



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: \_\_\_\_\_ DATE COLLECTED: 12/3/2014

SYSTEM/ESTABLISHMENT NAME: MEADOW MOUNTAIN

SYSTEM MAILING ADDRESS:

Street address/PO Box

CITY

STATE

ZIP

CONTACT PERSON: STEVE TEDFORD PHONE: \_\_\_\_\_

SAMPLE COLLECTED BY: STEVE TEDFORD TIME COLLECTED: 6:35 AM

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

| SAMPLE POINT (Address) | CHLORINE RESIDUAL in mg/L | SAMPLE TYPE  |
|------------------------|---------------------------|--|
| KESSON                 | 0.3                       | <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 # 20140656 CLIENT NAME or ID# DEERWOOD SERVICE CO.

LABORATORY NAME: CH Diagnostic & Consulting Service, Inc. LAB PHONE # (970) 532 2078

DATE RECEIVED IN LABORATORY 12/3/2014 DATE ANALYZED 12/4/2014

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 |          | 12/4/14       | 24 Colilert       |
| 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OD = Outdated - Please resample  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

Reviewed & Approved by

Title

12/10/14  
Date

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

## LABORATORY ANALYTICAL REPORT

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

**Invoice Number:** 20140656  
**Received Date & Time:** 12/3/2014 10:00AM  
**Arrival Temperature:** 7.0°C

**Sample Identification:** KESSON

**Sample Information:**

**Sample Date & Time:** 12/3/2014 6:35AM

**Sampler:** Steve Tedford

**Volume Sampled:** 100ml

**Sample Type:** Grab

**Processing Date & Time:** 12/3/2014 11:00AM

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

**Start Date & Time:** 12/3/2014 11:00AM

**Amount Analyzed:** 100ml

**Stop Date & Time:** 12/4/2014 11:00AM

**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:** 0.3

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**

**12/8/14**  
**Date**

CH Diagnostic Consulting Service, Inc.  
512 5th Street, Berthoud CO 80513  
PH: (970) 532 2078 FX: (970) 532 3358