



Stewart Environmental Consultants, Inc.
consulting engineers and scientists

Corporate Office & Laboratory:
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January 7, 2009

Mr. Steve Tedford
Meadow Mountain Water Company
P.O. Box 162
Allenspark, Colorado 80510

Subject: Laboratory Testing Results
Job No.: 1115-019

Dear Mr. Tedford

Please find enclosed the Colorado Department of Public Health and Environment form with the laboratory testing results for the sample received at our laboratory on January 5, 2009. We have filled in only the blanks with information available to us. It is our standard procedure to send the form to you in order that you may see the results and confirm that the information available is correct. Please be certain the form is completed before sending it to the Colorado Department of Public Health and Environment.

We appreciate the opportunity to provide these analytical services and look forward to working with you in the future. If you have any questions, do not hesitate to contact us.

Sincerely,

STEWART ENVIRONMENTAL CONSULTANTS, INC.

Michael A. Glavanovich
Laboratory Manager

Enc.



Colorado Department
of Public Health
and Environment

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

REPORTING FORM FOR BACTERIOLOGICAL ANALYSIS

SAMPLER: FILL OUT ONE FORM - FOR EACH INDIVIDUAL SAMPLING POINT

PWSID #: CO-0207504 COUNTY: Larimer DATE COLLECTED: 01/05/09

SYSTEM/ESTABLISHMENT NAME: Meadow Mountain Water Company

SYSTEM MAILING ADDRESS P.O Box 162 Allenspark Colorado 80510
Street address/PO Box CITY STATE ZIP

CONTACT PERSON: Steve Tedford PHONE: (303) 800-2066

SAMPLE COLLECTED BY: Steve Tedford TIME COLLECTED: 7:15 am am/pm

WATER TYPE: RAW (No chlorine or other treatment) ☐ CHLORINATED ☒ OTHER TREATMENT ☐

SAMPLE POINT (Address)	CHLORINE RESIDUAL in mg/L	SAMPLE TYPE
<u>Fout's</u>		<input type="checkbox"/> Routine <input type="checkbox"/> Repeat <input type="checkbox"/> Special Purpose

For Laboratory Use Only Below This Line

LABORATORY SAMPLE # 900001 CLIENT NAME or ID# #1115-019

LABORATORY NAME: Stewart Environmental Laboratories LAB PHONE # (970) 226-5500

DATE RECEIVED IN LABORATORY 01/08/09 DATE ANALYZED 01/05/09

COMMENTS: _____

PARAMETER	RESULT	UNITS	ANALYSIS DATE	LABORATORY METHOD
Coliform, TOTAL (Verified)		#/100 mL		
Coliform, FECAL/e. Coli (Verified)		#/100 mL		
Coliform, TOTAL (Absent/Present)	Absent		01/05/09	Readycult
Coliform, FECAL/e. Coli (Absent/Present)				

LABORATORY: Please call Drinking Water Section with any results other than < 1 or ABSENT.

NT = Not Tested for compound

TNTC = Too Numerous To Count - Please resample

OD = Outdated - Please resample

<1 = Safe valid sample

Present Coliform / e.Coli /Fecal detected

#/100 ml = Number of colonies per 100 ml of sample

CG = Confluent Growth - Please resample

LA = Lab Accident - Please resample

Absent = Coliform / e.Coli /Fecal not detected

Handwritten signature of Laboratory Manager

Laboratory Manager

01/07/09

Reviewed & Approved by

Title

Date

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

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