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 #:	37501 30-85-007	County:	Stokes	_		
Name of System:	Early College					
Sample Type:						
Collected on: DATE:	08/02/10 TIME: 09:40 AM					
Location where collected:	Well	1111L. <u>- 00</u> 1	—			
Location Type:	_	o: 2 = General T	ap: 3 = End Tap: 4	4 = Source/Intakes; 5 = Other)		
Location Code:	RW1	Collected B		Lynge		
			,			
FOR REPEAT SAMPLE:	FOR REPLACEMENT SAMPLE:					
Previous Positive Location Code:		Original Sample Type:				
Positive Collection Da	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
Tir	Original Collection Date:					
Proximity:			Time:			
(1 = Same; 2 = Upstrea	m; 3 = Downstream)					
Mail Results To:			Type of Sup	only:		
Wall resoults 10.			Type of our		l aitago	
WINSTON SALEM	REGIONAL OFFIC	CE PWSS		Community X Non-Community	NTNC Private	
WINSTON SALEM,	NC 27107-2241		Type of Tre	atment: Chlorinated		
				X Non-Chlorinated	i	
Telephone No.	336-771-5000			Free Chlorine Residua	al: 0 mg/	
				Total Chlorine Residu	ıal: 0 mg/	
	RESULTS			INVALID CODES		
CONTAMINANT METH	OD PRESENT	ABSENT	INVALID	1) Confluent Growth/No Co	liform Found	
Total Coliform 922		X		2) TNTC/No Coliform Found	d	
Fecal/E. Coli				3) Turbid Culture/No Colifor	rm Found	
Heterotrophic P.C.		/ml		4) Over 30 Hours Old5) Improper Sample or Ana	llysis	
	(number))		, , , , ,		
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun:	08/03/10			Time Analysis Begun:	08:30 AM	
Date Analysis Completed:	08/04/10			Time Analysis Completed:	10:15 AM	
Laboratory Log #:	19102			Certified By: Susan	Beasley	
COMMENTS: Water	Source: GW, Specia	ıl/Non-complia	nce (SP)	Tuesa	Beasley	