



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 207504 COUNTY: Meadow Mountain DATE COLLECTED: 6, 3, 13  
SYSTEM/ESTABLISHMENT NAME: P.O. Box 354 Allenspark, CO 80510  
SYSTEM MAILING ADDRESS: P.O. Box 354 Allenspark, CO 80510  
CONTACT PERSON: Steve Tedford CITY: ALLENSPARK STATE: CO ZIP: 80510  
PHONE: ( )  
SAMPLE COLLECTED BY: Steve Tedford TIME COLLECTED: 1030 am/pm  
WATER TYPE: RAW (No chlorine or other treatment) ☐ CHLORINATED ☒ OTHER TREATMENT ☐

| SAMPLE POINT (Address) | CHLORINE RESIDUAL in mg/L | SAMPLE TYPE                                                                                                                |
|------------------------|---------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <u>Newton</u>          | <u>1.1</u>                | <input checked="" type="checkbox"/> Routine<br><input type="checkbox"/> Repeat<br><input type="checkbox"/> Special Purpose |

For Laboratory Use Only Below This Line  
LABORATORY SAMPLE # 20130338 CLIENT NAME or ID# Meadow Mountain  
LABORATORY NAME: CHD DIAGNOSTIC LAB PHONE # 970 932 2078  
DATE RECEIVED IN LABORATORY 6/3/13 DATE ANALYZED 6/4/13  
COMMENTS: \_\_\_\_\_

| PARAMETER                                | RESULT        | UNITS    | ANALYSIS DATE      | LABORATORY METHOD    |
|------------------------------------------|---------------|----------|--------------------|----------------------|
| Coliform, TOTAL (Verified)               |               | #/100 mL |                    |                      |
| Coliform, FECAL/e. Coli (Verified)       |               | #/100 mL |                    |                      |
| Coliform, TOTAL (Absent/Present)         | <u>ABSENT</u> |          | <u>6/4/13 1400</u> | <u>24 Coli. test</u> |
| 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OD = Outdated - Please resample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

Steve Tedford  
Reviewed & Approved by

Office Admin  
Title

7, 1, 13  
Date

## LABORATORY ANALYTICAL REPORT

**Customer** 20011350  
Meadow Mountain Water  
PO Box 354  
Allenspark, CO 80510  
**PWSID:** CO 0207504

**Invoice Number:** 20130338  
**Received Date & Time:** 6/3/2013 9:00AM  
**Arrival Temperature:** 17.8°C

**Sample Identification:** Newton, Finished

**Sample Information:** Chlorinated; unrec. NTU

**Sample Date & Time:** 6/3/2013 6:30AM

**Sampler:** Steve Tedford

**Volume Sampled:** 100ml

**Sample Type:** Grab

**Processing Date & Time:** 6/3/2013 2:20PM

**Analytical Method:** 9223B, IDEXX Colilert® with QuantiTray® 2000

**Start Date & Time:** 6/3/2013 2:20PM

**Amount Analyzed:** 100ml

**Stop Date & Time:** 6/4/2013 2:20PM

**Additional Start Date & Time:** N/A

**Dilution factor:** N/A

**Additional Stop Date & Time:** N/A

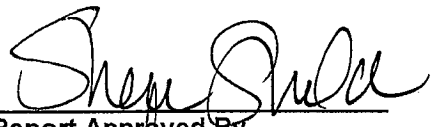
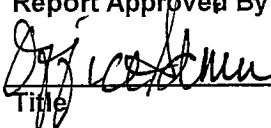
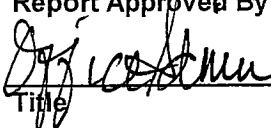
### Analytical Results:

**Analyte Reporting Limit:** 1.0

**Coliform bacteria:** ABSENT

**Chlorine Residual:** 1.1

This sample was analyzed for the presence of Escherichia coli (E. coli) by the method outlined in: Standard Methods for the Examination of Water and Wastewater, 20th Edition, 1998, 9223 B, Enzyme Substrate Test. All limitations stated in the method apply.

  
**Report Approved By**  
  
**Title**  
  
**Date** 7/1/13