

October 16, 2017

SP 1712601:1 **Coliform Bacteria Analysis**

Customer ID : 2021676

Meadowlark Ranches Mutual Water Co.

Attn: Mike Hadley

System Number : 4200612

P.O. Box 606

Project Name : Routine Bacteriological

Santa Ynez, CA 93460-0606

Analytical Results

ID	Sample Description	Total	Fecal	E. Coli	Units	Method	Prep	Footnote
1	SS at White Oak	Absent	---	Absent	A/P/100ml	SM 9223B	Colilert-P/A 18	

N/R Not Required

MPN Most Probable Number

A/P Absence/Presence

The samples listed above were Acceptable for both Total and Fecal Coliform

Sample Handling Information

ID	Sample Number	System Number	Sample Type/Reason	Sampler	Employed By	Sampled
1	SP 1712601-001	4200612	System-Routine	Matthew Jimenez	FGL Environmental	2017-10-12 11:20

Field Analysis/QA Information

ID	Sample Description	Cl Total/Free mg/l	Temp	Analysis Started	Analysis Completed	Contact	Contacted
1	SS at White Oak	---/1.46	---	2017-10-12 15:33 rv	2017-10-13 12:44 rv	N/R	

Analyses were performed at the FGL Santa Paula Laboratory using Standard Methods 20th edition. If you have any questions regarding your results, please call. The FGL Santa Paula Laboratory is certified by California ELAP #1573 and accredited to ISO/IEC 17025:2005 by PJLA certificate #75605, Testing.

Prepared By: SLK

cc:SBCEH

Reviewed and Approved By **Raquel R. Harvey**  Digitally signed by Raquel R. Harvey
 Title: Tech Director Microbiology
 Date: 2017-10-16

1677:10/16/2017				TEST DESCRIPTION - See Reverse side for Container, Preservative and Sampling information										L215											
Client: Meadowlark Ranches Mutual Water Co. Address: Attn: Mike Hadley P.O. Box 606 Santa Ynez, CA 93460-0606 Phone: (805)688-3132 Fax: Contact Person: Mike Hadley Project Name: Routine Bacteriological				Method of Sampling: Composite(C) Grab(G)	Type of Sample **SEE REVERSE SIDE**	Potable(P) Non-Potable(NP) Ag Water (AgW)	Bacti Type: Other(O) System(SYS) Source(SR) Waste(W)	Bacti Reason: Routine(ROUT) Repeat(RPT) Replace(RPL) Other(O) Special(SPL)	Coliform - Coliort-P/A 120ml(PBa)-Na2S2O3	Field Test-Field CI Free	Sampling Fee														
Purchase Order Number:																									
Quote Number:																									
Sampler(s) <i>M. Jimenez</i>																									
Sampling Fee: _____ Pickup Fee: _____ Compositor Setup Date: ___/___/___ Time: ___/___																									
Lab Number: SP 1712601 2-21676																									
Samp Num	Location Description	Date Sampled	Time Sampled	Method of Sampling	Type of Sample	Potable	Bacti Type	Bacti Reason	Coliform	Field Test	Sampling Fee														
1	SS at White Oak	10/12/17	11:20	G	DW				1	1.46	X														
Remarks:				Relinquished		Date:	Time:	Relinquished		Date:	Time:	Relinquished		Date:	Time:										
12				Received By:		Date:	Time:	Received By:		Date:	Time:	Received By:		Date:	Time:										
				<i>[Signature]</i>		10/12/17	1500	<i>[Signature]</i>				<i>[Signature]</i>													

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