N.C. Department of Environmental, Health, and Natural Resources Division of Laboratory Services State Laborabory of Public Health P.O.Box 28047 - 306 N. Wilmington Street Raleigh, NC 27611-8047

DO NOT WRITE IN THIS SPACE

## **BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM**

Laboratory ID #: Water System ID #: Name of System:	3 7 5 0 1 70-65-010 Miracle Rock Min		New Hanover			
Sample Type:	[5] (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)					
Collected on: DATE: 01/17/12 TIME: 10:18 AM						
Location where collected:						
Location Type:	tion Type: (1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)					
Location Code:		Collected By:	Allen Bak	(er		
FOR REPEAT SAMPLE:		FOR REPLACEMENT SAMPLE:				
Previous Positive Location Code:		Original Sample Type:				
Positive Collection Date:		(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)				
Time:		Original Collection Date:				
Proximity:						
(1 = Same; 2 = Upstream	; 3 = Downstream)					
Mail Results To:			Type of Supply:			
WILMINGTON REGI	ONAL OFFICE P\	NSS		Community Non-Community	NTNC Private	
WILMINGTON, NC 2	8405-3845		Type of Treatme	nt: Chlorinated		
Telephone No. 9	10-796-7215			Non-Chlorinated		
EIN #: 56 2033372 Q	RIER #: 04-16-33		Free Chlorine Residual:  Total Chlorine Residual:			
				Total Official Residue		
	RESULTS			INVALID CODES		
CONTAMINANT METHO Total Coliform 9223E Fecal/E. Coli Heterotrophic P.C.		ABSENT II	NVALID	<ol> <li>Confluent Growth/No Coli</li> <li>TNTC/No Coliform Found</li> <li>Turbid Culture/No Coliform</li> <li>Over 30 Hours Old</li> <li>Improper Sample or Analy</li> </ol>	m Found	
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun: 01/18/12				Time Analysis Begun:	08:30 AM	
Date Analysis Completed:	01/19/12			Time Analysis Completed:	08:55 AM	
Laboratory Log #:	33334			-	Beasley	
COMMENTS: Special	Non-compliance, S	System Type: <sup>-</sup>	ΓNC, Water Source	: GW Steam	Beasley	