

October 29, 2020

SP 2014706:1 **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 2014706-001	4200612	System-Routine	Matthew Jimenez	FGL Environmental	2020-10-23 10:20

**Field Analysis/QA Information**

ID	Sample Description	Cl Total/Free mg/l	Temp	Analysis Started	Analysis Completed	Contact	Contacted
1	SS at White Oak	---/0.68	---	2020-10-23 15:06 ebg	2020-10-24 12:01 lm	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: RRH

cc:SBCEH

Reviewed and  
Approved By

**Raquel R. Harvey**

 Digitally signed by Raquel R. Harvey  
 Title: Tech Director Microbiology  
 Date: 2020-10-29

1677:10/19/2020				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: <b>Routine Bacteriological</b> Purchase Order Number: Quote Number:				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 - Colilert-P/A 120ml(PBa)-Na2S2O3	Field Test-Field CI Free	Sampling Fee										
Sampler(s) <i>M. Jimenez</i>  Sampling Fee: _____ Pickup Fee: _____ Compositor Setup Date: ___/___/___ Time: ___/___/___																					
Lab Number: <b>SP</b> <i>2014700</i> <b>2-21676</b>																					
Samp Num	Location Description	Date Sampled	Time Sampled	Method	Type	Bacti Type	Bacti Reason	Coliform	Field Test	Sampling Fee											
1	SS at White Oak	<i>10/23/20</i>	<i>1620</i>	G	DW			1	<i>0.68</i>	X											
Remarks:				Relinquished <i>[Signature]</i> Date: <i>10/23/20</i> Time: <i>1340</i>		Relinquished Date: _____ Time: _____		Relinquished Date: _____ Time: _____		Relinquished Date: _____ Time: _____											
Received By: <i>[Signature]</i>				Date: <i>10/23/20</i> Time: <i>1340</i>		Received By: _____ Date: _____ Time: _____		Received By: _____ Date: _____ Time: _____		Received By: _____ Date: _____ Time: _____											