



Colorado Department
of Public Health
and Environment

Individual Bacteriological Certified Laboratory Report Form

Revision: 12/24/2014

WQCD - Drinking Water CAS

4300 Cherry Creek Drive South; Denver, CO 80246-1530

Fax: (303) 758-1398; cdphe.drinkingwater@state.co.us; **Positive Hotline: (303) 692-3308**

Section I (Supplied or Completed by Public Water System)

Section II (Supplied or Completed by Certified Laboratory)

Public Water System Information

Certified Laboratory Information

PWS ID: CO 0207504

Laboratory ID: CO 01020

System Name: MEADOW MOUNTAIN

Laboratory Name: CHDIAGNOSTIC AND CONSULTING SERVICE INC.

Contact Person: STEVE TEDFORD

Phone #: 303-747-2066

Contact Person: RHONDA DUNCAN

Phone #: 970-532-2078

Comments:

Comments:

Section III (Supplied or Completed by Public Water System)

Sample Date: 2/3/2015

Collector: STEVE TEDFORD

Section IV (Supplied or Completed by Certified Laboratory)

Lab Receipt Date: 2/3/2015

Lab Analysis Date: 2/4/2015

Analytical Method: 24 COLLERT

Section V (Supplied or Completed by Public Water System)

Section VI (Supplied or Completed by Certified Laboratory)

Sample Type	Sample Time	Facility ID On Schedule	Sample Pt ID On Schedule	Street Address	*Disinfectant Residual	Lab Sample ID	Analyte Name (Code)	Result
RT	9:15 AM	CO0207504	Meadow Mtn. ~ Newton	PO Box 354 Allenspark, CO 80510	0.1	20150047	Total Coliform (3100)	0
							E. Coli (3014)	
							Total Coliform (3100)	
							E. Coli (3014)	
							Total Coliform (3100)	
							E. Coli (3014)	
							Total Coliform (3100)	
							E. Coli (3014)	
							Total Coliform (3100)	
							E. Coli (3014)	

LABORATORY: Please call Hotline with any PRESENT results
(Total Coliform, E. Coli, or Fecal).

LA: Lab Accident - Please resample.
CG: Confluent Growth - Please resample.
TNTC: Too Numerous To Count - Please resample.
H: Holding time has been exceeded - Please resample.

Present: Coliform / E. Coli / Fecal detected.
Absent: Coliform / E. Coli / Fecal not detected.
NT: Not Tested.

SAMPLE TYPE: RT (Routine), RP (Repeat), SP (Special Purpose).

*DISINFECTANT RESIDUAL: Report in mg/L.

Use separate form if samples collected on different dates.

LABORATORY ANALYTICAL REPORT

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

Invoice Number: 20150047
Received Date & Time: 2/3/2015 11:30AM
Arrival Temperature: 14.8°C

Sample Identification: NEWTON	
Sample Information: unrec.	
Sample Date & Time: 2/3/2015 9:15AM	Sampler: Steve Tedford
Volume Sampled: 100ml	Sample Type: Grab
Processing Date & Time: 2/3/2015 11:36AM	

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

Start Date & Time: 2/3/2015 11:36AM Amount Analyzed: 100ml
Stop Date & Time: 2/4/2015 11:36AM

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

Dilution factor: N/A

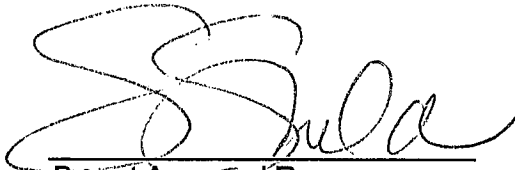
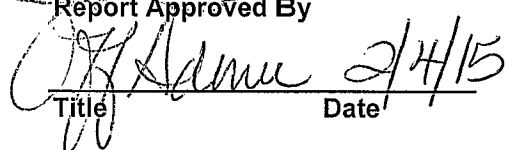
Analytical Results:

Analyte Reporting Limit: 1.0

Coliform bacteria: ABSENT

Chlorine Residual: 0.1

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 2/4/15

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