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Laboratory Report

for

Arizona Department of Environmental Quality
1110 West Washington Street
Phoenix, AZ 85007
Attention: David Burchard

Date of Issue
06/04/2017



Eurofins Eaton
Analytical

TDF: Thomas.D.French
Project Manager

Report:663752
Project:INDIANOASIS-BUD
ADHS License #:AZ0778
Group:Indian Oasis Intermediate School
PO#:PO#: ADEQ16-116686:3



* Accredited in accordance with TNI 2009 and ISO/IEC 17025:2005.

* Laboratory certifies that the test results meet all **TNI 2009 and ISO/IEC 17025:2005** requirements unless noted under the individual analysis.

* Following the cover page are State Certification List, ISO 17025 Accredited Method List, Acknowledgement of Samples Received, Comments, Hits Report, Data Report, QC Summary, QC Report and Regulatory Forms, as applicable.

* Test results relate only to the sample(s) tested.

* This report shall not be reproduced except in full, without the written approval of the laboratory.

STATE CERTIFICATION LIST

State	Certification Number	State	Certification Number
Alabama	41060	Mississippi	Certified
Arizona	AZ0778	Montana	Cert 0035
Arkansas	Certified	Nebraska	Certified
California-Monrovia-ELAP	2813	Nevada	CA00006-2016
California-Colton- ELAP	2812	New Hampshire *	2959
California-Folsom- ELAP	2820	New Jersey *	CA 008
California-Fresno- ELAP	2966	New Mexico	Certified
Colorado	Certified	New York *	11320
Connecticut	PH-0107	North Carolina	06701
Delaware	CA 006	North Dakota	R-009
Florida *	E871024	Oregon (Primary AB) *	ORELAP 4034
Georgia	947	Pennsylvania *	68-565
Guam	16-003r	Puerto Rico	Certified
Hawaii	Certified	Rhode Island	LAO00326
Idaho	Certified	South Carolina	87016
Illinois *	200033	South Dakota	Certified
Indiana	C-CA-01	Tennessee	TN02839
Kansas *	E-10268	Texas *	T104704230-15-9
Kentucky	90107	Utah *	CA000062016-10
Louisiana *	LA16003	Vermont	VT0114
Maine	CA0006	Virginia *	460260
Maryland	224	Washington	C838
Commonwealth of Northern Marianas Is.	MP0004	Wyoming	Certified
Massachusetts	M-CA006	EPA Region 5	Certified
Michigan	9906	Los Angeles County Sanitation Districts	10264

* NELAP/TNI Recognized Accreditation Bodies

ISO 17025 Accredited Method List

The tests listed below are accredited and meet the requirements of ISO 17025 as verified by the ANSI-ASQ National Accreditation Board/ANAB.

Refer to Certificate and scope of accreditation (AT 1807) found at: <http://www.eatonanalytical.com>

SPECIFIC TESTS	METHOD OR TECHNIQUE USED	Environmental (Drinking Water)	Environmental (Waste Water)	Water as a Component of Food and Bev/Bev/ Bottled Water
1,4-Dioxane	EPA 522	x		x
2,3,7,8-TCDD	Modified EPA 1613B	x		x
Acrylamide	In House Method (2440)	x		x
Alkalinity	SM 2320B	x	x	x
Ammonia	EPA 350.1		x	x
Ammonia	SM 4500-NH3 H		x	x
Anions and DBPs by IC	EPA 300.0	x	x	x
Anions and DBPs by IC	EPA 300.1	x		x
Asbestos	EPA 100.2	x	x	
Bicarbonate Alkalinity as HCO ₃	SM 2320B	x	x	x
BOD / CBOD	SM 5210B		x	x
Bromate	In House Method (2447)	x		x
Carbamates	EPA 531.2	x		x
Carbonate as CO ₃	SM 2330B	x	x	x
Carbonyls	EPA 556	x		x
COD	EPA 410.4 / SM 5220D		x	
Chloramines	SM 4500-CL G	x	x	x
Chlorinated Acids	EPA 515.4	x		x
Chlorinated Acids	EPA 555	x		x
Chlorine Dioxide	SM 4500-CLO ₂ D	x		x
Chlorine -Total/Free/ Combined Residual	SM 4500-Cl G	x	x	x
Conductivity	EPA 120.1		x	
Conductivity	SM 2510B	x	x	x
Corrosivity (Langelier Index)	SM 2330B	x		x
Cryptosporidium	EPA 1623	x		x
Cyanide, Amenable	SM 4500-CN G	x	x	
Cyanide, Free	SM 4500CN F	x	x	x
Cyanide, Total	EPA 335.4	x	x	x
Cyanogen Chloride (screen)	In House Method (2470)	x		x
Diquat and Paraquat	EPA 549.2	x		x
DBP/HAA	SM 6251B	x		x
Dissolved Oxygen	SM 4500-O G		x	x
DOC	SM 5310C	x		x
E. Coli (MTF/EC+MUG)		x		x
E. Coli	CFR 141.21(f)(6)(i)	x		x
E. Coli	SM 9223		x	
E. Coli (Enumeration)	SM 9221B.1/ SM 9221F	x		x
E. Coli (Enumeration)	SM 9223B	x		x
EDB/DCBP	EPA 504.1	x		
EDB/DCBP and DBP	EPA 551.1	x		x
EDTA and NTA	In House Method (2454)	x		x
Endothall	EPA 548.1	x		x
Endothall	In-house Method (2445)	x		x
Enterococci	SM 9230B	x	x	
Fecal Coliform	SM 9221 E (MTF/EC)	x		
Fecal Coliform	SM 9221C, E (MTF/EC)		x	
Fecal Coliform (Enumeration)	SM 9221E (MTF/EC)	x		x
Fecal Coliform with Chlorine Present	SM 9221E		x	
Fecal Streptococci	SM 9230B	x	x	
Fluoride	SM 4500-F C	x	x	x
Giardia	EPA 1623	x		x
Glyphosate	EPA 547	x		x
Gross Alpha/Beta	EPA 900.0	x	x	x
Gross Alpha Coprecipitation	SM 7110 C	x	x	x
Hardness	SM 2340B	x	x	x
Heterotrophic Bacteria	In House Method (2439)	x		x
Heterotrophic Bacteria	SM 9215 B	x		x
Hexavalent Chromium	EPA 218.6	x	x	x

SPECIFIC TESTS	METHOD OR TECHNIQUE USED	Environmental (Drinking Water)	Environmental (Waste Water)	Water as a Component of Food and Bev/Bev/ Bottled Water
Hexavalent Chromium	EPA 218.7	x		x
Hexavalent Chromium	SM 3500-Cr B		x	
Hormones	EPA 539	x		x
Hydroxide as OH Calc.	SM 2330B	x		x
Kjeldahl Nitrogen	EPA 351.2		x	
Legionella	CDC Legionella	x		x
Mercury	EPA 245.1	x	x	x
Metals	EPA 200.7 / 200.8	x	x	x
Microcystin LR	ELISA (2360)	x		x
NDMA	EPA 521	x		x
NDMA	TQ In house method based on EPA 521 (2425)	x		x
Nitrate/Nitrite Nitrogen	EPA 353.2	x	x	x
OCL, Pesticides/PCB	EPA 505	x		x
Ortho Phosphate	EPA 365.1	x	x	x
Ortho Phosphate	SM 4500P E			x
Ortho Phosphorous	SM 4500P E	x		
Oxyhalides Disinfection Byproducts	EPA 317.0	x		x
Perchlorate	EPA 331.0	x		x
Perchlorate (low and high)	EPA 314.0	x		x
Perfluorinated Alkyl Acids	EPA 537	x		x
pH	EPA 150.1	x		
pH	SM 4500-H+B	x	x	x
Phenylurea Pesticides/ Herbicides	In House Method, based on EPA 532 (2448)	x		x
Pseudomonas	IDEXX Pseudalert (2461)	x		x
Radium-226	GA Institute of Tech	x		x
Radium-228	GA Institute of Tech	x		x
Radon-222	SM 7500RN	x		x
Residue, Filterable	SM 2540C	x	x	x
Residue, Non-filterable	SM 2540D		x	
Residue, Total	SM 2540B		x	x
Residue, Volatile	EPA 160.4		x	
Semi-VOC	EPA 525.2	x		x
Semi-VOC	EPA 625		x	x
Silica	SM 4500-Si D	x	x	
Silica	SM 4500-SiO ₂ C	x	x	
Sulfide	SM 4500-S ⁻ D		x	
Sulfite	SM 4500-SO ₃ B	x	x	x
Surfactants	SM 5540C	x	x	x
Taste and Odor Analytes	SM 6040E	x		x
Total Coliform (P/A)	SM 9221 A, B	x		x
Total Coliform (Enumeration)	SM 9221 A, B, C	x		x
Total Coliform / E. coli	Colisure SM 9223	x		x
Total Coliform	SM 9221B		x	
Total Coliform with Chlorine Present	SM 9221B		x	
Total Coliform / E.coli (P/A and Enumeration)	SM 9223	x		x
TOC	SM 5310C	x	x	x
TOX	SM 5320B		x	
Total Phenols	EPA 420.1		x	
Total Phenols	EPA 420.4	x	x	x
Total Phosphorous	SM 4500 P E		x	
Turbidity	EPA 180.1	x	x	x
Turbidity	SM 2130B	x	x	
Uranium by ICP/MS	EPA 200.8	x		x
UV 254	SM 5910B	x		
VOC	EPA 524.2/EPA 524.3	x		x
VOC	EPA 624		x	x
VOC	EPA SW 846 8260	x		x
VOC	In House Method (2411)	x		x
Yeast and Mold	SM 9610	x		x

Acknowledgement of Samples Received

Addr: **Arizona Department of Environmental Quality**
1110 West Washington Street
Phoenix, AZ 85007

Attn: David Burchard
Phone: (602) 771-4298

Client ID: ADEQ-LEAD
Folder #: 663752
Project: INDIANOASIS-BUD
Sample Group: Indian Oasis Intermediate School

Project Manager: Thomas.D.French
Phone: (480) 778-1558
PO #: ADEQ16-116686:3
Sampler: Steve Jacott

The following samples were received from you on **June 01, 2017 at 1249**. They have been scheduled for the tests listed below each sample. If this information is incorrect, please contact your service representative. Thank you for using Eurofins Eaton Analytical.

Sample #	Sample ID	Sample Date
<u>201706011099</u>	Rm 107 SPED Sample Type: Tap Facility ID: 100 Building Sample Point ID: Room 107 @ICPMS Freight - Outbound Freight - Return	05/16/2017 0900
<u>201706011100</u>	Room 100 Sample Type: Drinking Fountain Facility ID: 100 Building Sample Point ID: Room 100 @ICPMS	05/16/2017 0645
<u>201706011102</u>	104 - Culture Sample Type: Drinking Fountain Facility ID: 100 - ENOS - 104 Sample Point ID: 104 @ICPMS	05/16/2017 0709
<u>201706011103</u>	Cafe Dining Room Sample Type: Water (Drinking) Fountain Facility ID: Cafeteria Dining Room Sample Point ID: Dining Room @ICPMS	05/16/2017 0700
<u>201706011104</u>	Cafeteria Kitchen Sample Type: Kitchen Tap Facility ID: Cafeteria Sample Point ID: Kitchen @ICPMS	05/16/2017 0640
<u>201706011105</u>	Gym Water Fountain Sample Type: Drinking Fountain Facility ID: Gym Sample Point ID: Gym @ICPMS	05/16/2017 0700
<u>201706011106</u>	Gym/ Water F Sample Type: Drinking Fountain Facility ID: Gym Foyer Sample Point ID: Gym Foyer @ICPMS	05/16/2017 0710
<u>201706011107</u>	500 Library	05/16/2017 0645

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Sample #	Sample ID	Sample Date
	Sample Type: Drinking Fountain Facility ID: Library Sample Point ID: 500 @ICPMS	
201706011108	900	05/16/2017 0717
	Sample Type: Drinking Fountain Facility ID: 900 - Outside Sample Point ID: Outside 900 Dinking Fountain @ICPMS	
201706011109	704 - Intervention	05/16/2017 0713
	Sample Type: Sink Facility ID: 700 - 704 Intervention Rm Sample Point ID: 704 @ICPMS	
201706011110	705B - SPED	05/16/2017 0700
	Sample Type: Tap Facility ID: 700 Building Sample Point ID: 705 B @ICPMS	
201706011111	Rm 701A	05/16/2017 0850
	Sample Type: Tap Facility ID: 700 Building Sample Point ID: 701 A @ICPMS	
201706011112	705A	05/16/2017 0700
	Sample Type: Tap Facility ID: 700 Building Sample Point ID: 705 A @ICPMS	
201706011113	Room 204 - SPED	05/16/2017 0700
	Sample Type: Drinking Fountain Facility ID: 200 Building Sample Point ID: Room 204 @ICPMS	
201706011114	Room 206	05/16/2017 0730
	Sample Type: Drinking Fountain Facility ID: 200 Building Sample Point ID: Room 206	

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Sample #	Sample ID	Sample Date
	@ICPMS	
201706011115	201	05/16/2017 0719
	Sample Type: Drinking Fountain Facility ID: 200 - Spring 201 Sample Point ID: 201	
	@ICPMS	
201706011116	400 Sunrise Hse	05/16/2017 0700
	Sample Type: Drinking Fountain Facility ID: 400 Building Sample Point ID: 400 Building	
	@ICPMS	
201706011117	Office 300	05/16/2017 0645
	Sample Type: Drinking Fountain Facility ID: Office - Main Sample Point ID: 300	
	@ICPMS	

Test Description

@ICPMS -- ICPMS Metals


663752

Collection Log


for experienced sample collectors

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☒ Check this box to confirm that **water had not been used at this tap or other taps in the area for 6 hours** and **no** flushing was done prior to sampling

Name of School District	BUSD #40
School Name	10ES - IC
Building (name/number)	100 BUILDING
Type of Fixture (tap, drinking fountain etc.)	TAP
Location of Fixture (example, room number)	Room 107
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	Rm. 107 SPED
Date of Collection	5/16/17
Time of Collection	9:00 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

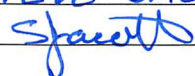
These samples were collected for lead screening purposes only and cannot be used for compliance.

Collection Log

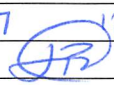
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- ☒ Check this box to confirm that **water had not been used at this tap or other taps in the area for 6 hours** and **no** flushing was done prior to sampling

Name of School District	BUSD #40
School Name	10ES - 1C
Building (name/number)	100 BUILDING
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	Room 100
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	Room 100
Date of Collection	5/16/17
Time of Collection	6:45 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____


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Collection Log

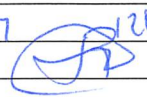
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Name of School District	BAGOQUIARI U.S.D. #40
School Name	INDIAN OASIS INTERMEDIATE CAMPUS
Building (name/number)	100 - ENOS - 104
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	104
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	104- CULTURE
Date of Collection	5/12/17
Time of Collection	7:09 AM
Printed Name of Sample Collector	BARBARA CARDINAL
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____


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Collection Log


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Name of School District	BUSD #40
School Name	10ES - INTERMEDIATE CAMPU
Building (name/number)	CAFETERIA DINING Room
Type of Fixture (tap, drinking fountain etc.)	WATER (DRINKING) FOUNTAIN
Location of Fixture (example, room number)	DINING Room
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	CAFE DINING ROOM
Date of Collection	5/16/17
Time of Collection	7:00 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Collection Log

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Name of School District	BABOQUIVARI U.S.D. #40
School Name	INDIAN OASIS INTERMEDIATE CAMPUS
Building (name/number)	CAFETERIA
Type of Fixture (tap, drinking fountain etc.)	KITCHEN TAP
Location of Fixture (example, room number)	KITCHEN
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	CAFETERIA KITCHEN
Date of Collection	5/16/17
Time of Collection	6:40 AM
Printed Name of Sample Collector	DAKOTA CARDINAL
Signature Sample Collector	<i>Dakota Cardinal</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	<i>[Signature]</i>
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Name of School District	BUSD#40
School Name	10ES-1C
Building (name/number)	GYM
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	GYM
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	GYM WATER FOUNTAIN
Date of Collection	5/16/17
Time of Collection	7:00 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	<i>Steve Jacott</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	<i>JB</i>
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Collection Log

for experienced sample collectors

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Name of School District	BABOQUIVIARI U.S.D. #40
School Name	INDIAN OASIS INTERMEDIATE CAMPUS
Building (name/number)	GYM FOYER
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	GYM FOYER
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	GYM / WATER F.
Date of Collection	5/12/17
Time of Collection	7:10
Printed Name of Sample Collector	BARBARA CARDINAL
Signature Sample Collector	<i>Barbara Cardinal</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	<i>JP</i>
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

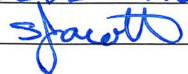
These samples were collected for lead screening purposes only and cannot be used for compliance.

Collection Log


for experienced sample collectors

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- ☒ Check this box to confirm that **water had not been used at this tap or other taps in the area for 6 hours** and **no** flushing was done prior to sampling

Name of School District	BUSD #40
School Name	10ES-1C
Building (name/number)	LIBRARY
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	500
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	500 LIBRARY
Date of Collection	5/16/17
Time of Collection	6:45 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Name of School District	BARDONIAN U.S.D #40
School Name	INDIAN OASIS INTERMEDIATE CAMPUS
Building (name/number)	900 - OUTSIDE
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	OUTSIDE 900 DRINKING FOUNTAIN
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	900
Date of Collection	5/12/17
Time of Collection	7:17
Printed Name of Sample Collector	BARBARA CARDINAL
Signature Sample Collector	<i>Barbara Cardinal</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	<i>JP</i>
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____


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Collection Log


for experienced sample collectors

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☒ Check this box to confirm that **water had not been used at this tap or other taps in the area for 6 hours** and **no** flushing was done prior to sampling

Name of School District	BABQUINARI U.S.D. #40
School Name	INDIAN OASIS INTERMEDIATE CAMPUS
Building (name/number)	700 - 704 INTERVENTION Rm.
Type of Fixture (tap, drinking fountain etc.)	SINK
Location of Fixture (example, room number)	704
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	704- INTERVENTION
Date of Collection	5/12/17
Time of Collection	7:13
Printed Name of Sample Collector	BARBARA CARDINAL
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

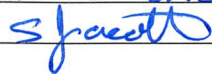
These samples were collected for lead screening purposes only and cannot be used for compliance.

Collection Log


for experienced sample collectors

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Name of School District	BUSD#40
School Name	10ES - INTERMEDIATE CAMPUS
Building (name/number)	700 BUILDING
Type of Fixture (tap, drinking fountain etc.)	TAP
Location of Fixture (example, room number)	705 B
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	705 B- SPED
Date of Collection	5/16/17
Time of Collection	7:00 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

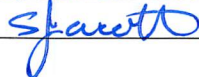
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Collection Log


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Name of School District	BASD #40
School Name	10ES - 1C
Building (name/number)	700 BUILDING
Type of Fixture (tap, drinking fountain etc.)	TAP
Location of Fixture (example, room number)	701A
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	Rm. 701A
Date of Collection	5/16/17
Time of Collection	8:50 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____


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Collection Log


for experienced sample collectors

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Name of School District	BUSD #40
School Name	10ES-1C
Building (name/number)	700 BUILDING
Type of Fixture (tap, drinking fountain etc.)	TAP
Location of Fixture (example, room number)	705A
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	705A
Date of Collection	5/16/17
Time of Collection	7:00AM
Printed Name of Sample Collector	BARBARA CARDINAL
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 12:49
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

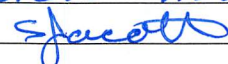
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Collection Log


for experienced sample collectors

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Name of School District	BUSD#40
School Name	10ES-1C
Building (name/number)	200 BUILDING
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	Room 204
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	Room 204-SPED
Date of Collection	5/16/17
Time of Collection	7:00 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

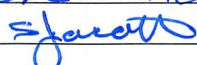
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Collection Log


for experienced sample collectors

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- ☒ Check this box to confirm that **water had not been used at this tap or other taps in the area for 6 hours** and **no** flushing was done prior to sampling

Name of School District	BUSD #40
School Name	10ES - 1C
Building (name/number)	200 BUILDING
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	Room 206
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	Room 206
Date of Collection	5/16/17
Time of Collection	7:30 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____


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Collection Log


for experienced sample collectors

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Name of School District	BAGO QUIVARI U.S. D. #40
School Name	INDIAN OASIS INTERMEDIATE CAMPUS
Building (name/number)	200 - SPRING 201
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	201
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	201
Date of Collection	5/12/17
Time of Collection	7:19
Printed Name of Sample Collector	BARBARA CARDINAL
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Collection Log

for experienced sample collectors

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☒ Check this box to confirm that **water had not been used at this tap or other taps in the area for 6 hours** and **no** flushing was done prior to sampling

Name of School District	BUSD #40
School Name	1055-1C
Building (name/number)	400 BUILDING
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	400 BUILDING
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	400 SUNRISE Ave.
Date of Collection	5/16/17
Time of Collection	7:00 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	<i>[Signature]</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1248
Signature	<i>[Signature]</i>
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples were collected for lead screening purposes only and cannot be used for compliance.

Invoice:	Date: 11May17	SHIPPING:	0.00
Customer: K#169888	Wgt: 20.00 LBS	SPECIAL:	0.00
Dept:	COD:	HANDLING:	0.00
PO Number:	DV:	TOTAL:	0.00

ADEQ Public School Sampling Plan & Co


Sys: GND PPD RMGR
TRCK: 732498204922

Collection Log


for experienced sample collectors

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☒ Check this box to confirm that **water had not been used at this tap or other taps in the area for 6 hours** and **no** flushing was done prior to sampling

Name of School District	BUSD #40
School Name	10ES-1C
Building (name/number)	OFFICE - MAIN
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	300
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	Office 300
Date of Collection	5/16/17
Time of Collection	6:45 AM
Printed Name of Sample Collector	STEVE JACOTT
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	6/1/17 1249
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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750 Royal Oaks Drive, Suite 100
Monrovia, California 91016-3629
(626) 386-1100 FAX (626) 386-1101

Kit #: 169888



Created By: Thomas.D.French - [TDF]
Deliver By: 05/12/2017
STG: Bottle Orders
Ice Type: W

Note: Sampler Please return this paper with your samples

Client ID: ADEQ-LEAD
Project Code: INDIANOASIS-BUD Bottle Orders
Group Name: Indian Oasis Intermediate School
PO#/JOB#: ADEQ16-116686:3

Ship Sample Kits to
Indian Oasis-Baboquivari Unified District
Attention Highway 86, Mile Post 115.5
Sells, AZ 85634

Attn: Edna Morris-Superintendent

Send Report to
Arizona Department of Environmental
Quality
1110 West Washington Street
Phoenix, AZ 85007

Attn: David Burchard
Phone: (602) 771-4298

Billing Address
Arizona Department of Environmental
Quality
1110 West Washington Street
Phoenix, AZ 85007

Attn: ADEQ
Phone: (602) 771-1936

of

Sample Tests

23 @ICPMS

Bottle Qty - Type [preservative information]

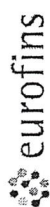
1 - 250ml poly [no preservative]

UN DOT #

Comments

Indian Oasis Intermediate School - Include Indian Oasis-Baboquivari Unified District School-Specific Sample list, 23 Lead Sampling Plan Records, packing instructions for return shipment to Eurofins Eaton Analytical, Inc. 750 Royal Oaks Drive, Suite C, Monrovia, CA 91016. 23 sample containers. Return Shipment Fed EX

Sampler - please refer to Sampling Plan Records for instructions on completing paperwork and what to include with return shipment of the samples.



Eaton Analytical

INTERNAL CHAIN OF CUSTODY RECORD

EEA Folder Number:

663752

SAMPLE TEMP RECEIVED:

SAMPLES REC'D DAY OF COLLECTION?

IR Gun ID = 352A (Observation= 24.1 °C) (Corr.Factor -0.2 °C) (Final = 24.2 °C)

TYPE OF ICE: Real Synthetic No Ice CONDITION OF ICE: Frozen Partially Frozen Thawed N/A

METHOD OF SHIPMENT: Pick-Up / Walk-In / FedEx / UPS / DHL / Area Fast / Top Line / Other:

Compliance Acceptance Criteria:

- 1) Chemistry: >0, ≤6°C, not frozen (NELAP) (if received after 24 hrs of sample collection)
- 2) Microbiology, Distribution: < 10°C, not frozen (can be ≥10°C if received on ice the same day as sample collection, within 8 hours)
- 3) Microbiology, Surface Water: < 10°C (if received after 2 hours of sample collection)

If out of temperature range for both Chemistry and Microbiology samples and temperature does not confirm, then measure the temperature of each quadrant and record each temperature of the quadrants

1 = (Observation= _____ °C) (Corr.Factor= _____ °C) (Final = _____ °C)	2 = (Observation= _____ °C) (Corr.Factor= _____ °C) (Final = _____ °C)
3 = (Observation= _____ °C) (Corr.Factor= _____ °C) (Final = _____ °C)	4 = (Observation= _____ °C) (Corr.Factor= _____ °C) (Final = _____ °C)

4) UCMR3 : 524.3: (Observation= _____ °C) (Corr.Factor= _____ °C) (Final = _____ °C) (non-GLEC)

522: (Observation= _____ °C) (Corr.Factor= _____ °C) (Final = _____ °C)

≤ 10°C if received within 48 hours of sample collection (not the same business day); ≤ 6°C if received after 48 hours of sample collection. Measure temperature for each method above.

5) LT2: Giardia /Cryptosporidium: <20 °C, not frozen (received after 8 hours of sample collection)

E. Coli: < 10°C, not frozen (if received after 2 hours of sample collection)

Giardia/Crypto: (Observation= _____ °C) (Corr.Factor= _____ °C) (Final = _____ °C)

E.Coli: (Observation= _____ °C) (Corr.Factor= _____ °C) (Final = _____ °C)

6) Dioxin (1613 or 2,3,7,8 TCDD): must be between 0-4 °C, not frozen (if received after 24 hrs of sample collection)

Note: If samples are out of temperature range, let the ASMs know. ASMs will determine whether to proceed with analysis or not.

RECEIVED BY:	PRINT NAME:	COMPANY/TITLE: Eurofins Eaton Analytical	DATE: 6/1/17	TIME: 1250
--------------	-------------	--	--------------	------------

TRK# 7324 9820 4922

Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1001	300-306	administration west	1992	Pima	1
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1002	400-410	administration east	1992	Pima	1
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1003	200-206	west wing south	1982	Pima	2
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1004	700	Excel	1993	Pima	1
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1005	900-902	north wing	1993	Pima	1
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1006	500-507	library, media center	1993	Pima	1
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1007	604-611	gymnasium area	1970	Pima	2
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1008	600-603	cafeteria area	1970	Pima	2
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1009	vocational, agriculture	vocational, agriculture	1969	Pima	2
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1010	maintenance shop	maintenance shop	1991	Pima	1

Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1011	special services	special services	1998	Pima	1
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1012	special services (2)	storage	1998	Pima	1
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1013	Special services (3)	storage	1998	Pima	1
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1014	Transportation	Transportation	1960	Pima	2
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1015	701A-706	East wing	1982	Pima	2
Indian Oasis- Baboquivari Unified District	Indian Oasis Intermediate School	1016	100-108	West wing north	1982	Pima	2

Total Containers

23 = 18 w/
WATER

Tel: (626) 386-1100
Fax: (626) 386-1101
1 800 566 LABS (1 800 566 5227)

Laboratory Comments**Report:** 663752**Project:** INDIANOASIS-BUD**Group:** Indian Oasis Intermediate School

Arizona Department of Environmental Quality
David Burchard
1110 West Washington Street
Phoenix, AZ 85007

Tel: (626) 386-1100
Fax: (626) 386-1101
1 800 566 LABS (1 800 566 5227)

Laboratory Hits

Report: 663752
Project: INDIANOASIS-BUD
Group: Indian Oasis Intermediate School

Arizona Department of Environmental Quality
David Burchard
1110 West Washington Street
Phoenix, AZ 85007

Samples Received on:
06/01/2017 1249

Analyzed	Analyte	Sample ID	Result	Federal MCL	Units	MRL
06/02/2017 14:08	Lead Total ICAP/MS	<u>Rm 107 SPED</u>	2.3	15	ug/L	0.5
06/02/2017 14:09	Lead Total ICAP/MS	<u>Room 100</u>	0.95	15	ug/L	0.5
06/02/2017 14:09	Lead Total ICAP/MS	<u>104 - Culture</u>	0.65	15	ug/L	0.5
06/02/2017 14:10	Lead Total ICAP/MS	<u>Cafe Dining Room</u>	1.0	15	ug/L	0.5
06/02/2017 14:16	Lead Total ICAP/MS	<u>Cafeteria Kitchen</u>	0.72	15	ug/L	0.5
06/02/2017 14:18	Lead Total ICAP/MS	<u>Gym Water Fountain</u>	6.4	15	ug/L	0.5
06/02/2017 14:21	Lead Total ICAP/MS	<u>704 - Intervention</u>	3.4	15	ug/L	0.5
06/02/2017 14:24	Lead Total ICAP/MS	<u>705B - SPED</u>	3.0	15	ug/L	0.5
06/02/2017 14:24	Lead Total ICAP/MS	<u>Rm 701A</u>	7.6	15	ug/L	0.5
06/02/2017 14:25	Lead Total ICAP/MS	<u>705A</u>	5.0	15	ug/L	0.5
06/02/2017 14:27	Lead Total ICAP/MS	<u>Room 206</u>	22	15	ug/L	0.5

SUMMARY OF POSITIVE DATA ONLY

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1 800 566 LABS (1 800 566 5227)

Laboratory Data

Report: 663752
Project: INDIANOASIS-BUD
Group: Indian Oasis Intermediate School

Arizona Department of Environmental Quality
David Burchard
1110 West Washington Street
Phoenix, AZ 85007

Samples Received on:
06/01/2017 1249

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
<u>Rm 107 SPED (201706011099)</u>						Sampled on 05/16/2017 0900			
Sample Type: Tap Facility ID: 100 Building Sample Point ID: Room 107									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:08	999650	999879	(EPA 200.8)	Lead Total ICAP/MS	2.3	ug/L	0.5	1
<u>Room 100 (201706011100)</u>						Sampled on 05/16/2017 0645			
Sample Type: Drinking Fountain Facility ID: 100 Building Sample Point ID: Room 100									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:09	999650	999879	(EPA 200.8)	Lead Total ICAP/MS	0.95	ug/L	0.5	1
<u>104 - Culture (201706011102)</u>						Sampled on 05/16/2017 0709			
Sample Type: Drinking Fountain Facility ID: 100 - ENOS - 104 Sample Point ID: 104									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:09	999650	999879	(EPA 200.8)	Lead Total ICAP/MS	0.65	ug/L	0.5	1
<u>Cafe Dining Room (201706011103)</u>						Sampled on 05/16/2017 0700			
Sample Type: Water (Drinking) Fountain Facility ID: Cafeteria Dining Room Sample Point ID: Dining Room									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:10	999650	999879	(EPA 200.8)	Lead Total ICAP/MS	1.0	ug/L	0.5	1
<u>Cafeteria Kitchen (201706011104)</u>						Sampled on 05/16/2017 0640			
Sample Type: Kitchen Tap Facility ID: Cafeteria Sample Point ID: Kitchen									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:16	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	0.72	ug/L	0.5	1
<u>Gym Water Fountain (201706011105)</u>						Sampled on 05/16/2017 0700			
Sample Type: Drinking Fountain Facility ID: Gym Sample Point ID: Gym									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:18	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	6.4	ug/L	0.5	1
<u>Gym/ Water F (201706011106)</u>						Sampled on 05/16/2017 0710			
Sample Type: Drinking Fountain Facility ID: Gym Foyer Sample Point ID: Gym Foyer									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:19	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<u>500 Library (201706011107)</u>						Sampled on 05/16/2017 0645			

Rounding on totals after summation.
(c) - indicates calculated results

Tel: (626) 386-1100
Fax: (626) 386-1101
1 800 566 LABS (1 800 566 5227)

Report: 663752
Project: INDIANOASIS-BUD
Group: Indian Oasis Intermediate School

Arizona Department of Environmental Quality
David Burchard
1110 West Washington Street
Phoenix, AZ 85007

Samples Received on:
06/01/2017 1249

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
Sample Type: Drinking Fountain Facility ID: Library Sample Point ID: 500 EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:20	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
900 (201706011108)						Sampled on 05/16/2017 0717			
Sample Type: Drinking Fountain Facility ID: 900 - Outside Sample Point ID: Outside 900 Dinking Fountain EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:20	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
704 - Intervention (201706011109)						Sampled on 05/16/2017 0713			
Sample Type: Sink Facility ID: 700 - 704 Intervention Rm Sample Point ID: 704 EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:21	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	3.4	ug/L	0.5	1
705B - SPED (201706011110)						Sampled on 05/16/2017 0700			
Sample Type: Tap Facility ID: 700 Building Sample Point ID: 705 B EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:24	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	3.0	ug/L	0.5	1
Rm 701A (201706011111)						Sampled on 05/16/2017 0850			
Sample Type: Tap Facility ID: 700 Building Sample Point ID: 701 A EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:24	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	7.6	ug/L	0.5	1
705A (201706011112)						Sampled on 05/16/2017 0700			
Sample Type: Tap Facility ID: 700 Building Sample Point ID: 705 A EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:25	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	5.0	ug/L	0.5	1
Room 204 - SPED (201706011113)						Sampled on 05/16/2017 0700			
Sample Type: Drinking Fountain Facility ID: 200 Building Sample Point ID: Room 204 EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:26	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
Room 206 (201706011114)						Sampled on 05/16/2017 0730			

Tel: (626) 386-1100
Fax: (626) 386-1101
1 800 566 LABS (1 800 566 5227)

Report: 663752
Project: INDIANOASIS-BUD
Group: Indian Oasis Intermediate School

Arizona Department of Environmental Quality
David Burchard
1110 West Washington Street
Phoenix, AZ 85007

Samples Received on:
06/01/2017 1249

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
Sample Type: Drinking Fountain Facility ID: 200 Building Sample Point ID: Room 206									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:27	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	22	ug/L	0.5	1
201 (201706011115)						Sampled on 05/16/2017 0719			
Sample Type: Drinking Fountain Facility ID: 200 - Spring 201 Sample Point ID: 201									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:29	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
400 Sunrise Hse (201706011116)						Sampled on 05/16/2017 0700			
Sample Type: Drinking Fountain Facility ID: 400 Building Sample Point ID: 400 Building									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:30	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
Office 300 (201706011117)						Sampled on 05/16/2017 0645			
Sample Type: Drinking Fountain Facility ID: Office - Main Sample Point ID: 300									
EPA 200.8 - ICPMS Metals									
06/02/17	06/02/17 14:31	999650	999882	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1

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Laboratory QC Summary

Report: 663752
Project: INDIANOASIS-BUD
Group: Indian Oasis Intermediate School

Arizona Department of Environmental Quality

ICPMS Metals

Prep Batch: 999650 Analytical Batch: 999879

201706011099	Rm 107 SPED
201706011100	Room 100
201706011102	104 - Culture
201706011103	Cafe Dining Room

Analysis Date: 06/02/2017

Analyzed by: RPD
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Analyzed by: RPD

ICPMS Metals

Prep Batch: 999650 Analytical Batch: 999882

201706011104	Cafeteria Kitchen
201706011105	Gym Water Fountain
201706011106	Gym/ Water F
201706011107	500 Library
201706011108	900
201706011109	704 - Intervention
201706011110	705B - SPED
201706011111	Rm 701A
201706011112	705A
201706011113	Room 204 - SPED
201706011114	Room 206
201706011115	201
201706011116	400 Sunrise Hse
201706011117	Office 300

Analysis Date: 06/02/2017

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QC Type	Analyte	Native	Spiked	Recovered	Units	Yield (%)	Limits (%)	RPDLimit (%)	RPD%
ICPMS Metals by EPA 200.8									
Analytical Batch: 999879					Analysis Date: 06/02/2017				
LCS1	Lead Total ICAP/MS		20	19.8	ug/L	99	(85-115)		
LCS2	Lead Total ICAP/MS		20	20.0	ug/L	100	(85-115)	20	1.0
MBLK	Lead Total ICAP/MS			<0.25	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.527	ug/L	105	(50-150)		
MS_201706011065	Lead Total ICAP/MS	ND	20	21.4	ug/L	107	(70-130)		
MS2_201706011093	Lead Total ICAP/MS	ND	20	21.7	ug/L	108	(70-130)		
MSD_201706011065	Lead Total ICAP/MS	ND	20	21.3	ug/L	107	(70-130)	20	0.47
MSD2_201706011093	Lead Total ICAP/MS	ND	20	21.6	ug/L	108	(70-130)	20	0.46
ICPMS Metals by EPA 200.8									
Analytical Batch: 999882					Analysis Date: 06/02/2017				
LCS1	Lead Total ICAP/MS		20	19.9	ug/L	99	(85-115)		
LCS2	Lead Total ICAP/MS		20	19.8	ug/L	99	(85-115)	20	0.0
MBLK	Lead Total ICAP/MS			<0.25	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.524	ug/L	105	(50-150)		
MS_201706011104	Lead Total ICAP/MS	0.72	20	22.5	ug/L	109	(70-130)		
MS2_201706011114	Lead Total ICAP/MS	22	20	43.8	ug/L	109	(70-130)		
MSD_201706011104	Lead Total ICAP/MS	0.72	20	22.0	ug/L	106	(70-130)	20	2.3
MSD2_201706011114	Lead Total ICAP/MS	22	20	43.7	ug/L	108	(70-130)	20	0.46

Spike recovery is already corrected for native results.

Spikes which exceed Limits and Method Blanks with positive results are highlighted by Underlining.

Criteria for MS and Dup are advisory only, batch control is based on LCS. Criteria for duplicates are advisory only, unless otherwise specified in the method.

RPD not calculated for LCS2 when different a concentration than LCS1 is used.

RPD not calculated for Duplicates when the result is not five times the MRL (Minimum Reporting Level).

(S) - Indicates surrogate compound.

(I) - Indicates internal standard compound.