WEBB COUNTY UTILITIES: SETTLEMENT AGREEMENT SAMPLING RESULTS

Sampling Event	Date	City	House Number	Street	Turbidity (NTU)	Chlorine (mg/L)	Chlorine Value Range	Bacteriological Results
10	2/4/2015	Rio Bravo	1404	Margarita	0.25	1.48	Normal	Absent
10	2/4/2015	Rio Bravo	1541	Centeno	0.25	0.76	Normal	Absent
10	2/4/2015	Rio Bravo	1234	Paseo de Tiber	0.96	1.44	Normal	Absent
10	2/4/2015	Rio Bravo	503	Rio Amur	0.85	1.41	Normal	Absent
10	2/4/2015	El Cenizo	3510	Tays	N/A *	N/A *	N/A *	N/A *
10	2/4/2015	El Cenizo	3519	Cecilia	0.30	0.97	Normal	Absent
10	2/4/2015	El Cenizo	454	Morales	0.51	1.59	Normal	Absent
10	2/4/2015	El Cenizo	543	Rodriguez	0.25	0.87	Normal	Absent

Notes:

* No samples collected/analyzed for 3510 Tays - no water flowing from hose bib.

TCEQ	MICROBIAL MONITORING FORM

Public/Private Water System Identification & Sample Collection Information (Please type or use block print)

Public Water System ID: (Must be 7 digits; include all zeros)	2 4 0 0 0 2 2
Public Water System Name:	Water Utilities Rio Bravo WTP
County	Webb
Send Results To: Name:	Melanie Fox - Turnstone EH+S
Address:	226 Enterprize Pkwy Ste 116
City:	Corpus Christi
State:	TX
Zip:	78405 -
Phone #:	361-289-2510
Fax #:	361-289-2511
Sampler Name:	Melanie Fox
Sampler Contact #:	361-738-9226 ☐ Owner ☐ Operator ☑ Other:

System Type: (✓) ☑ Public ☐ Private ☐ Bottled/Vended ☐ Other:

Water Source: (✓) ☐ Groundwater ☑ Surface Water ☐ Groundwater with Surface Water Influence

Sample on Ice?	☑ Yes ☐ No
Temperature at receipt?	3.4 °C
Temperature Device ID	D

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard St
Corpus Christi, TX 78410
Phone (361) 826-1200; Fax (361) 242-9131

Test results meet all requirements of NELAP unless stated otherwise

NELAP Certificate # T104704386-13-8

LABORATORY USE ONLY - DO NOT MARK TO THE RIGHT OF THE BOLD CENTER LINE

Relinquished By:	Melanie Fox	Date	1-5-15
		Time	0823
Received By:		Date	
		Time	
Relinquished By:		Date	
		Time	
Received By:	Dean Vyn	Date	2-5-15
		Time	0823
Tested By:		Date	
		Time	
Reported By:		Date	
		Time	
Report Approved By:			
Title:		Date:	

Sample Identification/Location: Use Specific Address/Location NOT SITE # Raw Wells Use Source ID for Well Sampled. Ex: G1234567A	Collected: Date Month	Day	Year	Time (Please circle AM or PM)	Sample Type: (✓) Distribution	Construction	Raw Well	Special	Repeat	Include Sample ID of Originating Positive on all Repeat/Raw Triggered Samples	Chlorine Residual: Free mg/L	Total mg/L	Unsuitable Sample - Please Resubmit: Rejection Criteria #	Lab Results (Note: All test results relate only to the samples as received. Test Method: SM 9222B): Total Coliform Present	Total Coliform Absent	E. coli Present	E. coli Absent	Laboratory Sample ID Number
1404	2	4	15	1035 AM PM	☐	☐	☐	☑	☐			1.48		☐	☐	☐	☐	
1541	2	4	15	1058 AM PM	☐	☐	☐	☑	☐			0.86		☐	☐	☐	☐	
1234	2	4	15	1114 AM PM	☐	☐	☐	☑	☐			1.44		☐	☐	☐	☐	
503	2	4	15	1137 AM PM	☐	☐	☐	☑	☐			1.41		☐	☐	☐	☐	
3519	2	4	15	1204 AM PM	☐	☐	☐	☑	☐			0.97		☐	☐	☐	☐	
454	2	4	15	1220 AM PM	☐	☐	☐	☑	☐			1.59		☐	☐	☐	☐	
543	2	4	15	1234 AM PM	☐	☐	☐	☑	☐			0.87		☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	

TCEQ Form: 10525 6/2009

*Unsuitable Sample Analysis Rejection Criteria # Definitions

1) Holding time - Analysis not initiated within 30 hours of collection
2) Quantity insufficient for analysis (100ml required)
3) Excessive chlorine residual (>10mg/L)
4) Heavy silt / Turbidity present
5) Form incomplete / Data discrepancy (Circle Errors)
6) Other:

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard Street
361-826-1200 Fax: 361-242-9131

Analytical Report

Client Info

Address: Turnstone EH&S
226 Enterprise Pkwy. Suite 226
Corpus Christi, TX 78405

Phone: 361-289-2510 **EMAIL:** mfox@turnstoneehs.com

Report# /Lab ID#: AA41634 **Report Date:** 2/9/15
Sample Name: 1404
Project ID:
Sample Matrix:
Date Received: 02/05/2015 **Time:** 08:23
Date Sampled: 02/04/2015 **Time:** 10:35

Parameter	Result	Unit	FLAG	RL 5	Date/Time Analyzed	Method	Analyst	Quality Assurance Data 1				
								Data flag 6	Prec 2	Recov 3	LCS 4	Blank
E. coli	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					
Total Coliform	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					

This analytical report is respectfully submitted by the Water Utilities Laboratory. The enclosed results reflect only the sample(s) identified above. The results have been carefully reviewed and, unless otherwise indicated, meet the NELAC requirements as described by the Water Utilities Lab's QA/QC program. No part of this report shall be reproduced or transmitted in any form or by any means without the written consent of the City of Corpus Christi-Water Utilities Lab.

Respectfully Submitted,

Technical Director (or designee)

1. Quality assurance data for the sample batch which included this sample.
2. Precision (PREC) is the absolute value of the relative percent difference between duplicate results.
3. Recovery (RECOV) is the percent of analyte recovered from a spiked sample.
4. Laboratory Control Sample (LCS) results are expressed as the percent recovery of analyte.
5. Reporting Limit (RL), typically at or above the Limit of Quantitation (LOQ) of the analytical method.
6. Data Qualifiers: N=Analysis not performed as per client request. H=Sample exceeded holding time. P=Analysis is from an unpreserved sample. J=Value reported is less than the RL but greater than the MDL. X=MS/MSD recovery or duplicates analysis exceeded the acceptance limit or Standard failed. LA=Lab accident. LE=Lab error. OA=Outside the scope of the lab's NELAC accreditation. U=Unsuitable; sample turned turbid after incubation. T=Sample below temp requirement; not on ice. I=Information on sample bottle and COC does not match. S=Slow to filter; sample contains floc and/or large amount of residue on filter. O=Analysis performed by an outside NELAC accredited lab; O^=Analysis flagged by outside laboratory. Z=Too many colonies present to provide a result (TNTC). A=Value reported is the mean of two or more determinations. R=Reagent water contamination suspected. NI=Not analyzed due to interferences. EQ=Equipment failure. K=BOD result estimated due to blank exceeding the allowable oxygen depletion. SC=BOD/CBOD calculated using a seed correction factor not within acceptable range. D=Sample dilution required for analysis/ quality control. B=Sample broken in transit. QB=No QC data assigned to sample; sample result not affected.

TCEQ	MICROBIAL MONITORING FORM

Public/Private Water System Identification & Sample Collection Information (Please type or use block print)

Public Water System ID: (Must be 7 digits; include all zeros)	2 4 0 0 0 2 2
Public Water System Name:	Water Utilities Rio Bravo WTP
County	Webb
Send Results To: Name:	Melanie Fox - Turnstone EH&S
Address:	226 Enterprize Pkwy Ste 116
City:	Corpus Christi
State:	TX Zip: 78405 -
Phone #:	361-289-2510 Fax #: 361-289-2511
Sampler Name:	Melanie Fox
Sampler Contact #:	361-738-9226 ☐ Owner ☐ Operator ☑ Other:

System Type: (✓) ☑ Public ☐ Private ☐ Bottled/Vended ☐ Other:

Water Source: (✓) ☐ Groundwater ☑ Surface Water ☐ Groundwater with Surface Water Influence

Sample on Ice?	☑ Yes ☐ No
Temperature at receipt?	3.4 °C
Temperature Device ID	D

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard St
Corpus Christi, TX 78410
Phone (361) 826-1200; Fax (361) 242-9131

Test results meet all requirements of NELAP unless stated otherwise

NELAP Certificate # T104704386-13-8

LABORATORY USE ONLY - DO NOT MARK TO THE RIGHT OF THE BOLD CENTER LINE

Relinquished By:	Melanie Fox	Date	2-5-15
		Time	0823
Received By:		Date	
		Time	
Relinquished By:		Date	
		Time	
Received By:	Liam Vyn	Date	2-5-15
		Time	0823
Tested By:		Date	
		Time	
Reported By:		Date	
		Time	
Report Approved By:			
Title:		Date:	

Sample Identification/Location: Use Specific Address/Location NOT SITE # Raw Wells Use Source ID for Well Sampled. Ex: G1234567A	Collected Date Month	Day	Year	Time (Please circle AM or PM)	Sample Type: (✓) Distribution	Construction	Raw Well	Special	Repeat	Include Sample ID of Originating Positive on all Repeat/Raw Triggered Samples	Chlorine Residual ☐ Free mg/L ☑ Total mg/L	Unsuitable Sample - Please Resubmit: Rejection Criteria #	Lab Results (Note: All test results relate only to the samples as received. Test Method: SM 9222B) Total Coliform Present	Total Coliform Absent	E. coli Present	E. coli Absent	Laboratory Sample ID Number
1404	2	4	15	1035 AM	☐	☐	☐	☑	☐		1.48		☐	☐	☐	☐	AA41634
1541	2	4	15	1058 AM	☐	☐	☐	☑	☐		0.86		☐	☐	☐	☐	AA41635
1234	2	4	15	1114 AM	☐	☐	☐	☑	☐		1.44		☐	☐	☐	☐	AA41636
503	2	4	15	1137 AM	☐	☐	☐	☑	☐		1.41		☐	☐	☐	☐	AA41637
3519	2	4	15	1204 PM	☐	☐	☐	☑	☐		0.97		☐	☐	☐	☐	AA41638
454	2	4	15	1220 PM	☐	☐	☐	☑	☐		1.59		☐	☐	☐	☐	AA41639
543	2	4	15	1234 PM	☐	☐	☐	☑	☐		0.87		☐	☐	☐	☐	AA41640
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	

TCEQ Form: 10525 6/2009	*Unsuitable Sample Analysis Rejection Criteria # Definitions			
		1) Holding time - Analysis not initiated within 30 hours of collection	3) Excessive chlorine residual (>10mg/L)	5) Form incomplete / Data discrepancy (Circle Errors)
		2) Quantity insufficient for analysis (100ml required)	4) Heavy silt / Turbidity present	6) Other:

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard Street
361-826-1200 Fax: 361-242-9131

Analytical Report

Client Info

Address: Turnstone EH&S
226 Enterprise Pkwy. Suite 226
Corpus Christi, TX 78405

Phone: 361-289-2510 **EMAIL:** mfox@turnstoneehs.com

Report# /Lab ID#: AA41635 **Report Date:** 2/9/15
Sample Name: 1541
Project ID:
Sample Matrix:
Date Received: 02/05/2015 **Time:** 08:23
Date Sampled: 02/04/2015 **Time:** 10:58

Parameter	Result	Unit	FLAG	RL 5	Date/Time Analyzed	Method	Analyst	Quality Assurance Data 1				
								Data flag 6	Prec 2	Recov 3	LCS 4	Blank
E. coli	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					
Total Coliform	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					

This analytical report is respectfully submitted by the Water Utilities Laboratory. The enclosed results reflect only the sample(s) identified above. The results have been carefully reviewed and, unless otherwise indicated, meet the NELAC requirements as described by the Water Utilities Lab's QA/QC program. No part of this report shall be reproduced or transmitted in any form or by any means without the written consent of the City of Corpus Christi-Water Utilities Lab.

Respectfully Submitted,

Technical Director (or designee)

1. Quality assurance data for the sample batch which included this sample.
2. Precision (PREC) is the absolute value of the relative percent difference between duplicate results.
3. Recovery (RECOV) is the percent of analyte recovered from a spiked sample.
4. Laboratory Control Sample (LCS) results are expressed as the percent recovery of analyte.
5. Reporting Limit (RL), typically at or above the Limit of Quantitation (LOQ) of the analytical method.
6. Data Qualifiers: N=Analysis not performed as per client request. H=Sample exceeded holding time. P=Analysis is from an unpreserved sample. J=Value reported is less than the RL but greater than the MDL. X=MS/MSD recovery or duplicates analysis exceeded the acceptance limit or Standard failed. LA=Lab accident. LE=Lab error. OA=Outside the scope of the lab's NELAC accreditation. U=Unsuitable; sample turned turbid after incubation. T=Sample below temp requirement; not on ice. I=Information on sample bottle and COC does not match. S=Slow to filter; sample contains floc and/or large amount of residue on filter. O=Analysis performed by an outside NELAC accredited lab; O^=Analysis flagged by outside laboratory. Z=Too many colonies present to provide a result (TNTC). A=Value reported is the mean of two or more determinations. R=Reagent water contamination suspected. NI=Not analyzed due to interferences. EQ=Equipment failure. K=BOD result estimated due to blank exceeding the allowable oxygen depletion. SC=BOD/CBOD calculated using a seed correction factor not within acceptable range. D=Sample dilution required for analysis/ quality control. B=Sample broken in transit. QB=No QC data assigned to sample; sample result not affected.

TCEQ	MICROBIAL MONITORING FORM

Public/Private Water System Identification & Sample Collection Information (Please type or use block print)

Public Water System ID: (Must be 7 digits; include all zeros)	2 4 0 0 0 2 2
Public Water System Name:	Water Utilities Rio Bravo WTP
County	Webb
Send Results To: Name:	Melanie Fox - Turnstone EH&S
Address:	226 Enterprize Pkwy Ste 116
City:	Corpus Christi
State:	TX Zip: 78405 -
Phone #:	361-289-2510 Fax #: 361-289-2511
Sampler Name:	Melanie Fox
Sampler Contact #:	361-738-9226 ☐ Owner ☐ Operator ☑ Other:

System Type: (✓) ☑ Public ☐ Private ☐ Bottled/Vended ☐ Other:

Water Source: (✓) ☐ Groundwater ☑ Surface Water ☐ Groundwater with Surface Water Influence

Sample on Ice?	☑ Yes ☐ No
Temperature at receipt?	3.4 °C
Temperature Device ID	D

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard St
Corpus Christi, TX 78410
Phone (361) 826-1200; Fax (361) 242-9131

Test results meet all requirements of NELAP unless stated otherwise

NELAP Certificate # T104704386-13-8

LABORATORY USE ONLY - DO NOT MARK TO THE RIGHT OF THE BOLD CENTER LINE

Relinquished By:	Melanie Fox	Date	2-5-15
		Time	0823
Received By:		Date	
		Time	
Relinquished By:		Date	
		Time	
Received By:	Liam Vyn	Date	2-5-15
		Time	0823
Tested By:		Date	
		Time	
Reported By:		Date	
		Time	
Report Approved By:			
Title:		Date:	

Sample Identification/Location: Use Specific Address/Location NOT SITE # Raw Wells Use Source ID for Well Sampled. Ex: G1234567A	Collected Date Month	Day	Year	Time (Please circle AM or PM)	Sample Type: (✓) Distribution	Construction	Raw Well	Special	Repeat	Include Sample ID of Originating Positive on all Repeat/Raw Triggered Samples	Chlorine Residual Free mg/L	Total mg/L	Unsuitable Sample - Please Resubmit: Rejection Criteria #	Lab Results (Test Method: SM 9222B) Total Coliform Present	Total Coliform Absent	E. coli Present	E. coli Absent	Laboratory Sample ID Number
1404	2	4	15	1035 AM	☐	☐	☐	☑	☐			1.48		☐	☐	☐	☐	AA41634
1541	2	4	15	1058 AM	☐	☐	☐	☑	☐			0.86		☐	☐	☐	☐	AA41635
1234	2	4	15	1114 AM	☐	☐	☐	☑	☐			1.44		☐	☐	☐	☐	AA41636
503	2	4	15	1137 AM	☐	☐	☐	☑	☐			1.41		☐	☐	☐	☐	AA41637
3519	2	4	15	1204 PM	☐	☐	☐	☑	☐			0.97		☐	☐	☐	☐	AA41638
454	2	4	15	1220 PM	☐	☐	☐	☑	☐			1.59		☐	☐	☐	☐	AA41639
543	2	4	15	1234 PM	☐	☐	☐	☑	☐			0.87		☐	☐	☐	☐	AA41640
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	

TCEQ Form: 10525 6/2009	*Unsuitable Sample Analysis Rejection Criteria # Definitions	1) Holding time - Analysis not initiated within 30 hours of collection	3) Excessive chlorine residual (>10mg/L)	5) Form incomplete / Data discrepancy (Circle Errors)
		2) Quantity insufficient for analysis (100ml required)	4) Heavy silt / Turbidity present	6) Other:

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard Street
361-826-1200 Fax: 361-242-9131

Analytical Report

Client Info

Address: Turnstone EH&S
226 Enterprise Pkwy. Suite 226
Corpus Christi, TX 78405

Phone: 361-289-2510 **EMAIL:** mfox@turnstoneehs.com

Report# /Lab ID#: AA41636 **Report Date:** 2/9/15
Sample Name: 1234
Project ID:
Sample Matrix:
Date Received: 02/05/2015 **Time:** 08:23
Date Sampled: 02/04/2015 **Time:** 11:14

Parameter	Result	Unit	FLAG	RL 5	Date/Time Analyzed	Method	Analyst	Quality Assurance Data 1				
								Data flag 6	Prec 2	Recov 3	LCS 4	Blank
E. coli	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					
Total Coliform	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					

This analytical report is respectfully submitted by the Water Utilities Laboratory. The enclosed results reflect only the sample(s) identified above. The results have been carefully reviewed and, unless otherwise indicated, meet the NELAC requirements as described by the Water Utilities Lab's QA/QC program. No part of this report shall be reproduced or transmitted in any form or by any means without the written consent of the City of Corpus Christi-Water Utilities Lab.

Respectfully Submitted,

Technical Director (or designee)

1. Quality assurance data for the sample batch which included this sample.
2. Precision (PREC) is the absolute value of the relative percent difference between duplicate results.
3. Recovery (RECOV) is the percent of analyte recovered from a spiked sample.
4. Laboratory Control Sample (LCS) results are expressed as the percent recovery of analyte.
5. Reporting Limit (RL), typically at or above the Limit of Quantitation (LOQ) of the analytical method.
6. Data Qualifiers: N=Analysis not performed as per client request. H=Sample exceeded holding time. P=Analysis is from an unpreserved sample. J=Value reported is less than the RL but greater than the MDL. X=MS/MSD recovery or duplicates analysis exceeded the acceptance limit or Standard failed. LA=Lab accident. LE=Lab error. OA=Outside the scope of the lab's NELAC accreditation. U=Unsuitable; sample turned turbid after incubation. T=Sample below temp requirement; not on ice. I=Information on sample bottle and COC does not match. S=Slow to filter; sample contains floc and/or large amount of residue on filter. O=Analysis performed by an outside NELAC accredited lab; O^=Analysis flagged by outside laboratory. Z=Too many colonies present to provide a result (TNTC). A=Value reported is the mean of two or more determinations. R=Reagent water contamination suspected. NI=Not analyzed due to interferences. EQ=Equipment failure. K=BOD result estimated due to blank exceeding the allowable oxygen depletion. SC=BOD/CBOD calculated using a seed correction factor not within acceptable range. D=Sample dilution required for analysis/ quality control. B=Sample broken in transit. QB=No QC data assigned to sample; sample result not affected.

TCEQ	MICROBIAL MONITORING FORM

Public/Private Water System Identification & Sample Collection Information (Please type or use block print)

Public Water System ID: (Must be 7 digits; include all zeros)	2 4 0 0 0 2 2
Public Water System Name:	Water Utilities Rio Bravo WTP
County	Webb
Send Results To: Name:	Melanie Fox - Turnstone EH&S
Address:	226 Enterprize Pkwy Ste 116
City:	Corpus Christi
State:	TX Zip: 78405 -
Phone #:	361-289-2510 Fax #: 361-289-2511
Sampler Name:	Melanie Fox
Sampler Contact #:	361-738-9226 ☐ Owner ☐ Operator ☑ Other:

System Type: (✓) ☑ Public ☐ Private ☐ Bottled/Vended ☐ Other:

Water Source: (✓) ☐ Groundwater ☑ Surface Water ☐ Groundwater with Surface Water Influence

Sample on Ice?	☑ Yes ☐ No
Temperature at receipt?	3.4 °C
Temperature Device ID	D

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard St
Corpus Christi, TX 78410
Phone (361) 826-1200; Fax (361) 242-9131

Test results meet all requirements of NELAP unless stated otherwise

NELAP Certificate # T104704386-13-8

LABORATORY USE ONLY - DO NOT MARK TO THE RIGHT OF THE BOLD CENTER LINE

Relinquished By:	Melanie Fox	Date	2-5-15
		Time	0823
Received By:		Date	
		Time	
Relinquished By:		Date	
		Time	
Received By:	Liam Vyn	Date	2-5-15
		Time	0823
Tested By:		Date	
		Time	
Reported By:		Date	
		Time	
Report Approved By:			
Title:		Date:	

Sample Identification/Location: Use Specific Address/Location NOT SITE # Raw Wells Use Source ID for Well Sampled. Ex: G1234567A	Collected Date Month	Day	Year	Time (Please circle AM or PM)	Sample Type: (✓) Distribution	Construction	Raw Well	Special	Repeat	Include Sample ID of Originating Positive on all Repeat/Raw Triggered Samples	Chlorine Residual Free mg/L	Total mg/L	Unsuitable Sample - Please Resubmit: Rejection Criteria #	Lab Results (Test Method: SM 9222B) Total Coliform Present	Total Coliform Absent	E. coli Present	E. coli Absent	Laboratory Sample ID Number
1404	2	4	15	1035 AM	☐	☐	☐	☑	☐			1.48		☐	☐	☐	☐	AA41634
1541	2	4	15	1058 AM	☐	☐	☐	☑	☐			0.86		☐	☐	☐	☐	AA41635
1234	2	4	15	1114 AM	☐	☐	☐	☑	☐			1.44		☐	☐	☐	☐	AA41636
503	2	4	15	1137 AM	☐	☐	☐	☑	☐			1.41		☐	☐	☐	☐	AA41637
3519	2	4	15	1204 PM	☐	☐	☐	☑	☐			0.97		☐	☐	☐	☐	AA41638
454	2	4	15	1220 PM	☐	☐	☐	☑	☐			1.59		☐	☐	☐	☐	AA41639
543	2	4	15	1234 PM	☐	☐	☐	☑	☐			0.87		☐	☐	☐	☐	AA41640
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	

TCEQ Form: 10525 6/2009	*Unsuitable Sample Analysis Rejection Criteria # Definitions	1) Holding time - Analysis not initiated within 30 hours of collection	3) Excessive chlorine residual (>10mg/L)	5) Form incomplete / Data discrepancy (Circle Errors)
		2) Quantity insufficient for analysis (100ml required)	4) Heavy silt / Turbidity present	6) Other:

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard Street
361-826-1200 Fax: 361-242-9131

Analytical Report

Client Info

Address: Turnstone EH&S
226 Enterprise Pkwy. Suite 226
Corpus Christi, TX 78405

Phone: 361-289-2510 **EMAIL:** mfox@turnstoneehs.com

Report# /Lab ID#: AA41637 **Report Date:** 2/9/15
Sample Name: 503
Project ID:
Sample Matrix:
Date Received: 02/05/2015 **Time:** 08:23
Date Sampled: 02/04/2015 **Time:** 11:37

Parameter	Result	Unit	FLAG	RL 5	Date/Time Analyzed	Method	Analyst	Quality Assurance Data 1				
								Data flag 6	Prec 2	Recov 3	LCS 4	Blank
E. coli	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					
Total Coliform	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					

This analytical report is respectfully submitted by the Water Utilities Laboratory. The enclosed results reflect only the sample(s) identified above. The results have been carefully reviewed and, unless otherwise indicated, meet the NELAC requirements as described by the Water Utilities Lab's QA/QC program. No part of this report shall be reproduced or transmitted in any form or by any means without the written consent of the City of Corpus Christi-Water Utilities Lab.

Respectfully Submitted,

Technical Director (or designee)

1. Quality assurance data for the sample batch which included this sample.
2. Precision (PREC) is the absolute value of the relative percent difference between duplicate results.
3. Recovery (RECOV) is the percent of analyte recovered from a spiked sample.
4. Laboratory Control Sample (LCS) results are expressed as the percent recovery of analyte.
5. Reporting Limit (RL), typically at or above the Limit of Quantitation (LOQ) of the analytical method.
6. Data Qualifiers: N=Analysis not performed as per client request. H=Sample exceeded holding time. P=Analysis is from an unpreserved sample. J=Value reported is less than the RL but greater than the MDL. X=MS/MSD recovery or duplicates analysis exceeded the acceptance limit or Standard failed. LA=Lab accident. LE=Lab error. OA=Outside the scope of the lab's NELAC accreditation. U=Unsuitable; sample turned turbid after incubation. T=Sample below temp requirement; not on ice. I=Information on sample bottle and COC does not match. S=Slow to filter; sample contains floc and/or large amount of residue on filter. O=Analysis performed by an outside NELAC accredited lab; O^=Analysis flagged by outside laboratory. Z=Too many colonies present to provide a result (TNTC). A=Value reported is the mean of two or more determinations. R=Reagent water contamination suspected. NI=Not analyzed due to interferences. EQ=Equipment failure. K=BOD result estimated due to blank exceeding the allowable oxygen depletion. SC=BOD/CBOD calculated using a seed correction factor not within acceptable range. D=Sample dilution required for analysis/ quality control. B=Sample broken in transit. QB=No QC data assigned to sample; sample result not affected.

TCEQ	MICROBIAL MONITORING FORM

Public/Private Water System Identification & Sample Collection Information (Please type or use block print)

Public Water System ID: (Must be 7 digits; include all zeros)	2 4 0 0 0 2 2
Public Water System Name:	Water Utilities Rio Bravo WTP
County	Webb
Send Results To: Name:	Melanie Fox - Turnstone EH&S
Address:	226 Enterprize Pkwy Ste 116
City:	Corpus Christi
State:	TX Zip: 78405 -
Phone #:	361-289-2510 Fax #: 361-289-2511
Sampler Name:	Melanie Fox
Sampler Contact #:	361-738-9226 ☐ Owner ☐ Operator ☑ Other:

System Type: (✓) ☑ Public ☐ Private ☐ Bottled/Vended ☐ Other:

Water Source: (✓) ☐ Groundwater ☑ Surface Water ☐ Groundwater with Surface Water Influence

Sample on Ice?	☑ Yes ☐ No
Temperature at receipt?	3.4 °C
Temperature Device ID	D

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard St
Corpus Christi, TX 78410
Phone (361) 826-1200; Fax (361) 242-9131

Test results meet all requirements of NELAP unless stated otherwise

NELAP Certificate # T104704386-13-8

LABORATORY USE ONLY - DO NOT MARK TO THE RIGHT OF THE BOLD CENTER LINE

Relinquished By:	Melanie Fox	Date	2-5-15
		Time	0823
Received By:		Date	
		Time	
Relinquished By:		Date	
		Time	
Received By:	Liam Vyn	Date	2-5-15
		Time	0823
Tested By:		Date	
		Time	
Reported By:		Date	
		Time	
Report Approved By:			
Title:		Date:	

Sample Identification/Location: Use Specific Address/Location NOT SITE # Raw Wells Use Source ID for Well Sampled. Ex: G1234567A	Collected Date Month	Day	Year	Time (Please circle AM or PM)	Sample Type: (✓) Distribution	Construction	Raw Well	Special	Repeat	Include Sample ID of Originating Positive on all Repeat/Raw Triggered Samples	Chlorine Residual ☐ Free mg/L ☑ Total mg/L	Unsuitable Sample - Please Resubmit: Rejection Criteria #	Lab Results (Note: All test results relate only to the samples as received. Test Method: SM 9222B) Total Coliform Present	Total Coliform Absent	E. coli Present	E. coli Absent	Laboratory Sample ID Number
1404	2	4	15	1035 AM	☐	☐	☐	☑	☐		1.48		☐	☐	☐	☐	AA41634
1541	2	4	15	1058 AM	☐	☐	☐	☑	☐		0.86		☐	☐	☐	☐	AA41635
1234	2	4	15	1114 AM	☐	☐	☐	☑	☐		1.44		☐	☐	☐	☐	AA41636
503	2	4	15	1137 AM	☐	☐	☐	☑	☐		1.41		☐	☐	☐	☐	AA41637
3519	2	4	15	1204 PM	☐	☐	☐	☑	☐		0.97		☐	☐	☐	☐	AA41638
454	2	4	15	1220 PM	☐	☐	☐	☑	☐		1.59		☐	☐	☐	☐	AA41639
543	2	4	15	1234 PM	☐	☐	☐	☑	☐		0.87		☐	☐	☐	☐	AA41640
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	

TCEQ Form: 10525 6/2009	*Unsuitable Sample Analysis Rejection Criteria # Definitions			
		1) Holding time - Analysis not initiated within 30 hours of collection	3) Excessive chlorine residual (>10mg/L)	5) Form incomplete / Data discrepancy (Circle Errors)
		2) Quantity insufficient for analysis (100ml required)	4) Heavy silt / Turbidity present	6) Other:

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard Street
361-826-1200 Fax: 361-242-9131

Analytical Report

Client Info

Address: Turnstone EH&S
226 Enterprise Pkwy. Suite 226
Corpus Christi, TX 78405

Phone: 361-289-2510 **EMAIL:** mfox@turnstoneehs.com

Report# /Lab ID#: AA41638 **Report Date:** 2/9/15
Sample Name: 3519
Project ID:
Sample Matrix:
Date Received: 02/05/2015 **Time:** 08:23
Date Sampled: 02/04/2015 **Time:** 12:04

Parameter	Result	Unit	FLAG	RL 5	Date/Time Analyzed	Method	Analyst	Quality Assurance Data 1				
								Data flag 6	Prec 2	Recov 3	LCS 4	Blank
E. coli	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					
Total Coliform	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					

This analytical report is respectfully submitted by the Water Utilities Laboratory. The enclosed results reflect only the sample(s) identified above. The results have been carefully reviewed and, unless otherwise indicated, meet the NELAC requirements as described by the Water Utilities Lab's QA/QC program. No part of this report shall be reproduced or transmitted in any form or by any means without the written consent of the City of Corpus Christi-Water Utilities Lab.

Respectfully Submitted,

Technical Director (or designee)

1. Quality assurance data for the sample batch which included this sample.
2. Precision (PREC) is the absolute value of the relative percent difference between duplicate results.
3. Recovery (RECOV) is the percent of analyte recovered from a spiked sample.
4. Laboratory Control Sample (LCS) results are expressed as the percent recovery of analyte.
5. Reporting Limit (RL), typically at or above the Limit of Quantitation (LOQ) of the analytical method.
6. Data Qualifiers: N=Analysis not performed as per client request. H=Sample exceeded holding time. P=Analysis is from an unpreserved sample. J=Value reported is less than the RL but greater than the MDL. X=MS/MSD recovery or duplicates analysis exceeded the acceptance limit or Standard failed. LA=Lab accident. LE=Lab error. OA=Outside the scope of the lab's NELAC accreditation. U=Unsuitable; sample turned turbid after incubation. T=Sample below temp requirement; not on ice. I=Information on sample bottle and COC does not match. S=Slow to filter; sample contains floc and/or large amount of residue on filter. O=Analysis performed by an outside NELAC accredited lab; O^=Analysis flagged by outside laboratory. Z=Too many colonies present to provide a result (TNTC). A=Value reported is the mean of two or more determinations. R=Reagent water contamination suspected. NI=Not analyzed due to interferences. EQ=Equipment failure. K=BOD result estimated due to blank exceeding the allowable oxygen depletion. SC=BOD/CBOD calculated using a seed correction factor not within acceptable range. D=Sample dilution required for analysis/ quality control. B=Sample broken in transit. QB=No QC data assigned to sample; sample result not affected.

TCEQ	MICROBIAL MONITORING FORM

Public/Private Water System Identification & Sample Collection Information (Please type or use block print)

Public Water System ID: (Must be 7 digits; include all zeros)	2 4 0 0 0 2 2
Public Water System Name:	Water Utilities Rio Bravo WTP
County	Webb
Send Results To: Name:	Melanie Fox - Turnstone EH&S
Address:	226 Enterprize Pkwy Ste 116
City:	Corpus Christi
State:	TX Zip: 78405 -
Phone #:	361-289-2510 Fax #: 361-289-2511
Sampler Name:	Melanie Fox
Sampler Contact #:	361-738-9226 ☐ Owner ☐ Operator ☑ Other:

System Type: (✓) ☑ Public ☐ Private ☐ Bottled/Vended ☐ Other:

Water Source: (✓) ☐ Groundwater ☑ Surface Water ☐ Groundwater with Surface Water Influence

Sample on Ice?	☑ Yes ☐ No
Temperature at receipt?	3.4 °C
Temperature Device ID	D

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard St
Corpus Christi, TX 78410
Phone (361) 826-1200; Fax (361) 242-9131

Test results meet all requirements of NELAP unless stated otherwise

NELAP Certificate # T104704386-13-8

LABORATORY USE ONLY - DO NOT MARK TO THE RIGHT OF THE BOLD CENTER LINE

Relinquished By:	Melanie Fox	Date	2-5-15
		Time	0823
Received By:		Date	
		Time	
Relinquished By:		Date	
		Time	
Received By:	Liam Vyn	Date	2-5-15
		Time	0823
Tested By:		Date	
		Time	
Reported By:		Date	
		Time	
Report Approved By:			
Title:		Date:	

Sample Identification/Location: Use Specific Address/Location NOT SITE # Raw Wells Use Source ID for Well Sampled. Ex: G1234567A	Collected Date Month	Day	Year	Time (Please circle AM or PM)	Sample Type: (✓) Distribution	Construction	Raw Well	Special	Repeat	Include Sample ID of Originating Positive on all Repeat/Raw Triggered Samples	Chlorine Residual Free mg/L	Total mg/L	Unsuitable Sample - Please Resubmit: Rejection Criteria #	Lab Results (Test Method: SM 9222B) Total Coliform Present	Total Coliform Absent	E. coli Present	E. coli Absent	Laboratory Sample ID Number
1404	2	4	15	1035 AM	☐	☐	☐	☑	☐			1.48		☐	☐	☐	☐	AA41634
1541	2	4	15	1058 AM	☐	☐	☐	☑	☐			0.86		☐	☐	☐	☐	AA41635
1234	2	4	15	1114 AM	☐	☐	☐	☑	☐			1.44		☐	☐	☐	☐	AA41636
503	2	4	15	1137 AM	☐	☐	☐	☑	☐			1.41		☐	☐	☐	☐	AA41637
3519	2	4	15	1204 PM	☐	☐	☐	☑	☐			0.97		☐	☐	☐	☐	AA41638
454	2	4	15	1220 PM	☐	☐	☐	☑	☐			1.59		☐	☐	☐	☐	AA41639
543	2	4	15	1234 PM	☐	☐	☐	☑	☐			0.87		☐	☐	☐	☐	AA41640
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	
				AM/PM	☐	☐	☐	☐	☐					☐	☐	☐	☐	

TCEQ Form: 10525 6/2009

*Unsuitable Sample Analysis Rejection Criteria # Definitions

1) Holding time - Analysis not initiated within 30 hours of collection
2) Quantity insufficient for analysis (100ml required)
3) Excessive chlorine residual (>10mg/L)
4) Heavy silt / Turbidity present
5) Form incomplete / Data discrepancy (Circle Errors)
6) Other:

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard Street
361-826-1200 Fax: 361-242-9131

Analytical Report

Client Info

Address: Turnstone EH&S
226 Enterprise Pkwy. Suite 226
Corpus Christi, TX 78405

Phone: 361-289-2510 **EMAIL:** mfox@turnstoneehs.com

Report# /Lab ID#: AA41639 **Report Date:** 2/9/15
Sample Name: 454
Project ID:
Sample Matrix:
Date Received: 02/05/2015 **Time:** 08:23
Date Sampled: 02/04/2015 **Time:** 12:20

Parameter	Result	Unit	FLAG	RL 5	Date/Time Analyzed	Method	Analyst	Quality Assurance Data 1				
								Data flag 6	Prec 2	Recov 3	LCS 4	Blank
E. coli	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					
Total Coliform	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					

This analytical report is respectfully submitted by the Water Utilities Laboratory. The enclosed results reflect only the sample(s) identified above. The results have been carefully reviewed and, unless otherwise indicated, meet the NELAC requirements as described by the Water Utilities Lab's QA/QC program. No part of this report shall be reproduced or transmitted in any form or by any means without the written consent of the City of Corpus Christi-Water Utilities Lab.

Respectfully Submitted,

Technical Director (or designee)

1. Quality assurance data for the sample batch which included this sample.
2. Precision (PREC) is the absolute value of the relative percent difference between duplicate results.
3. Recovery (RECOV) is the percent of analyte recovered from a spiked sample.
4. Laboratory Control Sample (LCS) results are expressed as the percent recovery of analyte.
5. Reporting Limit (RL), typically at or above the Limit of Quantitation (LOQ) of the analytical method.
6. Data Qualifiers: N=Analysis not performed as per client request. H=Sample exceeded holding time. P=Analysis is from an unpreserved sample. J=Value reported is less than the RL but greater than the MDL. X=MS/MSD recovery or duplicates analysis exceeded the acceptance limit or Standard failed. LA=Lab accident. LE=Lab error. OA=Outside the scope of the lab's NELAC accreditation. U=Unsuitable; sample turned turbid after incubation. T=Sample below temp requirement; not on ice. I=Information on sample bottle and COC does not match. S=Slow to filter; sample contains floc and/or large amount of residue on filter. O=Analysis performed by an outside NELAC accredited lab; O^=Analysis flagged by outside laboratory. Z=Too many colonies present to provide a result (TNTC). A=Value reported is the mean of two or more determinations. R=Reagent water contamination suspected. NI=Not analyzed due to interferences. EQ=Equipment failure. K=BOD result estimated due to blank exceeding the allowable oxygen depletion. SC=BOD/CBOD calculated using a seed correction factor not within acceptable range. D=Sample dilution required for analysis/ quality control. B=Sample broken in transit. QB=No QC data assigned to sample; sample result not affected.

TCEQ	MICROBIAL MONITORING FORM

Public/Private Water System Identification & Sample Collection Information (Please type or use block print)

Public Water System ID: (Must be 7 digits; include all zeros)	2 4 0 0 0 2 2
Public Water System Name:	Water Utilities Rio Bravo WTP
County	Webb
Send Results To: Name:	Melanie Fox - Turnstone EH&S
Address:	226 Enterprize Pkwy Ste 116
City:	Corpus Christi
State:	TX Zip: 78405 -
Phone #:	361-289-2510 Fax #: 361-289-2511
Sampler Name:	Melanie Fox
Sampler Contact #:	361-738-9226 ☐ Owner ☐ Operator ☑ Other:

System Type: (✓) ☑ Public ☐ Private ☐ Bottled/Vended ☐ Other:

Water Source: (✓) ☐ Groundwater ☑ Surface Water ☐ Groundwater with Surface Water Influence

Sample on Ice?	☑ Yes ☐ No
Temperature at receipt?	3.4 °C
Temperature Device ID	D

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard St
Corpus Christi, TX 78410
Phone (361) 826-1200; Fax (361) 242-9131

Test results meet all requirements of NELAP unless stated otherwise

NELAP Certificate # T104704386-13-8

LABORATORY USE ONLY - DO NOT MARK TO THE RIGHT OF THE BOLD CENTER LINE

Relinquished By:	Melanie Fox	Date	2-5-15
		Time	0823
Received By:		Date	
		Time	
Relinquished By:		Date	
		Time	
Received By:	Liam Vyn	Date	2-5-15
		Time	0823
Tested By:		Date	
		Time	
Reported By:		Date	
		Time	
Report Approved By:			
Title:		Date:	

Sample Identification/Location: Use Specific Address/Location NOT SITE # Raw Wells Use Source ID for Well Sampled. Ex: G1234567A	Collected Date Month	Day	Year	Time (Please circle AM or PM)	Sample Type: (✓) Distribution	Construction	Raw Well	Special	Repeat	Include Sample ID of Originating Positive on all Repeat/Raw Triggered Samples	Chlorine Residual ☐ Free mg/L ☑ Total mg/L	Unsuitable Sample - Please Resubmit: Rejection Criteria #	Lab Results (Note: All test results relate only to the samples as received. Test Method: SM 9222B) Total Coliform Present	Total Coliform Absent	E. coli Present	E. coli Absent	Laboratory Sample ID Number
1404	2	4	15	1035 AM	☐	☐	☐	☑	☐		1.48		☐	☐	☐	☐	AA41634
1541	2	4	15	1058 AM	☐	☐	☐	☑	☐		0.86		☐	☐	☐	☐	AA41635
1234	2	4	15	1114 AM	☐	☐	☐	☑	☐		1.44		☐	☐	☐	☐	AA41636
503	2	4	15	1137 AM	☐	☐	☐	☑	☐		1.41		☐	☐	☐	☐	AA41637
3519	2	4	15	1204 PM	☐	☐	☐	☑	☐		0.97		☐	☐	☐	☐	AA41638
454	2	4	15	1220 PM	☐	☐	☐	☑	☐		1.59		☐	☐	☐	☐	AA41639
543	2	4	15	1234 PM	☐	☐	☐	☑	☐		0.87		☐	☐	☐	☐	AA41640
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	

TCEQ Form: 10525 6/2009	*Unsuitable Sample Analysis Rejection Criteria # Definitions			
		1) Holding time - Analysis not initiated within 30 hours of collection	3) Excessive chlorine residual (>10mg/L)	5) Form incomplete / Data discrepancy (Circle Errors)
		2) Quantity insufficient for analysis (100ml required)	4) Heavy silt / Turbidity present	6) Other:

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard Street
361-826-1200 Fax: 361-242-9131

Analytical Report

Client Info

Address: Turnstone EH&S
226 Enterprise Pkwy. Suite 226
Corpus Christi, TX 78405

Phone: 361-289-2510 **EMAIL:** mfox@turnstoneehs.com

Report# /Lab ID#: AA41640 **Report Date:** 2/9/15
Sample Name: 543
Project ID:
Sample Matrix:
Date Received: 02/05/2015 **Time:** 08:23
Date Sampled: 02/04/2015 **Time:** 12:34

Parameter	Result	Unit	FLAG	RL 5	Date/Time Analyzed	Method	Analyst	Quality Assurance Data 1				
								Data flag 6	Prec 2	Recov 3	LCS 4	Blank
E. coli	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					
Total Coliform	ABSENT			1	2/5/15 09:15	SM 9223B	BRITTANYM					

This analytical report is respectfully submitted by the Water Utilities Laboratory. The enclosed results reflect only the sample(s) identified above. The results have been carefully reviewed and, unless otherwise indicated, meet the NELAC requirements as described by the Water Utilities Lab's QA/QC program. No part of this report shall be reproduced or transmitted in any form or by any means without the written consent of the City of Corpus Christi-Water Utilities Lab.

Respectfully Submitted,

Technical Director (or designee)

1. Quality assurance data for the sample batch which included this sample.
2. Precision (PREC) is the absolute value of the relative percent difference between duplicate results.
3. Recovery (RECOV) is the percent of analyte recovered from a spiked sample.
4. Laboratory Control Sample (LCS) results are expressed as the percent recovery of analyte.
5. Reporting Limit (RL), typically at or above the Limit of Quantitation (LOQ) of the analytical method.
6. Data Qualifiers: N=Analysis not performed as per client request. H=Sample exceeded holding time. P=Analysis is from an unpreserved sample. J=Value reported is less than the RL but greater than the MDL. X=MS/MSD recovery or duplicates analysis exceeded the acceptance limit or Standard failed. LA=Lab accident. LE=Lab error. OA=Outside the scope of the lab's NELAC accreditation. U=Unsuitable; sample turned turbid after incubation. T=Sample below temp requirement; not on ice. I=Information on sample bottle and COC does not match. S=Slow to filter; sample contains floc and/or large amount of residue on filter. O=Analysis performed by an outside NELAC accredited lab; O^=Analysis flagged by outside laboratory. Z=Too many colonies present to provide a result (TNTC). A=Value reported is the mean of two or more determinations. R=Reagent water contamination suspected. NI=Not analyzed due to interferences. EQ=Equipment failure. K=BOD result estimated due to blank exceeding the allowable oxygen depletion. SC=BOD/CBOD calculated using a seed correction factor not within acceptable range. D=Sample dilution required for analysis/ quality control. B=Sample broken in transit. QB=No QC data assigned to sample; sample result not affected.

TCEQ	MICROBIAL MONITORING FORM

Public/Private Water System Identification & Sample Collection Information (Please type or use block print)

Public Water System ID: (Must be 7 digits; include all zeros)	2 4 0 0 0 2 2
Public Water System Name:	Water Utilities Rio Bravo WTP
County	Webb
Send Results To: Name:	Melanie Fox - Turnstone EH&S
Address:	226 Enterprize Pkwy Ste 116
City:	Corpus Christi
State:	TX Zip: 78405 -
Phone #:	361-289-2510 Fax #: 361-289-2511
Sampler Name:	Melanie Fox
Sampler Contact #:	361-738-9226 ☐ Owner ☐ Operator ☑ Other:

System Type: (✓) ☑ Public ☐ Private ☐ Bottled/Vended ☐ Other:

Water Source: (✓) ☐ Groundwater ☑ Surface Water ☐ Groundwater with Surface Water Influence

Sample on Ice?	☑ Yes ☐ No
Temperature at receipt?	3.4 °C
Temperature Device ID	D

City of Corpus Christi
Water Utilities Laboratory
13101 Leopard St
Corpus Christi, TX 78410
Phone (361) 826-1200; Fax (361) 242-9131

Test results meet all requirements of NELAP unless stated otherwise

NELAP Certificate # T104704386-13-8

LABORATORY USE ONLY - DO NOT MARK TO THE RIGHT OF THE BOLD CENTER LINE

Relinquished By:	Melanie Fox	Date	2-5-15
		Time	0823
Received By:		Date	
		Time	
Relinquished By:		Date	
		Time	
Received By:	Liam Vyn	Date	2-5-15
		Time	0823
Tested By:		Date	
		Time	
Reported By:		Date	
		Time	
Report Approved By:			
Title:		Date:	

Sample Identification/Location: Use Specific Address/Location NOT SITE # Raw Wells Use Source ID for Well Sampled. Ex: G1234567A	Collected Date Month	Day	Year	Time (Please circle AM or PM)	Sample Type: (✓) Distribution	Construction	Raw Well	Special	Repeat	Include Sample ID of Originating Positive on all Repeat/Raw Triggered Samples	Chlorine Residual ☐ Free mg/L ☑ Total mg/L	Unsuitable Sample - Please Resubmit: Rejection Criteria #	Lab Results (Note: All test results relate only to the samples as received. Test Method: SM 9222B) Total Coliform Present	Total Coliform Absent	E. coli Present	E. coli Absent	Laboratory Sample ID Number
1404	2	4	15	1035 AM	☐	☐	☐	☑	☐		1.48		☐	☐	☐	☐	AA41634
1541	2	4	15	1058 AM	☐	☐	☐	☑	☐		0.86		☐	☐	☐	☐	AA41635
1234	2	4	15	1114 AM	☐	☐	☐	☑	☐		1.44		☐	☐	☐	☐	AA41636
503	2	4	15	1137 AM	☐	☐	☐	☑	☐		1.41		☐	☐	☐	☐	AA41637
3519	2	4	15	1204 PM	☐	☐	☐	☑	☐		0.97		☐	☐	☐	☐	AA41638
454	2	4	15	1220 PM	☐	☐	☐	☑	☐		1.59		☐	☐	☐	☐	AA41639
543	2	4	15	1234 PM	☐	☐	☐	☑	☐		0.87		☐	☐	☐	☐	AA41640
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	
				AM PM	☐	☐	☐	☐	☐				☐	☐	☐	☐	

TCEQ Form: 10525 6/2009	*Unsuitable Sample Analysis Rejection Criteria # Definitions	1) Holding time - Analysis not initiated within 30 hours of collection	3) Excessive chlorine residual (>10mg/L)	5) Form incomplete / Data discrepancy (Circle Errors)
		2) Quantity insufficient for analysis (100ml required)	4) Heavy silt / Turbidity present	6) Other:

Public Water Supply - Residual Chlorine Calibration and Measurement

Date	Time	Tech.	Blank Value=0.00 mg/L	Std. 1 Value=0.22 mg/L	Std. 2 Value=0.90 mg/L	Std. 3 Value=1.59 mg/L	Location	Pressure Lbs.	Free Chlorine Sample mg/L	Free Chlorine Sample mg/L	Total Chlorine Sample mg/L	Total Chlorine Sample mg/L
2-4-15	1025	TM	0.00	0.21	0.93	1.63						
2-4-15	1031	TM					1404		—	—	1.48	1.52
2-4-15	1049	TM					1541		—	—	0.76	0.76
2-4-15	1108	TM					1234		—	—	1.44	1.47
2-4-15	1133	TM					503				1.41	1.33
			Water turned off				3510					
2-4-15	1159	TM					3519		—	—	0.97	1.10
2-4-15	1211	TM					454		—	—	1.59	1.60
2-4-15	1230	TM					543		—	—	0.87	0.86

TURBIDITY MEASUREMENTS

Sample Location	Date	Time	Tech.	Reading	Wind Speed
				NTU	
1404 Margarita	1033	2-4-15	MY	0.25	0.2
1541 Centeno	2-4-15	1051	MY	0.25	2.5
1234 Paseo de Tiber	2-4-15	1111	MY	0.96	2.4
503 Rio Amur	2-4-15	1135	MY	0.85	1.2
3510 Tays	water turned off				
3519 Cecilia In	2-4-15	1201	MY	0.30	0.6
454 Morales	2-4-15	1218	MY	0.51	1.7
543 Rodriguez	2-4-15	1232	MY	0.25	3.6

ARGUS-HAZCO

Certificate of Compliance and Calibration

Certificate Number -

Order#	***Make/Model***
Customer#	***Asset #***
Customer Name	***Serial Number***

Sensor Installed and Calibrated

Temperature:

Set Point 1	**Set Point 3**
Lot Number	**Lot Number**
Span Value	**Span Value3:**
Set Point 2	**Set Point 4**
Lot Number	**Lot Number**
Span Value	**Span Value**

Notes

Location	***Asset Released In Tolerance*** ☐
Technician	***All Tests Passed*** ☐
Date	
Time	
SOP#	

Quality Control: Jon Calli **Date:** 1-30

Please Note: All tests performed with NIST Traceable Calibration Solutions at ambient room temperature, humidity, and pressure at the location listed above. Time in transit or any change in temperature, pressure, humidity, or elevation may result in changes to the calibration values listed. Performance of a bump test is recommended prior to each use; refer to owners manual for bump testing and calibration procedures. Use of this test sheet constitutes proof that the testing environment was within manufacturers' limitation and the instrument conforms to manufacturers' specification. For a copy of the calibration standard certificate of analysis or MSDS, contact us at 800-332-0435.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Be it known that

MELANIE FOX

has fulfilled the requirements in accordance with the laws of the State of Texas for

CLASS D WATER OPERATOR

License Number: **WO0009174**
Issue Date: **09/08/2014**
Expiration Date: **10/18/2017**

Executive Director
Texas Commission on Environmental Quality