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 #:		3 7 5 0 1 30-01-003	County:	Alamance				
Name of System:		Hunter Run #4						
Sample Type:	ole Type: (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)							
Collected on:	DATE:	10/12/10	TIME: 1	1:10 AM				
Location where colle	ected:	Well #4						
Location Type:		(1 = Entry Tap	; 2 = General	Tap; 3 = End Tap;	4 = Source/Intakes; 5 = C	ther)		
Location Code:		S04	Collected	By: <u>J.</u>	Bryan			
FOR REPEAT SAM	PLE:			FOR REPL	ACEMENT SAMPLE:			
Previous Positive Location Code:				C	Original Sample Type:	П		
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 Su	ıpply:			
					Community		NTNC	
WINSTON S	SALEM R	EGIONAL OFFIC	E PWSS		Non-Commun		Private	
WINSTON	SALEM N	IC 27107-2241		Type of Tr	oatmont:	inated		
WINSTON	JALLIVI, I	10 27 107-2241		Type of Th	=	Chlorinated		
Telephone	No. 33	36-771-5000			_	ine Residual	: 0 mg/l	
						rine Residual		
		RESULTS			INVALID CODE	======= ES		
CONTANANT	METHO		ADOENT	IND (ALID			fa F a	
CONTAMINANT METHOD PRESENT			ABSENT INVALID 1) Confluent Growth/No Coliform Foun 2) TNTC/No Coliform Found			orm Found		
Total Coliform Fecal/E. Coli	9223E	_ =	H	3) Turbid Culture/No Coliform Found				
Heterotrophic P.C.				4) Over 30 Hours Old 5) Improper Sample or Analysis				
•		(number)			5) illiproper Sali	ipie di Alialy	313	
Repeat Samples Required					Replacemen	Replacement Samples Required		
Date Analysis Begun: 10/13/10					Time Analysis Be	Time Analysis Begun: 08:35 AM		
Date Analysis Completed: 10/14/10					Time Analysis C	ompleted:	10:10 AM	
Laboratory Log #:	-	21449			Certified By:	Susan E		
COMMENTS:	System Type: Adj., Water Source: GW, Distribution System-Total							
	Ciliform I	Ciliform Rule (TCR), Special-Non-compliance (SP)						