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 #:	<u>3 7 5 0 1</u> 01-95-115	County:	Watauga			
Name of System:	Mill Ridge POA	_				
Sample Type: 5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)						
Collected on: DATE:	04/20/10	TIME: 09:1 !		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Location where collected:	Well #1					
Location Type:	(1 = Entry Tap;	2 = General Tap	; 3 = End Tap; 4 = Sour	ce/Intakes; 5 = Other)		
Location Code:	W01	Collected By:	Lisa Edwards	<u>s</u>		
FOR REPEAT SAMPLE:			FOR REPLACEME	NT SAMPLE:		
Previous Positive Location Code:			Original S	ample Type:		
Positive Collection Dat		(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)				
Time:			Original Collection Date:			
Proximity:			Time:	_		
(1 = Same; 2 = Upstream	n; 3 = Downstream)					
Mail Results To:			Type of Supply:			
WINSTON SALEM F	REGIONAL OFFIC	E PWSS			NTNC Private	
WINSTON SALEM, NC 27107-2241 Type of Treatment: Chlorinated						
Talanhana Na 2	20 774 5000			Non-Chlorinated		
Telephone No. 3	36-771-5000			Free Chlorine Residual		
				Total Chlorine Residua	l	
	RESULTS		II	NVALID CODES		
CONTAMINANT METHO	OD PRESENT	ABSENT IN) Confluent Growth/No Coli	form Found	
	Total Coliform 9223B 2) TNTC/No Coliform Found 3) Turbid Culture/No Coliform Found				n Found	
Fecal/E. Coli 4) Over 30 Hou) Over 30 Hours Old		
Heterotrophic P.C/ml (number)			5)	5) Improper Sample or Analysis		
Denost Complex Beauties	, ,		Г	7 Daniasamant Campias D	· · inl	
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun:	04/21/10			ime Analysis Begun:	08:02 AM	
Date Analysis Completed:	04/22/10			ime Analysis Completed:	09:50 AM	
Laboratory Log #:	15871	Certified By: Susan		_		
COMMENTS: System	Type: CWS, Water	Source: GW		Tream	Deasley	