

Analytical Results

TASK NO: 200608059

Report To: Andrew Griffiths

Company: Meadow Mountain Water Company
P.O. Box 162
Allenspark CO 80510

Bill To: Andrew Griffiths

Company: Meadow Mountain Water Company
P.O. Box 162
Allenspark CO 80510

Task No.: 200608059
Client PO:
Client Project: Meadow Mtn Water Supply CO0207504

Date Received: 6/8/20
Date Reported: 6/17/20
Matrix: Water - Drinking

Customer Sample ID HANS

Sample Date/Time: 6/6/20 8:00 AM

Lab Number: 200608059-03

Test	Result	Method	PQL	Date Analyzed	MCL
<i>Total</i>					
Copper (mg/L)	0.598	EPA 200.8	0.001	6/9/20	1.3
Lead (mg/L)	0.007	EPA 200.8	0.001	6/9/20	0.015

Abbreviations/ References:

PQL = Practical Quantification Limit
mg/L = Milligrams Per Liter or PPM
BDL = Below Detectable Levels
Date Analyzed = Date Test Completed



DATA APPROVED FOR RELEASE BY

Analytical Results

TASK NO: 200608059

Report To: Andrew Griffiths

Company: Meadow Mountain Water Company
P.O. Box 162
Allenspark CO 80510

Bill To: Andrew Griffiths

Company: Meadow Mountain Water Company
P.O. Box 162
Allenspark CO 80510

Task No.: 200608059
Client PO:
Client Project: Meadow Mtn Water Supply CO0207504

Date Received: 6/8/20
Date Reported: 6/17/20
Matrix: Water - Drinking

Customer Sample ID HAMES

Sample Date/Time: 6/5/20 8:00 AM

Lab Number: 200608059-04

Test	Result	Method	PQL	Date Analyzed	MCL
<i>Total</i>					
Copper (mg/L)	1.280	EPA 200.8	0.001	6/9/20	1.3
Lead (mg/L)	0.005	EPA 200.8	0.001	6/9/20	0.015

Abbreviations/ References:

PQL = Practical Quantification Limit
mg/L = Milligrams Per Liter or PPM
BDL = Below Detectable Levels
Date Analyzed = Date Test Completed



DATA APPROVED FOR RELEASE BY

Drinking Water Chain of Custody



LABORATORIES, INC.

Brighton Lab
240 South Main Street
Brighton, CO 80601

Lakewood Lab
12860 W. Cedar Dr, Suite 100A
Lakewood CO 80228

Phone: 303-659-2313
Fax: 303-659-2315

www.coloradolab.com

Report To Information		Bill To Information (if different from report to)		State Form / Project Information	
Company Name: <u>MEADOW Mtn. WATER SUPPLY CO.</u>	Company Name: _____	PWSID: <u>CO 707584</u>			
Contact Name: <u>ANDREW GRIFFIN</u>	Contact Name: _____	System Name: <u>MEADOW Mtn. WATER SUPPLY CO.</u>			
Address: <u>Box 162</u>	Address: _____	Address: <u>Box 162</u>			
City: <u>ALAMOGADO STATE CO</u>	City: _____	City: <u>ALAMOGADO STATE CO</u>	State: <u>CO</u>	Zip: <u>80510</u>	
Phone: <u>303-747-2715</u>	Phone: _____	County: <u>Boulder</u>			
Fax: _____	Fax: _____	Compliance Samples: Yes ☐ No ☒			
Email: <u>andrew@meadowlink.net</u>	Email: _____	Send Forms to State: Yes ☐ No ☒			
Sampler Name: <u>Andrew Griffin</u>	PO No.: _____				

CAL Task No.
2006080659

ARF

CAL Task No.			PHASE I, II, V Drinking Water Analyses (check analysis)																				Subcontract Analyses																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
200608059			ARF			No. of Containers			Residual Chlorine (mg/L) P/A Samples Only			Total Coliform P/A														Gross Alpha/Beta																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																						
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Instructions:

Sample Pt 113 + EP code taken from mon. schedule

C/S Info:

Delivered Via:

C/S Charge ☐

Temp. 7 °C/ice X

Relinquished By:

Date/Time:

Received By:

Date/Time:

Relinquished By:

Date/Time:

Received By:

Date/Time:

Sample Pres. Yes ☒ No ☐

Seals Present Yes ☐ No ☐ Headspace Yes ☐ No ☐