

Box R Water Analysis Laboratory LLC

567 NW 2nd St.
 Prineville Oregon 97754
 Phone: 541 447-4911
 Fax: 541 447-4917

System Identification

PWID #: 41- 05053
 Name: Ashwood Elementary School District 8
 Address: 18624 NE Main St.
 City State, Zip Code: Ashwood, OR 97711

Sample Identification:

Sample Location: 18624 NE Main St., Ashwood, OR / kitchen sink
 Sample Date: 05-02-2019

Laboratory Information

Date Received in Lab: 05-02-2019
 Time Received in Lab: 1050
 Sample Identification #: X036910ab
 Location Analysis Took Place: Box R Laboratory
 Results Sent to State: No

Sample RESULTS: Page 1 of 1

Report Date: May 8, 2019
 X Identification Number: X036910ab
 Client ID number#: X036910ab

Source of Water: DW

Sampled by: Chyanne French

Sample time: 0915

Date Analyzed: 05-02-2019
 Time Analyzed: 1300
 Composite Sample: No
 ORELAP #: 100054

Analytical Results

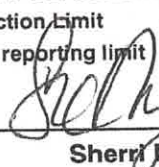
<u>Contaminant</u>	<u>Max Contaminant Limit</u>	<u>Your analysis-Results</u>	<u>Units</u>	<u>Lab Reporting Limit</u>	<u>Method</u>	<u>Notes</u>
<u>Total Coliform</u>	<u>Absent/Present</u>	<u>Absent</u>	<u>n/a</u>	<u>Absent/Present</u>	<u>SM9223B-Colilert 18</u>	
<u>Ecoli</u>	<u>Absent/Present</u>	<u>Absent</u>	<u>n/a</u>	<u>Absent/Present</u>	<u>SM9223B-Colilert 18</u>	
<u>Nitrate</u>	<u>10.0</u>	<u>1.96</u>	<u>Mg/L</u>	<u>1.0</u>	<u>SM4500-NO3-D</u>	

Recommended holding time was in the range for the test method used per The Box R Water Analysis Laboratory LLC., Quality Assurance Plan, and in accordance with the National Environmental Laboratory Accreditation Conference, (NELAC). This is documented in the sample results section above in this report. All results are valid for the sample submitted only, and all results are for the client listed above and on the Chain of Custody form. Samples will be held for a maximum of 10 days from the report date unless prior arrangements have been set up. Thank-you for choosing the Box R Water Analysis Laboratory LLC., if you need further explanation or if you have any other questions in regards to the testing of your water, please do not hesitate to call us at 541 447-4911. This report can not be reproduced except in full without the written permission from Box R Water Analysis Laboratory LLC.

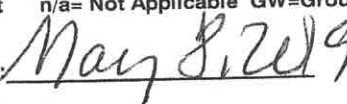
DATA QUALIFIERS AND DEFINITIONS

MDL = Minimum Detection Limit MCL = Minimum Contaminant Level MRL = Minimum Reporting Limit
 ND = Not Detected at reporting limit LRL = Laboratory Reporting Limit n/a= Not Applicable GW=Ground Water

Laboratory Director


 Sherril Miyazaki

Date:


 May 8, 2019

State of Oregon - Drinking Water Services
Microbiological Analysis (Coliform) Reporting Form for Public Water Supplies (v3.4)

PWS# 41 05053
PWS Name: Ashwood School
City, County: Ashwood Jefferson
Phone: 541-489-3297 Fax: _____

ORELAP#: 1000054
Lab Name: Box R Water Analysis Laboratory, LLC
Address: 567 NW 2nd St., Prineville, OR 97754
Phone/Fax: 541-447-4911 / 541-447-4917

Return address for report:
Name: Ashwood School
Address: 18624 NE Main st.
City, State, Zip: Ashwood OR 97711

Bottle#: 30867B
 Results do not meet NELAP Standards-See page 2
Lab Sample ID#: X036910B

Sample Collected Date/Time: 05/02/2019 9:15 AM Chlorinated: No Yes
MM DD YYYY Hour: Min PM Free Chlorine: _____ mg/L
Collected By: Chyanne French

DISTRIBUTION Sample Type: Routine *Repeat Temporary Routine Special
*Date of Initial Positive: ____/____/____ *Original Positive ID#: _____
MM DD YYYY
Address: 18624 NE Main st Sampled at (ex. "SINK"): Kitchen Sink

SOURCE Sample Type: *Triggered *Confirmation Assessment Special
*Date of Initial Positive: ____/____/____ *Original Positive ID#: _____
MM DD YYYY
Source ID: SRC- _____ Source name (ex. "WELL #1"): _____

LAB USE ONLY
Sample Received Date/Time: 05/02/2019 10:50 AM Initials: SKM Temp: 4 °C
MM DD YYYY Hour: Min PM Evidence of cooling? Yes No

Analysis Start Date/Time: 05/02/2019 1300 AM Initials: SKM
MM DD YYYY Hour: Min PM

ORELAP Method(s): Colilert® Colilert-18® Colisure® Chromocult® Coliscan® ReadyCult®
Check all that apply. SM 9221 B (MTF) + E or F SM 19th Ed. SM 20th Ed. SM 21st Ed.
 SM 9221 D (P-A M) + E or F
 SM 9222 B (MF) + 9221E or 9221F or 9222G
 SM 9223 ColiTag® MI agar m-ColiBlue® Other: _____

Test Results: Analysis Complete Date/Time: 05/03/2019 07:00 AM
Total Coliforms: Present Absent Analyst: SK Miyazaki Hour: Min PM
E. Coli: Present Absent Review by: SKM 05/03/2019
MM DD YYYY

Reported By: [Signature] Report Date 05/03/2019
MM DD YYYY

Sample Invalidation:
 Over 30 hours
 Leak
 Heavy non-coliform growth
 Other _____

OHA USE ONLY

Test results relate only to the parameters tested and to the samples as received by the laboratory. Test results meet all requirements of NELAP unless otherwise noted. This report shall not be reproduced except in full, without written consent of this laboratory. Send results to OHA-DWS P.O. Box 14350, Portland, OR 97293-0350

Box R Water Analysis Laboratory LLC
 567 NW 2nd St. Prineville, OR 97754
 Phone: (541)447-4911 Fax: (541)447-4917
 ORELAP # 100054

To be filled in by Person Submitting Sample:

Public Water System Realty Transaction N/A

PWS ID #: 41-05053 Source ID: EP-A Source Name: Well

Public Water System or Property Owner: Ashwood School

Address: 18624 NE Main St.

City, State, Zip: Ashwood OR 97711

Sampled at: Kitchen sink Sampled By: Chyanne French

Date Collected: 05-02-2019 Time Collected: 0915

Sample Composition: Raw or Treated Water | From Source or Distribution | Single or Combined Sample

To be completed by Laboratory:

Date Received in Lab: 05-02-2019 Date Analyzed: 05-02-2019

Lab Sample ID: X036910A Sample Compositing in Lab: Y (N)

Contaminant	Code	MCL mg/L	Analysis mg/L	LRL	Method	Analyst
Nitrate	1040	10.	1.96 mg/L	10 mg/L	SM4500-NO ₃ -D	SKM
Nitrate-Nitrite	1038	10.				
Nitrite	1041	10.				

Box R Water Analysis Laboratory reserves the right to reject any sample that does not meet proper sampling procedures, or does not have a completed chain of custody form.
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