

May 17, 2019 SP 1906312:1 Coliform Bacteria Analysis

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**

Customer ID

: 2021676

| 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 1906312-001 | 4200612       | System-Routine     | Matthew Jimenez | FGL Environmental | 2019-05-14 09:58 |

## Field Analysis/QA Information

| ID | Sample Description | Cl Total/Free<br>mg/l | Temp | Analysis Started     | Analysis Completed   | Contact | Contacted |
|----|--------------------|-----------------------|------|----------------------|----------------------|---------|-----------|
| 1  | SS at White Oak    | /0.67                 |      | 2019-05-14 15:16 EBG | 2019-05-15 12:04 EBG | 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: SMH

cc:SBCEH

Digitally signed by Raquel R. Harve Reviewed and Raquel R. Harvey [10] Title: Tech Director Microbiology Date: 2019-05-17 Approved By



# **Monthly**

# CHAIN OF CUSTODY www.fglinc.com Laboratory Copy (1 of 3)

|  |  |          |                 | 1677:05/20/2019     |                      |                    |               | TEST DESCRIPTION   |   |                          | ION - S      | See Reverse | side for Co  | ontainer, P | reservativ | vative and Sampling information |  |       |       |
|--|--|----------|-----------------|---------------------|----------------------|--------------------|---------------|--|---|--------------------------|--------------|-------------|--------------|-------------|------------|---------------------------------|--|-------|-------|
| Phone:   | PP-P-III-P-P-III-II-P-III-II-II-II-II-II | ater Co. |                 |                     |                      |                    |               | Bacti Reason: Routine(ROUT) Repeat(RPT) Replace(RPL) Other(O) Special(SPL) |   |                          |              |             |              |             |            |                                 |  |       |       |
| Project Name: Routine Bacteriological Purchase Order Number: Quote Number:     |  |          |                 | (C) Grab(G)         | **SEE REVERSE SIDE** | Ag Water(AgW)      | S) Source(SR) | epeat(RPT)   |   |                          |              |             |              |             |            |                                 |  |       |       |
| Sample   | M-Jimener                                |          |                 | : Composite(C)      | **SEE REV            | Non-Potable(NP) Ag | ) System(SYS) | ne(ROUT) R<br>PL)  | /A<br>13                                      | iree                     |              |             |              |             |            |                                 |  |       |       |
| _  | ng Fee: Pickup Fee                       |          |                 | .guildı             | o o                  | on-Po              | Other(O)      | Routi<br>cial(SI   | ilert-P<br>a2S2O                              | d CI F                   |              |             |              |             |            |                                 |  |       |       |
| Compositor Setup Date:/ Time:/  Lab Number: SP \( \) \( \) \( \) \( \) 2-21676 |  | 2-21676  | of San          | sample              | 1                    | pe: 0              | Spe           | - Col  | st-Fiel                                       | g Fee                    |              |             |              |             |            |                                 |  |       |       |
| Samp<br>Num  | Location Description                     | Date     | Time<br>Sampled | Method of Sampling: | Type of Sample       | Potable(P)         | Bacti Type:   | Bacti Re<br>Other(O)   | Coliform - Colilert-P/A<br>120ml(PBa)-Na2S2O3 | Field Test-Field CI Free | Sampling Fee |             |              |             |            |                                 |  |       |       |
| 1  | SS at White Oak                          | 1119     | _               | G                   | DW                   |                    |               |  | 1.  | 0-67                     | х            |             |              |             |            |                                 |  |       |       |
|  |  | 1 1      |                 |                     |                      |                    |               |  |   |                          |              |             |              |             |            |                                 |  |       |       |
|  |  |          |                 |                     |                      |                    |               |  |   |                          |              |             | <u> </u>     | <u> </u>    |            |                                 |  |       |       |
|  |  |          |                 |                     |                      |                    |               |  |   |                          |              |             | <u> </u>     |             |            |                                 |  |       |       |
|  |  |          |                 |                     |                      | -                  |               |  |   |                          |              |             | -            |             |            |                                 |  |       |       |
|  |  |          |                 | -                   |                      |                    |               |  |   |                          |              |             | <del> </del> |             |            |                                 | <del>                                     </del> |       |       |
|  |  |          |                 |                     |                      |                    |               |  |   |                          |              |             | 1            |             |            |                                 |  |       |       |
|  |  |          |                 |                     |                      |                    |               |  |   |                          |              |             |              |             |            |                                 |  |       |       |
|  |  |          |                 |                     |                      |                    |               |  |   |                          |              |             |              |             |            |                                 |  |       |       |
| Remarks:   |  |          |                 | Reli                | quish                | ed                 |               |  | Hate<br>1414                                  | Time:                    |              | linquishe   | d            | Date        | : Ti       | ime: R                          | elinquished                                      | Date: | Time: |
|  |  | 1        | P               | Red                 | ived E               | By:                |               | 1  | Date:   | Time:                    | —            | eceived B   | y:           | Date        | : Ti       | me: R                           | eceived By:                                      | Date: | Time: |
|  |  |          |                 | Щ.                  |                      | _                  |               |  | <u> </u>                                      | <u></u>                  | <u> </u>     |             |              |             |            |                                 |  |       |       |

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