turbidity measurements which are greater than the MCL (Note: C = B/A x 100)
D	If C is greater than 5%, notify this Department and attach proof of Public Notice.
E	Did any readings exceed 5.0 NTU? [] Yes [N No If yes, was CDH Notified? [] Yes [] No
	CHECK here if filter plant was OFF THE ENTIRE MONTH.  You must turn in a turbidity report for every WTP even if the report is to tell us the plant did not operate.

			TURBII	DITY MEASUI	REMENTS				
	Time:	Time:	Time:	Time: 2/20PM	Time:	Time:		HIGHEST of all	
DAY	Midnight - A: s.m.	4 - 8 A.m.	8 - Hoon	Noon - 4 p.m.	4 - 8 p.m.	B - Hidnight	Chack If	Readings for the DAY	Highest Reading TIME
1					•29			-29	6.40
2			, 21					21.	9:50A
3				. 20				,20	3:30 €
4			34					124	1000,7
5		.76						26	6.300
6				,20				,20	12:30 +
7				,20				, 20	21000
8			,		29			29	5:00p
9			.28					. 138	9:00A
10				, 20				,20	1:30F
-22						.74		24.	3.00%
12		.32		:7				.22	615A
13				.25				.25	1:000
14		<del>-</del>						127	3:30 P
15				-25				.25	8:5013
16			. 23					. 23	10:00 A
17				122				32	1.300
16)				,22				122	1:00f
19		. 20						:20	11:15 A
20		0.76	.24					24	11:45 A
21			0.27		.35			.35	4:30p
22			.41					.41	11. KCA
23			.35					35	\$ 304
24			.32					32	10.30
26			.31					.31	71:30 A
27			1 7	,33				e 33	1:01P
28				, 35				,35	2:00
29				23				٠23	1:30/3
30 1									
31				25					
					HIGHEST RI	EADING OF THE	HONTH:	.41	(ky5A)

- 1. If you use a CONTINUOUS monitoring turbidimeter, record the value at the same times each day.
- 2.
- 3.
- If you perform GRAB sampling, collect your grab samples at the same time each day.

  Fecord the TIME you take your readings at the TOP of the appropriate column.

  Fecord the highest turbidity reading recorded over the day. If you use a continuous monitoring turbidimeter, the reading could occur at ANY time during the day, not just your designated four hour reading. 4.
  - Enter PO for plant off if the treatment plant did not operate within the designated 4 hour block.
- 5 If turbidity readings are greater than the MCL refer to the "TURBIDIT" MCL RESPONSE FOLICY". 6.



## Colorado Department of Public Health and Environment Compliance Assurance & Data Management Unit

## REPORTING FORM FOR <u>NITRATE OR NITRITE AS NITROGEL</u> ANALYSES

SAMPLER: FILL OUT ONE FORM - FOR <u>EACH</u> INDIVIDUAL SAMPLING POINT of COMPOSITE SET

Are these results to be used to fulfill Is this a check of confirmation same		ring requireme	ents? YES 🛛	or NO [		
,	1000-1					
PWSID #: <u>CO207504</u> CO						
SYSTEM/ESTABLISHMENT NAI	ME: Mendow M	Mountain <u>W</u> at	er Con pany			and the desired salt delicated
SYSTEM MAILING ADDRESS:_	P.O. Box	162, Allenspa	rk, CO 80510		STATE ZIP	
CONTACT PERSON:					-	
SAMPLE COLLECTED BY:					LECTE ); 7:00	
WATER TYPE RAW (No	chlorine or ather (reatment)	CHLO			RTREATMENT	
SAMPLE POINT:	LOCATIO	N: Address		SOURCE	(S) REPRESENT	ED:
EPTDS-	125 Mea	ad <u>ow Mountai</u>	n Drivo			a a ser word medicant true t
DO SAMPLES NEI CHECK OF	R CONFIRMATIO	N SAMPLES	CANNOT BI	COMPOS	HTED	
TABORATORY SAMPLE #40						
LABORATORY NAME _Slewart F			7-11-1	,	W	
DATE RECEIVED IN LABORATO						
COMMENTS:						an amount a special social state of the
			, , , , , , , , , , , , , , , , , , , ,		M Pow And I W I / P. I	N de 1 lik kries krie aus has haven
had retire to the best of hand early retire the different way 35 de min and	A CONTROL OF THE STATE OF THE S		monthly set serve a serve as the experience			
PARAMETER	RESULT in (mg/L)	MCL in (mg/L)	STANDAR METHOD		La MDL in	a a
NITRATE-N	NT	0.01	METHOD 4500	NO3-E	meteory of the E. Toma I Son acceptance on	M-T-A
NITETIEN	I NT	1.0	4500	NO2-B	TO 1944 DEVIL EARLY . IN SERVICE HER ROYCE I EXPERIENCE OF	
Aif sons to a some sons and a sons a sons a sons as a sons as		A AMERICAN ALANA MANAGEMENT AND	TARREST ANGLE ANGLES AND ANGLES A	res and a second describing them.	C BARRETON AND THE	£-4
NITRATE/NITRITE-N	BDL	10.0	4300	NO3-E	0.5	
BDL = Indicates that the compound was analy nig/L.— Milligrams per Liter MCL. = Maximum Contaminant Level	zed for, but was below th	e Lab MDL.	Lab M		compound ny Metha I Detrotion f us been eneceded	ánit
it to fell	Operations	Manager			3/30/04	
Reviewed & Approved by	T'itle				Date	TO PERSON AND A CH

MAU RESULTS TO: CDPHE, WQCD-CMDM-B2, 4300 Cherry Creek Drive South, Denver, CO 80246-1530



## Colorado Department of Public Health and Environment Compliance Assurance & Data Management Unit

## REPORTING FORM FOR <u>NITRATE OR NITRITE AS NITROGEN</u> ANALYSES

SAMPLER: FILL OUT ONE FORM - FOR  $\underline{\mathsf{EACH}}$  INDIVIDUAL SAMPLING POINT or COMPOSITE SET

Are these results to be u Is this a check or confirm			oring requirement NO	ents? YES 🗵	or NO 🗌		
PWSID #: CO20750	4 COL	NTY: Boulder		DA	ATE COLLECT	ΓED:	3 / 30 / 04
SYSTEM/ESTABLISH							
SYSTEM MAILING AI							
CONTACT PERSON:_						TATE ZI	
SAMPLE COLLECTED							
WATER TYPE:							
SAMPLE POINT:							,
EPTDS-		125 Me	eadow Mountai	n Drive			
LABORATORY SAMP LABORATORY NAME	LE#401 Stewart En	vironmental Cons	LIENT NAME	or ID# <u>Mea</u> LAB PHONI	idow Mountain E # <u>( 970 ) 226</u>	-5500	
DATE RECEIVED IN L COMMENTS:				DATE ANAI	LYZED3	/ 30 / 04	
PARAMETE	CR	RESULT in (mg/L)	MCL in (mg/L)	STANDAF METHOD		Lab MI (mg/L)	OL in
NITRATE-N		NT	10.0	4500	NO3-E	(4-8-2)	
NITRITE-N		NT	1.0	4500	NO2-B		
NITRATE/NI	TRITE-N	BDL	10.0	4500	NO3-E	0.5	5
BDL = Indicates that the compo mg/L = Milligrams per Liter MCL = Maximum Contaminan Reviewed & Approved by	t Level	ed for, but was <b>below</b> the defending of the defendance of the def		Lab M		Method Dete een exceede / 30 / 04	
to tripproved of		THE			Da	ate	

MAIL RESULTS TO: CDPHE, WQCD-CMDM-B2, 4300 Cherry Creek Drive South, Denver, CO 80246-1530

	,	CAYED DY		н
DAYTIME PHONE:	(303) 747-2066	5-425114	PWSID#	CO-0207504
CERTIFIED OPERATOR SIGNATURE:	Style	NA ME OF	F WATER SYSTEM:	Meddowmountainus
OPER. NAME FRINTED:	STISPHAN LIBBIOIS	2	COUNTY:	Boulder
Plant Number or Name:	#: - NAME:		MONTH/YEAR:	April /of.

## II. A. CHLORINATION - DISTRIBUTION SYSTEM

Α	Number of Chlorine Residual measurements taken from the distribution system this month
В	Number of Chlorine Residual measurements in the distribution where NO Chlorine was Detected 6
С	Percent of Chlorine Residual measurements with NO Chlorine detected (Note: C = B/A X 100) 6- %
D	Are the measurements as TOTAL or FREE chlorine? <u>দিমানুদ</u>
NOTE:	<ul> <li>(A) An undetectable residual disinfectant concentration within the distribution system in more than 5% of the samples per month for any two consecutive months is considered a treatment technique violation.</li> <li>(B) Whenever you collect a routine bacteriological water sample, you must <u>always</u> determine the chlorine level, using a DPD chlorine test kit, and record the value on the bacteriological lab form.</li> </ul>

## II. B. CHLORINATION - TREATMENT PLANT

NOTE: If the filter plant is SHUT OFF but treated water is still entering the distribution system from a clear well, you must CONTINUE to take chlorine residual readings and continue to maintain a minimum chlorine residual of .2 mg/l at all times at the entry point to the distribution system.

Day	Lowest Residual Reading	Number of Measurements per day	Check if Residual is < .2 mg/l	CDH Notified YES or NO	If CDH Notified, Date & Time	COMMENTS For Chloric s or Turbidit
1	1.0	/				
2	, 8	1				
3	,1	1				
4	.8	l			-	
5	.8	l				
6	7	/				
7	.7	į				
8	.1	and the same of th	1			
9	7	Ċ				
10	.7	/			-	The second secon
11	•7	/				
12	, 7	Management		-		
13	.9	/				32
14	.9	1				
15	, §	j				
16	.9	Winness				
17	1.0	1			-	
18	e C	1				
19	40	1				
20	10	1				
21	. 3					Committee the committee of the committee
22	,45					
23	1,9	1				
24	1.0	)				
25	1.0	1				
26	9	-				
27	9				1	
28	1.0	1				
29	1.0	1			<u> </u>	and the second s
30	1.0	1				1
31						1
31						

- Enter the level of the lowest residual disinfectant <u>entering the distribution system</u> into the first column.

  Enter "Continuous" into the "Number of Measurements per day" column if you are using continuous monitoring equipment.

TURBIDITY & DISINFECTION REPORT Feturn completed form to:

> Colorado Department of Public Health & Environment WQCD-CMDM-B2 4300 Cherry Creek Drive South Denver, CO 80246-1530

(303) 692-3500

PWSID# NAME OF WATER SYSTEM:

COUNTY:

MONTH/YEAR:

FILTER PLANT NUMBER OR FILTER PLANT NAME:

CERTIFIED OPERATOR SIGNATURE:

#### I. TURBIDITY SECTION PLEASE FILL IN ALL FIELDS (both sides)

Point of I	f Measure ment	BA6	rect, slowsand, DE, etc.
		Check One: [ ] Continuous	M Grab Samples
Tui bidi	tity MCI NTU (1.0 or 0.5 or other MCL		
Α	Total number of Turbidity readings this month	Do NOT count PO entries (Maxica	um = 188 from 6 columns)
B .	Number of Turbidity measurements which are greater than	n the MCL _	6
С	Percent of Turbidity measurements which are greater than	the MCL (Note: C = B/A x	100)%
D	If C is greater than 5%, notify this Department and attach p	proof of Public Notice.	
E	Did any readings exceed 5.0 NTU? [] Yes [\( \)] No If	yes, was CDH Notified?	Yes []No
[]	CHECK here if filter plant was OFF THE ENTIRE MONTH. You must turn in a turbidity report for every WTP even if the		did not operate.

			TURBI	DITY MEASU	REMENTS				
	Time:	Time:	Time:   0700	Tima:	Time:	Time:		HIGHEST of all	
DAY	Midnigre: - All Avil	4 - 8 a m.	8 - Noon	Noon - A p.m.	4 - B >, m.	B - Hidnight	Chack If	Readings for the DAY	Highes Readin TIME
1	The second secon		1	.61				.61	2:00 F
. 2				45				, 45	2100 f
_3_					.50			. 50	4:09
4			·47					.47	10:001
5			.92					92	11:00
5				,52				.52	2:30
.7			63	63				.63	12:15
<u> </u>			. 53					.53	11:45
9	***************************************		.48	. 64				,48	4.301
10				- 4 64	.61			-61.	2:40f 530f
-11_		.58			- 61			.58	430
13		. 3 . 3	, 83					.88	11:30
14			, 81					.81	11:45
35			. 86					,86	11:457
36				.84				,84	1:00-
1.7				.89			The state of the s	, 89	3:00P
1.3					.92			:92	500F
19			.97		*			.97	9:45
20				198				,98	1:30
21			.97					,97	11:15 A
22			.94					.94	8:40A
23				90				.90	3:401
21				192				92	1:00 P
25				.97				.97	3:00 P
20			-94	, 91				e 94	12:307
27			.98	· 71				.98	11:30 A
20			. 78		***************************************				11:00 A
29	· NAME OF THE PARTY OF THE PART		92					92	10:00
30 4			`N/.						-d
						ADING OF THE		99	1/1004

- 1. If you use a CONTINUOUS monitoring turbidimeter, record the value at the same times each day.
- 2. 3. If you perform GRAB sampling, collect your grab samples at the same time each day. Record the TIME you take your readings at the TOP of the appropriate column.
- Record the highest turbidity reading recorded over the day. If you use a continuous monitoring turbidimeter, the reading could occur at ANY time during the day, not just your designated four hour reading.

  Enter PO for plant off if the treatment plant did not operate within the designated 4 hour block. 4.
- 5
- If turbidity readings are greater than the MCL refer to the 'TURBIDITY MCL RESPONSE POLICY'. 6.

TURBIDITY & DISINFECTION REPORT Return completed form to:

Colorado Department of Public Health & Environment WCCD-CMDM-B2 4300 Cherry Creek Drive South Deriver, CO 80246-1530

(303) 692-3500

Gound Low

PWSID#

NAME OF WATER SYSTEM: Medly M.
COUNTY: Bouldy

Border March 104

FILTI:R PLANT NUMBER OR FI\_TER PLANT NAME:

MONTH/YEAR:

Syst 1 del

OPERATOR SIGNATURE:

PLEASE	FILL IN ALL FIELDS (both sides)  I. TURBIDITY SECTION
	Measurement   PLANT   Type of Filtration   Band   B
Require	ed number of Turbidity of readings per day Check One: [ ] Continuous [A] Grab Samples
Turbidit	by MCLNTU (1.0 or 0.5 or other MCL per written notification from this Department)
Α	Total number of Turbidity readings this month Do NOT count PO entries (Maximum = 186 from 6 columns)
В.	Number of Turbidity measurements which are greater than the MCL
C	Percent of Turbidity measurements which are greater than the MCL (Note: C = B/A x 100)
D	If C is greater than 5%, notify this Department and attach proof of Public Notice.
E	Did ar y readings exceed 5.0 NTU? [] Yes [V) No If yes, was CDH Notified? [] Yes [] No
[]	CHECK here if filter plant was OFF THE ENTIRE MONTH.  You must turn in a turbidity report for every WTP even if the report is to tell us the plant did not operate.

			TURBII	DITY MEASU					
	Time:	Time:	Time: 10780 pg	Time:	Time:	Time:		HIGHEST of all	
DAY	Midnight - At s.m.	4 - 8 A.m.	8 - Hoon	Noon - 4 p.m.	4 - 8 p.m.	B - Hidnight	Chack If	Readings for the CAY	Highest Reading TIME
1						35		.25	84384
2		177						23.	7-70A
3					. 28			, 28	5100 P
44			.31					, 3	11:00 A
5		.32						. 32	6:15 A
- 6			225	, 58				. 58	3:30 P
7			0.25					25	9:157
88			. 64					.64	9:45 A
9				,41	్రో/			.51	4:20 P
10			. 38	, 4/				, 38 .	
23			, 33	,29				,29	11:00 A 3:00 P
12				32				· 32	3007
13			.42					42	8 40A
1.5			30					, 30	10:00 A
16			26					126	10:00,4
17			25					,25	10130 A
16			,21.					, 21	9:00 A
19				.26				26	11009
20		,		,26 ,50				.50	3:30f
21			-35					-38	10:30A
22			. 45					,45	11:00.A
23			. 32					. 32	10' 30 A
24				.64				,66	2:30 €
25			,50					, 50	10:30 A
26			47.00	, 50				, 50	1:00 8
27	****		.58					.58	11:30 A
28			-41		, may ,			. 41	10:00A
29					.76			,76	5:30 P
30 1			4 -	.69				.69	1:30 ?
31			77					77	10:30
					HIGHEST R	EADING OF THE	MONTH:	اليال ا	10:3007

- 1. If you use a CONTINUOUS monitoring turbidimeter, record the value at the same times each day.
- 2. If you perform GRAB sampling, collect your grab samples at the same time each day.
- 3. Fecord the TIME you take your readings at the TOP of the appropriate column.

  2. The same time same ti
- 4. Fecord the highest turbidity reading recorded over the day. If you use a continuous monitoring turbidimeter, the reading could occur at ANY time during the day, not just your designated four hour reading.
- 5 Enter PO for plant off if the treatment plant did not operate within the designated 4 hour block.
- 6. If turbidity readings are greater than the MCL refer to the 'TURBIDIT'! MCL RESPONSE FOLICY'.

DAYTIME PHONE:	(30%) 747-7066	PWSID# (00707507
CERTIFIED OPERATOR SIGNATURE:	Sty 1-4/2	NAME OF WATER SYSTEM: Meeder Mouling Water
OPER. NAME PRINTED:	STORATE L BOILDE	COUNTY: Bowley

MONTHYEAR: March / 04

## II. A. CHLORINATION - DISTRIBUTION SYSTEM

Α	Number of Chlorine Residual measurements taken from the distribution system this month
В	Number of Chlorine Residual measurements in the distribution where NO Chlorine was Detected &
С	Percent of Chlorine Residual measurements with NO Chlorine detected (Note: C = B/A X 100) %
D	Are the measurements as TOTAL or FREE chlorine? Fhig
NOTE:	<ul> <li>(A) An undetectable residual disinfectant concentration within the distribution system in more than 5% of the samples per month for any two consecutive months is considered a treatment technique violation.</li> <li>(B) Whenever you collect a routine bacteriological water sample, you must always determine the chlorine level, using a DPD chlorine test kit, and record the value on the bacteriological lab form.</li> </ul>

## II. B. CHLORINATION - TREATMENT PLANT

NOTE: If the filter plant is SHUT OFF but treated water is still entering the distribution system from a clear well, you must CONTINUE to take chlorine residual readings and continue to maintain a minimum chlorine residual of .2 mg/l at all times at the entry point to the distribution system.

Day	Lowest Residual Reading	Number of Measurements per day	Check if Residual is < .2 mg/l	CDH Notified YES or NO	If CDH Notified, Date & Time	COMMENTS For Chlorine or Turbidity
1	9	(				
2	,9					
3	1.0	1				
4	, 9					
5	9	1				
6	.8	/				
7	.8	i j				
8	. 3	j.				
9	,8	1				
10	.9					
11	. 9					
12	, 9		8.0			
13	.9	1				
14	.7					
15	, 7					
16	. 7					
17	, 9					
18	,8					
19	, 8					
20	٠7	(				
21	• 7	1				
22	. 7					
23	. 7					
24	1, 0	(	1		600	
25	The state of the s					
26	1.0					
27	19	/				
28	10	1				
29	1.1					
30	18	Ì				i d
31	, 9		,			

#### INSTRUCTIONS:

- Enter the level of the lowest residual disinfectant entering the distribution system into the first column.

  Enter "Continuous" into the "Number of Measurements per day" column if you are using continuous monitoring equipment.

Plant Number or Name: #:

- NAME:

## Evergreen Analytical, Inc.

Date: 13-Sep-04

Client Project ID: PWSID CO 0207504

Lab Order:

04-6253

**CASE NARRATIVE** 

#### SAMPLE RECEIVING

Custody seals were present and intact.

The temperature of the sample(s) upon arrival was 4 °C.

Sample(s) were received in good condition, in the proper container, and within method specified holding times.

VOC sample(s) were marked as preserved on the bottle labels.

VOC sample(s) were received with no headspace present. NJO

#### QUALITY ASSURANCE

Analyses performed on samples in this work order meet the requirements of the EAL Quality Assurance Program.

#### **CLIENT SERVICES**

There are no anomalies to report. JB

#### GAS CHROMATOGRAPHY

Method 552: There are no anomalies to report. JM

#### GAS CHROMATOGRAPHY / MASS SPECTROMETRY

Method 524.2: There are no anomalies to report. DC

#### Evergreen Analytical, Inc. 4036 Youngfield Street, Wheat Ridge, Colorado 80033-3862 (303) 425-6021

Lab Work Order: 04-6253 Client Sample ID: **Fouts** 04-6253-01A Lab Sample ID: PWSID CO 0207504 Client Project ID: Drinking Water \VOA40826\4001040.D Sample Matrix: 8/24/2004 **Date Collected:** Lab File ID: Date Received: 8/25/2004 Method Blank: RB082604X 8/26/2004 Date Prepared: Prep Factor: 1.000 8/27/2004 Date Analyzed: 1.00 **Dilution Factor:** Percent Moisture: NA

Method: E524.2	VOLATILE COM	POUNDS 524.2	
Prep Method: SW5030A			Units: μg/L
Analytes	CAS Number	Result	LQL
Bromodichloromethane	75-27-4	1.2	0.50
Bromoform	75-25-2	U	0.50
Chloroform	67-66-3	17	0.50
Dibromochloromethane	124-48-1	U	0.50
Total THM (Summation of above)		18	0.50
Surr: 1,2-Dichlorobenzene-d4	2199-69-1	80	QC Limits: 70-130 %REC
Surr: 4-Bromofluorobenzene	460-00-4	72	QC Limits: 70-130 %REC

Analyst

Qualifiers: B - Analyte detected in the associated Method Blank, value not subtracted from result

E - Extrapolated value. Value exceeds calibration range

H - Sample exceeded analytical holding time

J - Indicates an estimated value when the compound is detected, but is below the LQL

S - Spike Recovery outside accepted limits

U - Compound analyzed for but not detected

X - See case narrative

\* -Value exceeded the Maximum Contamination Level (MCL)

Approved

Definitions: NA - Not Applicable

LQL - Lower Quantitation Limit MDL - Method Detection Limit

Surr - Surrogate

Work Order: 04-6253

Client Project ID: PWSID CO 0207504

## Date: 01-Sep-04

## ANALYTICAL QC SUMMARY REPORT

TestCode: 524

Sample ID: RB082604X	SampType: MBLK	TestCode	: 524	Run ID: VO	A-4_040826B	•		Prep Date: 8/26/20	04	Units: µg/L	
	Batch ID: R12252	TestNo	E524.2	FileID: \VC	A40826\29010	29.D	Ana	alysis Date: 8/27/20	04	SeqNo: <b>227</b> 5	578
Analyte	Result	LQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Bromodichloromethane	U	0.50		0.000							
Bromoform	U	0.50									
Chloroform	U	0.50									
Dibromochloromethane	U	0.50									
Total THM (Summation of above)	U	0.50									
Surr: 1,2-Dichlorobenzene-d4	4.14	0.50	5	0	82.8	70	130	0	0		
Surr: 4-Bromofluorobenzene	3.76	0.50	5	0	75.2	70	130	0	0		
Sample ID: LCS082604X	SampType: LCS	TestCode	: 524	Run ID: VO	A-4_040826B			Prep Date: 8/26/20	04	Units: µg/L	
	Batch ID: <b>R12252</b> TestNo: <b>E524.2</b>		FileID: \VOA40826\3001030.D			Ana	alysis Date: 8/27/20	04	SeqNo: <b>227579</b>		
Analyte	Result	LQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Bromodichloromethane	4.9	0.50	5	0	98	70	130	0	0		
Bromoform	4.84	0.50	5	0	96.8	70	130	0	0		
Chloroform	5.11	0.50	5	0	102	70	130	0	0		
Dibromochloromethane	4.71	0.50	5	0	94.2	70	130	0	0		
Total THM (Summation of above)	19.5	0.50	20	0	97.5	70	130	0	0		
Surr: 1,2-Dichlorobenzene-d4	5.08	0.50	5	0	102	70	130	0	0		
Surr: 4-Bromofluorobenzene	5.39	0.50	5	0	108	70	130	0	0		
Sample ID: LCSD082604X	SampType: LCSD	TestCode	: 524	Run ID: VO	A-4_040826B			Prep Date: 8/26/20	04	Units: µg/L	_
	Batch ID: R12252	TestNo	E524.2	FileID: \VC	A40826\48010	48.D	Ana	alysis Date: <b>8/27/20</b>	04	SeqNo: <b>227</b>	597
Analyte	Result	LQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qua
Bromodichloromethane	4.86	0.50	5	0	97.2	70	130	4.9	0.820	30	
Bromoform	4.81	0.50	5	0	96.2	70	130	4.84	0.622	30	
Chloroform	5.2	0.50	5	0	104	70	130	5.11	1.75	30	
Dibromochloromethane	4.69	0.50	5	0	93.8	70	130	4.71	0.426	30	
Total THM (Summation of above)	19.6	0.50	20	0	98	70	130	19.5	0.512	30	
Surr: 1,2-Dichlorobenzene-d4	4.97	0.50	5	0	99.4	70	130	0	0	0	
Oneliform ND Not Deter	tad at the Deporting Limit		D DDD a								

Qualifiers:

ND - Not Detected at the Reporting Limit

J - Analyte detected below quantitation limits

S - Spike Recovery outside accepted recovery limits

R - RPD outside accepted recovery limits

B - Analyte detected in the associated Method Blank

H - Sample exceeded analytical holding time

Print Date: 9/1/2004

Work Order:

04-6253

Client Project ID: PWSID CO 0207504

## ANALYTICAL QC SUMMARY REPORT

TestCode: 524

Sample ID: LCSD082604X	SampType: LCSD	TestCode	524	Run ID: VOA	4_040826B		All the same	Prep Date: 8/26/20	04	Units: µg/L	
	Batch ID: <b>R12252</b>	TestNo: <b>E524.2</b>		FileID: \VOA40826\4801048.D			Analysis Date: 8/27/2004			SeqNo: <b>227597</b>	
Analyte	Result	LQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual
Surr: 4-Bromofluorobenzene	5.28	0.50	5	0	106	70	130	0	0	0	

B - Analyte detected in the associated Method Blank

H - Sample exceeded analytical holding time

## Evergreen Analytical, Inc.

4036 Youngfield Street, Wheat Ridge, Colorado 80033-3862 (303) 425-6021

Lab Work Order: 04-6253 Client Sample ID: Fouts Lab Sample ID: 04-6253-01B Client Project ID: PWSID CO 0207504 Sample Matrix: Drinking Water Date Collected: 8/24/04 Lab File ID: ECD60827\037 Date Received: 8/25/04 8/27/04 Method Blank: MB-5344 Date Prepared: Prep Factor: 1.000 Date Analyzed: 8/28/04 **Dilution Factor:** 1.00 Percent Moisture: NA

Method: E552.2	HALOACETIC	ACIDS		
Prep Method: E552.2 Analytes	CAS Number	Result	MDL	Units: μg/L LQL
Bromochloroacetic acid	5589-96-8	U	1.0	1.0
Dibromoacetic acid	631-64-1	U	1.0	1.0
Dichloroacetic acid	79-43-6	9.6	1.0	1.0
Monobromoacetic acid	79-08-3	U	1.0	1.0
Monochloroacetic acid	79-11-8	U	1.0	2.0
Trichloroacetic acid	76-03-9	9.1	1.0	1.0
Surr: 2,3-Dibromopropionic acid	600-05-5	125	QC Limits:	70-130 %REC

Analyst

Approved

Qualifiers: B - Analyte detected in the associated Method Blank, value not subtracted from result

E - Extrapolated value. Value exceeds calibration range

H - Sample exceeded analytical holding time

J - Indicates an estimated value when the compound is detected, but is below the LQL

S - Spike Recovery outside accepted limits

U - Compound analyzed for but not detected

X - See case narrative

\* -Value exceeded the Maximum Contamination Level (MCL)

Definitions: NA - Not Applicable

LQL - Lower Quantitation Limit MDL - Method Detection Limit

Surr - Surrogate

Print Date: 8/28/04

## Evergreen Analytical, Inc.

Work Order:

04-6253

Client Project ID: PWSID CO 0207504

# ANALYTICAL QC SUMMARY REPORT

Date: 28-Aug-04

BatchID: 5344

0 1 10 110 110													
Sample ID: MB-5344	SampType:	MBLK	TestCode	: 552	Run ID:	ECD6_040827A			Prep Date: 8/27/04		Units: µg/L	_	
	Batch ID:	5344	TestNo	: E552.2	FileID:	ECD60827\018		Ana	alysis Date: 8/27/04		SeqNo: <b>225</b>	865	
Analyte		Result	LQL	SPK value	SPK Ref Va	al %REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual	
Bromochloroacetic acid		U	1.0										
Dibromoacetic acid		U	1.0										
Dichloroacetic acid		U	1.0										
Monobromoacetic acid		U	1.0										
Monochloroacetic acid		U	2.0										
Trichloroacetic acid		U	1.0										
Surr: 2,3-Dibromopropionic acid	!	5.816	0	5		0 116	70	130	0	0			
Sample ID: LCS-5344 SampType: LCS TestCode: 552		: 552	Run ID: <b>ECD6_040827A</b>				Prep Date: 8/27/04	Units: µg/L					
	Batch ID:	5344	TestNo	TestNo: <b>E552.2</b>		FileID: ECD60827\019		Analysis Date: 8/27/04			SeqNo: <b>225866</b>		
Analyte		Result	LQL	SPK value	SPK Ref Va	al %REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual	
Bromochloroacetic acid		21.65	1.0	25	)	0 86.6	70	130	0	0			
Dibromoacetic acid		21.88	1.0	25	1	0 87.5	70	130	0	0			
Dichloroacetic acid		21.92	1.0	25		0 87.7	70	130	0	0			
Monobromoacetic acid		22.33	1.0	25	1	0 89.3	70	130	0	0			
Monochloroacetic acid		22.92	2.0	25	1	0 91.7	70	130	0	0			
Trichloroacetic acid		25.7	1.0	25	)	0 103	70	130	0	0			
Surr: 2,3-Dibromopropionic acid		5.847	0	5		0 117	70	130	0	0			
Sample ID: <b>04-6201-07BMS</b>	SampType:	MS	TestCode	: 552	Run ID:	ECD6_040827A			Prep Date: 8/27/04		Units: µg/l		
	Batch ID:	5344	TestNo	: E552.2	FileID:	ECD60827\028		Ana	alysis Date: 8/27/04		SeqNo: <b>225</b>	875	
Analyte		Result	LQL	SPK value	SPK Ref Va	al %REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual	
Bromochloroacetic acid		23.15	1.0	25		0 92.6	70	130	0	0			
Dibromoacetic acid		23.59	1.0	25		0 94.3	70	130	0	0			
Dichloroacetic acid		22.93	1.0	25		91.7	70	130	0	0			
Monobromoacetic acid		23.5	1.0	25		94	70	130	0	0			
Monochloroacetic acid		24.62	2.0	25		98.5	70	130	0	0			
Trichloroacetic acid		25.72	1.0	25		0 103	70	130	0	0			

Qualifiers:

Print Date: 8/28/04

ND - Not Detected at the Reporting Limit

J - Analyte detected below quantitation limits

S - Spike Recovery outside accepted recovery limits

R - RPD outside accepted recovery limits

B - Analyte detected in the associated Method Blank

H - Sample exceeded analytical holding time

Work Order:

04-6253

Client Project ID: PWSID CO 0207504

## ANALYTICAL QC SUMMARY REPORT

BatchID: 5344

Sample ID: <b>04-6201-07BMS</b>	SampType: MS TestCode: 552			Run ID: ECD6_040827A				Prep Date: <b>8/27/04</b>	Units: μg/L			
	Batch ID: 5344	TestNo	E552.2	FileID: ECD60827\028			Analysis Date: 8/27/04			SeqNo: 225875		
Analyte	Result	LQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual	
Surr: 2,3-Dibromopropionic acid	5.476	0	5	0	110	70	130	0	0			
Sample ID: <b>04-6237-03AMS</b>	e ID: 04-6237-03AMS SampType: MS TestCode: 552 Run ID: ECD6_046				6_040827A			Prep Date: <b>8/27/04</b>		Units: µg/L		
	Batch ID: 5344	TestNo: <b>E552.2</b> F		FileID: ECD	FileID: ECD60827\040		Ana	lysis Date: 8/28/04	SeqNo: 225884			
Analyte	Result	LQL	SPK value	SPK Ref Val	%REC	LowLimit	HighLimit	RPD Ref Val	%RPD	RPDLimit	Qual	
Bromochloroacetic acid	22.7	1.0	25	0	90.8	70	130	0	0		•	
Dibromoacetic acid	22.77	1.0	25	0	91.1	70	130	0	0			
Dichloroacetic acid	26.92	1.0	25	0	108	70	130	0	0			
Monobromoacetic acid	23.36	1.0	25	0	93.4	70	130	0	0			
Monochloroacetic acid	23.7	2.0	25	0	94.8	70	130	0	0			
Trichloroacetic acid	26.6	1.0	25	0	106	70	130	0	0			
Surr: 2,3-Dibromopropionic acid	6.275	0	5	0	126	70	130	0	0			

B - Analyte detected in the associated Method Blank

H - Sample exceeded analytical holding time

# Colorado Department of Public Health and Environment -Water Quality Control Division Drinking Water Program - Compliance Assurance and Data Management Unit 4300 Cherry Creek Drive South, Denver, CO 80246-1530

			DDD Form	4300 Cherry Cree	NAME OF TAXABLE PARTY OF TAXABLE PARTY.	same and the property of the same of the s	S Laboratory Report For	21		olomisci pod voji su potos v estre plana.	E DOGE CON CUIT MAD THE PARTY STREET			
	Section I (t	be completed by			omemai	le Allalysis	Section II (to be com		votovice ev	148				
	Section 1 (t	Public Water Sy	· · · · · · · · · · · · · · · · · · ·					ory Information						
PWSID # CO	0.007504	Tublic Water Sy	stem informatio	11			Laborat	ory miorination	711					
		lountain Water ar	nd Capitation			Laboratory	Name Evergreen Analytical	Laboratory						
Address: DO	Pox 304 All	enspark, CO 805	10 Samilation			Contact Person: Carl Smits Phone #: (303) 425-6021								
Contact Pers	on: Steve Tec	enspark, CO 603		3) 747-2066		Comments:								
	Steve Tec	1/	1	J 141-2000		(	0 1. t.	Technical Dire	ector	9/101	104			
System Auth	norized Signatu	ire Stal The	Title MAN	REAL Date W	13-08	Laboratory	Authorized Signature	Title		Date	-			
	o complete fir					A CONTRACTOR OF THE PARTY OF TH	s to complete columns 4-6 and	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT						
Sample	Collector	Sample	Date Lab	Date Lab	Labor	NAMES AND ADDRESS OF THE OWNER, WHEN PARTY OF	Analyte	Analytical	μg/L	μg/L	μg/L			
Date	Concetor	Location Designation #	Received	Analyzed		le ID #	Analyte	Method	Blank Result	Lab MDL	Result			
			8/25/04	8/27/04	04	-6253-01	Chloroform	524.2	BDL	0.5	17			
			8/25/04	8/27/04	04	-6253-01	Bromoform	524.2	BDL	0.5	BDL			
			8/25/04	8/27/04	04	-6253-01	Bromodichloromethane	524.2	BDL	0.5	1.2			
			8/25/04	8/27/04	04	-6253-01	Dibromochloromethane	524.2	BDL	0.5	BDL			
							TTHMs				18.2			
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Labor Samp	atory le ID #	Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result			
							Chloroform	524.2	NT	0.5	NT			
							Bromoform			0.5	NT			
							Bromodichloromethane	524.2	NT	0.5	NT			
							Dibromochloromethane	524.2	NT	0.5	NT			
							TTHMs				NT			
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Labor Samp	atory le ID #	Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result			
							Chloroform	524.2	NT	0.5	NT			
							Bromoform	524.2	NT	0.5	NT			
							Bromodichloromethane	524.2	NT	0.5	NT			
							Dibromochloromethane	524.2	NT	0.5	NT			
							TTHMs				NT			
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Labor Samp	ratory le ID #	Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result			
							Chloroform	524.2	NT	0.5	NT			
							Bromoform	524.2	NT	0.5	NT			
							Bromodichloromethane	524.2	NT	0.5	NT			
							Dibromochloromethane	524.2	NT	0.5	NT			
							TTHMs				NT			

#### Colorado Department of Public Health and Environment -Water Quality Control Division Drinking Water Program - Compliance Assurance and Data Management Unit 4300 Cherry Creek Drive South, Denver, CO 80246-1530

		<u>D</u>	BP Form 2 - Hal	oacetic Acid (H.	AA5) Analysi	s Laboratory Rej	oort Form				
	Section I	(to be completed by the Pi		only)		Section II	(to be completed	by Laboratories	only)		
Public Water System Information							Laboratory In	formation			
PWSID#	CO 020750	4					*				
System N	ame: Meadov	y Mountain Water and Sa	nitation		Laboratory	Name Evergreen A	Analytical Laborat	cory			
Address: <sub>I</sub>	PO Boy 304	Allenenark CO 80510				rson: Carl Smits		Phone #: (303) 42	25-6021	_	
Contact P	erson: Steve	Tedford Pho	one #: (303) 747-2	066	Comments						
	0,070		(303) / 4/-2			& La F.	Tec	chnical Director	9/1	0/04	
System Authorized Signature Title Title Date 10-13-05						Laboratory Authorized Signature Title Da					
	PWS to compl	ete first 3 columns				ory to complete colu	CONTRACTOR OF THE PARTY OF THE	Markata Markata Avan Salara Sa			
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Laboratory ID #	Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result	
			8/25/04		04-6253-01	Monochlo.Acid	552.2		1.0		
			8/25/04	8/28/04 8/28/04	04-6253-01	Monobro. Acid	552.2	BDL	1.0	BDL	
			8/25/04	8/28/04	04-6253-01	Dichlor. Acid	552.2	BDL	1.0	BDL	
			8/25/04	8/28/04	04-6253-01	Trichlor. Acid	552.2	BDL BDL	1.0	9.6 9.1	
			8/25/04	8/28/04	04-6253-01	Dibromo. Acid	552.2		1.0		
			0/25/04	0/20/04	04-0255-01	Total HAA5s		BDL		BDL	
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Laboratory ID #	Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	18.7 μg/L Result	
						Monochlo.Acid	552.2	NT	1.0	NT	
						Monobro. Acid	552.2	NT	1.0	NT	
						Dichlor. Acid	552.2	NT	1.0	NT	
						Trichlor. Acid	552.2	NT	1.0	NT	
						Dibromo. Acid	552.2	NT	1.0	NT	
*						Total HAA5s				NT	
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Laboratory ID #	Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result	
						Monochlo.Acid	552.2	NT	1.0	NT	
						Monobro. Acid	552.2	NT	1.0	NT	
						Dichlor. Acid	552.2	NT	1.0	NT	
						Trichlor. Acid	552.2	NT	1.0	NT	
						Dibromo. Acid	552.2	NT	1.0	NT	
						Total HAA5s				NT	
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Laboratory ID #	Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result	
						Monochlo.Acid	552.2	NT	1.0	NT	
						Monobro. Acid	552.2	NT	1.0	NT	
						Dichlor. Acid	552.2	NT	1.0	NT	
						Trichlor. Acid	552.2	NT	1.0	NT	
						Dibromo. Acid	552.2	NT	1.0	NT	
						Total HAA5s				NT	

## **WORK ORDER Summary**

## Evergreen Analytical, Inc.

04-6253

Rpt To: Steve Tedford

Meadow Mountain Water and

Sanitation

PO Box 394

Allens Park, CO 80510

(303) 747-2066

8/26/04 7:39:49 PM

Client Project ID: PWSID CO 0207504

QC Level: LEVEL I

#### **Comments:**

Sample ID	Client Sample ID	Matrix	Collection Date	Date Received	Storage	Test Code	Test Name	Hold MS	Date Due	Hold Time
04-6253-01A	Fouts	Drinking Water	8/24/04	8/25/04	9	524 * ^	524.2: Trihalomethanes		9/9/04	9/7/04
6253-01B	Fouts	Drinking Water	8/24/04	8/25/04	7	552 * ^	552.2: Standard List		9/9/04	9/7/04

#### Colorado Department of Public Health and Environment -Water Quality Control Division Drinking Water Program - Compliance Assurance and Data Management Unit 4300 Cherry Creek Drive South, Denver, CO 80246-1530

			DBP Form 1	- Total Triha	lomethan	e Analysi	is Laboratory Report For	m				
	Section I (t	o be completed by	the Public Water	Systems only)			Section II (to be com	pleted by Lab	oratories o	ılv)		
Public Water System Information						Section II (to be completed by Laboratories only)  Laboratory Information						
PWSID#	0-020	7504	1,1							***************************************		
System Name: Meadlow Mountain Witer System						Laborator	y Name: Evergreen Analytical L	aboratory				
Public Water System Information  PWSID # (0-0207504)  System Name: Meadow Mountain Water System  Address: Po Bo 394 Allempark, Co 80570  Contact Person: Teaford Phone #: 303-747-2066							erson: Carl Smits	Phone #:	303-425-602	21		
Contact Per	son: ) · / c	outerd '				Comment	S:	2				
	<del></del>		, Plant Op	. 08-	24-04							
	stem Authoriz		Title Date			Laboratory Authorized Signature Title: Technical Director Date						
	o complete fir		1		]	Laboratori	es to complete columns 4-6 and	8-11			9 ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) (	
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Labora Sample		Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result	
00-24-04	S Tedfort	Fouts/B#1				***************************************	Chloroform	524.2	11001111	11100		
		(					Bromoform	524.2		<del></del>		
			7				Bromodichloromethane	524.2			+	
							Dibromochloromethane	524.2		1		
							TTHMs	324.2	<del> </del>	-		
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Labora Sample		Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result	
082404	S teller	Fouts/RH2				***************************************	Chloroform	524.2	Tresuit	MIDE		
		7					Bromoform	524.2	<del> </del>			
							Bromodichloromethane	524.2		-		
			i,				Dibromochloromethane	524.2		-		
							TTHMs	327.2				
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Labora Sample		Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result	
08-24-04	Stedlard	Futs/8#3					Chloroform	524.2				
		04/					Bromoform	524.2				
							Bromodichloromethane	524.2		<del> </del>		
							Dibromochloromethane	524.2				
							TTHMs					
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Labora Sample		Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result	
							Chloroform	524.2				
							Bromoform	524.2				
							Bromodichloromethane	524.2				
							Dibromochloromethane	524.2				
						***************************************	TTHMs	J2-4. Z				
	**************************************				Instructions	on Reverse						

# Colorado Department of Public Health and Environment -Water Quality Control Division Drinking Water Program - Compliance Assurance and Data Management Unit 4300 Cherry Creek Drive South, Denver, CO 80246-1530

		<u>DB</u> '	P Form 2 - H	aloacetic Acid (HA	AA5) Analysis	Laboratory Rei	oort Form						
	Section I	(to be completed by the Publ	olic Water System	ns only)		Section II	(to be completed I	by Laboratories o	only)	A1.7			
Public Water System Information						Laboratory Information							
PWSID#	00-02	107504											
System Nai	me: Meado	xuMountain Water 384 Allenspark		Name: Evergreen	Analytical Labor	atory							
Address:	O Box 3	384 Allenspark	, Co 30	0510		rson: Carl Smits	Pho	one #: 303-425-6	6021				
Contact Per	rson: 5. 7	Le Claro Vol Linone	Comments:										
	11/1/	1	Plant Op.	08-24-04									
		rized Signature	Title	Dat	Laboratory Authorized Signature Title: Technical Director Date								
		ete first 3 columns	\$45,000		Laborat	ory to complete colu	mns 4-6 and 8-11	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1					
Sample	Collector	Sample Location			Laboratory	Laboratory Analyte		Analytical μg/L Blank μg/L Lab					
Date		Designation #	Received	Analyzed	ID#		Method	Result	MDL	μg/L Result			
08-24-04	S Ted ton	nd Fouts/Bottle#4				Monochlo.Acid	552.2		1.0				
	<b></b> '	/				Monobro. Acid	552.2		1.0				
	<b></b> '					Dichlor. Acid	552.2		1.0				
	<b>_</b>					Trichlor. Acid	552.2		1.0				
	<b></b> '					Dibromo. Acid	552,2		1.0				
						Total HAA5s							
Sample	Collector	Sample Location	Date Lab	Date Lab	Laboratory	Analyte	Analytical	μg/L Blank	μg/L Lab	μg/L			
Date	<b></b> '	Designation #	Received	Analyzed	ID#		Method	Result	MDL	Result			
, p	<del> </del> '					Monochlo.Acid	552.2		1.0				
	<del></del> '					Monobro. Acid	552.2		1.0				
	<del></del> '		<b></b>			Dichlor. Acid	552.2		1.0				
	<u></u> '					Trichlor. Acid	552.2		1.0				
	·					Dibromo. Acid	552.2		1.0				
						Total HAA5s							
Sample Date	Collector	Sample Location Designation #	Date Lab Received	Date Lab Analyzed	Laboratory ID #	Analyte	Analytical Method	μg/L Blank	μg/L Lab	μg/L			
		, , , , , , , , , , , , , , , , , , ,	Received	Allalyzeu	11) #	Monochlo.Acid	552.2	Result	MDL	Result			
						Monobro. Acid	552.2		1.0				
						Dichlor. Acid	552.2		1.0				
	i					Trichlor. Acid	552.2		1.0	-			
							552.2		1.0				
			ļ			Dibromo. Acid	552.2		1.0				
Sample	Collector	Sample Location	Date Lab	Dete Lab	Y . 1	Total HAA5s							
Date	Concetor	Designation #	Received	Date Lab Analyzed	Laboratory ID #	Analyte	Analytical Method	μg/L Blank Result	μg/L Lab MDL	μg/L Result			
						Monochlo.Acid	552.2		1.0	110000			
		0	1			Monobro. Acid	552 2		1.0				
			1			Dichlor. Acid	552.2		1.0				
	200					Trichlor. Acid	552.2		1.0	-			
						Dibromo. Acid	552.2		1.0				
						Total HAA5s	- <del>552.2</del>						
				Instructio	ns on Reverse	<del></del>							