

750 Royal Oaks Drive, Suite 100  
Monrovia, California 91016-3629  
Tel: (626) 386-1100  
Fax: (626) 386-1101  
1 800 566 LABS (1 800 566 5227)



## Laboratory Report

for

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

Date of Issue  
03/16/2017



Eurofins Eaton  
Analytical

TDF: Thomas.D.French  
Project Manager



Report: 644391  
Project: NOGALES-USD  
ADHS License #: AZ0778  
Group: Nogales High 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
-----	-----	Montana	Cert 0035
Arizona	AZ0778	Nebraska	Certified
Arkansas	Certified	Nevada	CA00006-2016
California-Monrovia-ELAP	2813	New Hampshire *	2959
California-Colton- ELAP	2812	New Jersey *	CA 008
California-Folsom- ELAP	2820	New Mexico	Certified
California-Fresno- ELAP	2966	New York *	11320
Colorado	Certified	North Carolina	06701
Connecticut	PH-0107	North Dakota	R-009
Delaware	CA 006	Oregon (Primary AB) *	ORELAP 4034
Florida *	E871024	Pennsylvania *	68-565
Georgia	947	Puerto Rico	Certified
Guam	16-003r	Rhode Island	LAO00326
Hawaii	Certified	South Carolina	87016
Idaho	Certified	South Dakota	Certified
Illinois *	200033	Tennessee	TN02839
Indiana	C-CA-01	Texas *	T104704230-15-9
Kansas *	E-10268	Utah *	CA000062016-10
Kentucky	90107	Vermont	VT0114
Louisiana *	LA16003	Virginia *	460260
Maine	CA0006	Washington	C838
Maryland	224	-----	-----
Commonwealth of Northern Marianas Is.	MP0004	-----	-----
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 HCO3	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 CO3	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-CLO2 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/DBCP 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-SiO2 C	x	x	
Sulfide	SM 4500-S <sup>-</sup> D		x	
Sulfite	SM 4500-SO <sup>3</sup> 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 #: 644391  
 Project: NOGALES-USD  
 Sample Group: Nogales High School

Project Manager: Thomas.D.French  
 Phone: (480) 778-1558  
 PO #: ADEQ16-116686:3  
 Sampler: Alex Martinez/Cesar Valdez/Rafael  
 Vasavilbaso/Christian Estrada/Luis  
 Mungui

The following samples were received from you on **March 10, 2017** at **1506**. 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>201703100669</u>	003808	03/08/2017 0533
Sample Type: Hose Bib Nootjersorse Facility ID: G Sample Point ID: G Building Outside @ICPMS Freight - Outbound Freight - Return		
<u>201703100670</u>	003398	03/08/2017 0515
Sample Type: Drinking Fountain Facility ID: J Sample Point ID: Library Lobby @ICPMS		
<u>201703100671</u>	003432	03/08/2017 0512
Sample Type: Drinking Fountain Facility ID: N - Auditorium Sample Point ID: Entrance Hallway @ICPMS		
<u>201703100672</u>	003802	03/08/2017 0510
Sample Type: Drinking Fountain Facility ID: E GYM Sample Point ID: GYM Hallway @ICPMS		
<u>201703100673</u>	003810	03/08/2017 0515
Sample Type: Drinking Fountain Facility ID: J Building Sample Point ID: Library Lobby @ICPMS		
<u>201703100674</u>	003399	03/08/2017 0533
Sample Type: Hose Bib/(no other Service) Facility ID: G-2 Sample Point ID: G Building Outside @ICPMS		
<u>201703100675</u>	003414	03/08/2017 0520
Sample Type: Drinking Fountain Facility ID: Administration K-2 Sample Point ID: Administration Hallway @ICPMS		
<u>201703100676</u>	003430	03/08/2017 0526



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Sample #	Sample ID	Sample Date
	Sample Type: Drinking Fountain Facility ID: Building H-2 Sample Point ID: H Building Outside @ICPMS	
201703100677	003765	03/08/2017 0526
	Sample Type: Drinking Fountain Facility ID: H-1 Sample Point ID: H Building Outside @ICPMS	
201703100678	003767	03/08/2017 0512
	Sample Type: Drinking Fountain Facility ID: Auditorium N-2 Sample Point ID: Auditorium (Hallway Entrance) @ICPMS	
201703100679	003780	03/08/2017 0508
	Sample Type: Drinking Fountain Facility ID: Cafeteria E Sample Point ID: Cafeteria Entrance @ICPMS	
201703100680	003784	03/08/2017 0520
	Sample Type: Drinking Fountain Facility ID: Administration K-1 Sample Point ID: Administration Hallway @ICPMS	
201703100681	003790	03/08/2017 0539
	Sample Type: Sinl (no other service) Facility ID: M Sample Point ID: M Building Inside @ICPMS	
201703100682	003412	03/08/2017 0540
	Sample Type: Sink Facility ID: B Sample Point ID: Boys Restroom @ICPMS	
201703100683	003433	03/08/2017 0510

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Sample #	Sample ID	Sample Date
	Sample Type: Water Fountain/Drinking Facility ID: D Sample Point ID: Not Provided @ICPMS	
201703100684	003756	03/08/2017 0547
	Sample Type: Custodial Room Facility ID: A Sample Point ID: Not Provided @ICPMS	
201703100685	003760	03/08/2017 0535
	Sample Type: Sink Facility ID: C Sample Point ID: C-7 @ICPMS	
201703100686	003761	03/08/2017 0530
	Sample Type: Sink Facility ID: C Sample Point ID: C-1 @ICPMS	
201703100687	003762	03/08/2017 0505
	Sample Type: Restroom Sink Facility ID: F Sample Point ID: Not Provided @ICPMS	
201703100688	003763	03/08/2017 0542
	Sample Type: Sink Facility ID: B Sample Point ID: Girls Restroom @ICPMS	
201703100689	003775	03/08/2017 0600
	Sample Type: Sink Facility ID: A-5 Sample Point ID: A-5 @ICPMS	
201703100690	003781	03/08/2017 0507

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Sample #	Sample ID	Sample Date
	Sample Type: Custodial Room Facility ID: F Sample Point ID: Not Provided @ICPMS	
<u>201703100691</u>	003793	03/08/2017 0555
	Sample Type: Sink Facility ID: A-4 Sample Point ID: A-4 @ICPMS	
<u>201703100692</u>	003803	03/08/2017 0515
	Sample Type: Custodial Room Facility ID: D Sample Point ID: Not Provided @ICPMS	
<u>201703100693</u>	003806	03/08/2017 0545
	Sample Type: Custodial Room Facility ID: A Sample Point ID: Not Provided @ICPMS	
<u>201703100694</u>	003816	03/08/2017 0503
	Sample Type: Drinking Fountain Facility ID: F Sample Point ID: F-1 @ICPMS	
<u>201703100695</u>	003817	03/08/2017 0500
	Sample Type: Drinking Fountain Facility ID: F Sample Point ID: F-3 @ICPMS	
<u>201703100696</u>	B.D.F	03/08/2017 0549
	Sample Type: Drinking Fountain Facility ID: B Sample Point ID: Outside Building B @ICPMS	
<u>201703100697</u>	C.K.	03/08/2017 0500

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Sample #	Sample ID	Sample Date
	Sample Type: Kitchen Sink Facility ID: Central Kitchen Sample Point ID: Kitchen @ICPMS	
201703100698	D2	03/08/2017 0506
	Sample Type: North Kitchen Sink Facility ID: D Sample Point ID: D2 @ICPMS	
201703100699	D3	03/08/2017 0512
	Sample Type: North Faucet Facility ID: D Sample Point ID: D3 @ICPMS	
201703100700	H2	03/08/2017 0503
	Sample Type: Room #2 Facility ID: H. Special Ed Sample Point ID: Kitchen Sink @ICPMS	
201703100701	L5	03/08/2017 0558
	Sample Type: Drinking Fountain East Facility ID: L Sample Point ID: Room L5 @ICPMS	
201703100702	P	03/08/2017 0527
	Sample Type: Drinking Fountain Facility ID: P Sample Point ID: P @ICPMS	
201703100703	R2	03/08/2017 0519
	Sample Type: NE Sink Facility ID: R Sample Point ID: R2 @ICPMS	
201703100704	BB	03/08/2017 0554

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Sample #	Sample ID	Sample Date
	Sample Type: Bathroom Lavatory Facility ID: B Sample Point ID: BB @ICPMS	
<b>201703100705</b>	<b>L4</b>	<b>03/08/2017 0544</b>
	Sample Type: Sink Facility ID: L Sample Point ID: L4 @ICPMS	

## Test Description

@ICPMS -- ICPMS Metals

**Collection Log**  
*for experienced sample collectors*

644391

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	NUSD #1
School Name	(NHS) Nogales High School
Building (name/number)	G
Type of Fixture (tap, drinking fountain etc.)	Hose bib. No other source
Location of Fixture (example, room number)	Q Building outside
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003808
Date of Collection	3-7-2017
Time of Collection	5:33 AM
Printed Name of Sample Collector	Alex Montañez
Signature Sample Collector	Alex Montañez

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	MAZ
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	Nogales Unified School District #1
School Name	Nogales High School
Building (name/number)	J.
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Library Lobby
Sample Identification Number ( <b>Write the number here and on sample container</b> )	003398
Date of Collection	3-7-2017
Time of Collection	5:15 AM
Printed Name of Sample Collector	Alex Montañez
Signature Sample Collector	<i>Alex Montañez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	<i>MAV</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	Nogales Unified School district
School Name	Nogales High School
Building (name/number)	N - Auditorium
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	entrance hall way
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	603432
Date of Collection	3-7-2017
Time of Collection	5:12 AM
Printed Name of Sample Collector	Alex Montenegro
Signature Sample Collector	Alex Montenegro

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	MAV
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.*

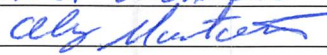


## Collection Log

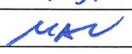
for experienced sample collectors

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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	Nogales Unified School District
School Name	Nogales High School
Building (name/number)	E Gym
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Gym hallway
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003802
Date of Collection	3-7-2017
Time of Collection	5:10 AM
Printed Name of Sample Collector	Alex Montañez
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3.10.17 15:06
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	NUSD #1
School Name	Mogales High School
Building (name/number)	J Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Library Lobby
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003810
Date of Collection	3-7-2017
Time of Collection	5:15 AM
Printed Name of Sample Collector	Alex Montanez
Signature Sample Collector	<i>Alex Montanez</i>

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3/10/17 15:06
Signature	<i>MAN</i>
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

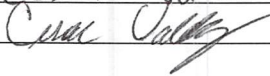
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log


*for experienced sample collectors*

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	Nogales Unified School District
School Name	Nogales High School
Building (name/number)	G-2
Type of Fixture (tap, drinking fountain etc.)	Hose bib / (No other source)
Location of Fixture (example, room number)	G Building outside
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003399
Date of Collection	3-7-17
Time of Collection	5:33 Am
Printed Name of Sample Collector	Cesar Valdez
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3.10.17 15:06
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

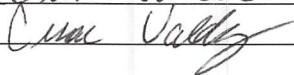
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log

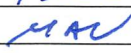
*for experienced sample collectors*

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	Nogales Unified School District
School Name	Nogales High School
Building (name/number)	Administration K-2
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Administration Hallway
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003414
Date of Collection	3-7-17
Time of Collection	5:20 AM
Printed Name of Sample Collector	Cesar Valdez
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
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*

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	Nogales Unified School District
School Name	Nogales High School
Building (name/number)	Building H-2
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	H Building Outside (Drinking fountain)
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003430
Date of Collection	3-7-17
Time of Collection	5:26 Am
Printed Name of Sample Collector	Cesar Valdez
Signature Sample Collector	Cesar Valdez

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	M. 3-10-17 15:06
Signature	MAC
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*

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	Nogales Unified School District
School Name	Nogales High School
Building (name/number)	H-1
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	H building outside (Drinking fountain)
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003765
Date of Collection	3-7-17
Time of Collection	5:26 Am
Printed Name of Sample Collector	Cesar Valdez
Signature Sample Collector	<i>Cesar Valdez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3/10/17 15:06
Signature	<i>mm</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*

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	Nogales Unified School District
School Name	Nogales High School
Building (name/number)	Auditorium N-2
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Auditorium (Hallway entrance)
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003767
Date of Collection	3-7-17
Time of Collection	5:12 Am
Printed Name of Sample Collector	Cesar Valdez
Signature Sample Collector	<i>Cesar Valdez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3/10/17 15:06
Signature	<i>MAC</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*

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	Nogales Unified School District
School Name	Nogales High School
Building (name/number)	Cafeteria E
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Cafeteria Entrance
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003780
Date of Collection	3-7-17
Time of Collection	5:08 Am
Printed Name of Sample Collector	Cesar Valdez
Signature Sample Collector	Cesar Valdez

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	MAV
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.*

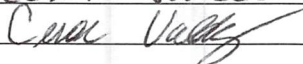


## Collection Log

*for experienced sample collectors*

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	Nogales Unified School District
School Name	Nogales High School
Building (name/number)	Administration K-1
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Administration Hallway
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003784
Date of Collection	3-7-17
Time of Collection	5:20 Am
Printed Name of Sample Collector	Cesar Valdez
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3/10/17 15:06
Signature	MAN
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

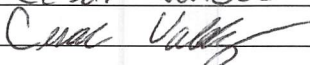
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log


*for experienced sample collectors*

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	Nogales Unified School District
School Name	Nogales High School
Building (name/number)	M
Type of Fixture (tap, drinking fountain etc.)	Sink (No other source)
Location of Fixture (example, room number)	M Building inside
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	003790
Date of Collection	3-7-17
Time of Collection	5:39 Am
Printed Name of Sample Collector	Cesar Valdez
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
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*

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	NUSD#1
School Name	NHS
Building (name/number)	B
Type of Fixture (tap, drinking fountain etc.)	SINK
Location of Fixture (example, room number)	Boys Restroom
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003412
Date of Collection	03/07/17
Time of Collection	5:40 AM
Printed Name of Sample Collector	Rafael Vasquez
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
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*

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	NUSD#1
School Name	NHS
Building (name/number)	D
Type of Fixture (tap, drinking fountain etc.)	Water Fountain / Drinking
Location of Fixture (example, room number)	
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003433
Date of Collection	03/07/17
Time of Collection	5:10 AM
Printed Name of Sample Collector	Rafael Vasavilbaso
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	MAV
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*

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	NUSD#1
School Name	NHS
Building (name/number)	A
Type of Fixture (tap, drinking fountain etc.)	custodial Room
Location of Fixture (example, room number)	
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003756
Date of Collection	03/07/17
Time of Collection	5:47 AM
Printed Name of Sample Collector	Rafael Vararibaso
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-7-17 15:06
Signature	MAN
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*

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	NUSD #1
School Name	NHS
Building (name/number)	C
Type of Fixture (tap, drinking fountain etc.)	SINK
Location of Fixture (example, room number)	C-7
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003760
Date of Collection	03/07/17
Time of Collection	5:35 AM
Printed Name of Sample Collector	Rafael Vasquez
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	MAV
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*

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	NUSD#1
School Name	NHS
Building (name/number)	C
Type of Fixture (tap, drinking fountain etc.)	SINK
Location of Fixture (example, room number)	C-1
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003761
Date of Collection	03/07/17
Time of Collection	5:30 AM
Printed Name of Sample Collector	Rafael Vamirbasa
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-16 15:06
Signature	MAN
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*

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	NVSD#1
School Name	NHS
Building (name/number)	F
Type of Fixture (tap, drinking fountain etc.)	Restroom sink
Location of Fixture (example, room number)	
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003767
Date of Collection	03/07/17
Time of Collection	5:05 AM
Printed Name of Sample Collector	Rafael Varawilbon
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3/10/17 15:06
Signature	MAN
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*

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	NUSD #1
School Name	NHS
Building (name/number)	B
Type of Fixture (tap, drinking fountain etc.)	SINK
Location of Fixture (example, room number)	Girls Restroom
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	# 003763
Date of Collection	03/07/17
Time of Collection	5:42 AM
Printed Name of Sample Collector	Rafael Vasquez
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	MAV
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*

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	NUSD # 1
School Name	NHS
Building (name/number)	A-5
Type of Fixture (tap, drinking fountain etc.)	Sink
Location of Fixture (example, room number)	A-5
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003775
Date of Collection	03/07/17
Time of Collection	6:00 AM
Printed Name of Sample Collector	Rafael Vasquez
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	370-17 15:06
Signature	MAN
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*

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	NUSD #1
School Name	NHS
Building (name/number)	F -
Type of Fixture (tap, drinking fountain etc.)	custodial Room
Location of Fixture (example, room number)	
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003781
Date of Collection	03/07/17
Time of Collection	5:07 AM
Printed Name of Sample Collector	Rafael Varayilbano
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3.10.17 15:06
Signature	MAN
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

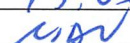
*for experienced sample collectors*

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	NUSD #1
School Name	NHS
Building (name/number)	A-4
Type of Fixture (tap, drinking fountain etc.)	sink
Location of Fixture (example, room number)	A-4
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003793
Date of Collection	3/7/17
Time of Collection	5:55 AM
Printed Name of Sample Collector	Rafael Vasavilasa
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
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*

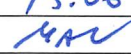
Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☒ 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	NUSD#1
School Name	NHS
Building (name/number)	D
Type of Fixture (tap, drinking fountain etc.)	Custodial Room
Location of Fixture (example, room number)	
Sample Identification Number ( <b>Write the number here and on sample container</b> )	#003803
Date of Collection	03/07/17
Time of Collection	5:15 AM
Printed Name of Sample Collector	Rafael Varavillasa
Signature Sample Collector	

Notes Sample collector:

# on container 003808  
ID on bottle as G Building 1

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3/10/17 15:06
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*

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	NUSD #1
School Name	NHS
Building (name/number)	A
Type of Fixture (tap, drinking fountain etc.)	custodian Room
Location of Fixture (example, room number)	
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003806
Date of Collection	03/07/17
Time of Collection	5:45 AM
Printed Name of Sample Collector	Rafael Vasquez
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	MAN
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

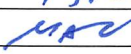
*for experienced sample collectors*

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	NUSD#1
School Name	NHS
Building (name/number)	F
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	F-1
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003816
Date of Collection	03/07/17
Time of Collection	5:03 AM
Printed Name of Sample Collector	Rafael Vasquez
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
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*

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	NUSD#1
School Name	NHS
Building (name/number)	F
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	F-3
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	#003817
Date of Collection	03/07/17
Time of Collection	5:00 AM
Printed Name of Sample Collector	Rafael Vazquez
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	MAZ
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.*

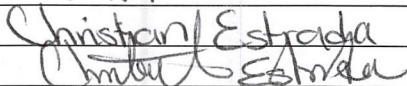


## Collection Log

*for experienced sample collectors*

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	NUSD #1
School Name	NHS
Building (name/number)	B
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	Drinking fountain outside Building B.
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	B.D.F
Date of Collection	March 7, 2017
Time of Collection	5:49 AM
Printed Name of Sample Collector	Christian Estrada
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3/10/17 15:06
Signature	MAV
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

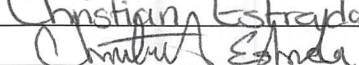
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log

*for experienced sample collectors*

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	NUSD # 1
School Name	NHS
Building (name/number)	Central Kitchen
Type of Fixture (tap, drinking fountain etc.)	Kitchen Sink
Location of Fixture (example, room number)	Kitchen
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	C.K.
Date of Collection	March 7, 2017
Time of Collection	5:00am
Printed Name of Sample Collector	Christiana Estrada
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	MAZ
Notes:	

For relinquishing samples upon delivery to labs only

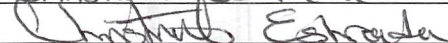
Relinquished date and signature \_\_\_\_\_

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

**Collection Log**  
*for experienced sample collectors*

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	NUSD #1
School Name	NHS
Building (name/number)	D
Type of Fixture (tap, drinking fountain etc.)	North Kitchen Sink
Location of Fixture (example, room number)	D2
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	D2
Date of Collection	March 7, 2017
Time of Collection	5:06 AM
Printed Name of Sample Collector	Christian Estrada
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
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*

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	NUSD # 1
School Name	NHS
Building (name/number)	D
Type of Fixture (tap, drinking fountain etc.)	North Faucet
Location of Fixture (example, room number)	D3
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	D3
Date of Collection	March 7, 2017
Time of Collection	5:12am
Printed Name of Sample Collector	Christian Estrada
Signature Sample Collector	Christian Estrada

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	310-17 15:06
Signature	MMV
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.*

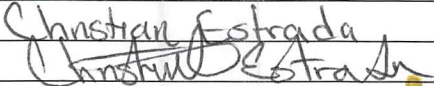


## Collection Log


*for experienced sample collectors*

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	NUSD # 1
School Name	NHS
Building (name/number)	H, Special Ed
Type of Fixture (tap, drinking fountain etc.)	Room #2
Location of Fixture (example, room number)	Kitchen Sink
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	H 2
Date of Collection	March 7, 2017
Time of Collection	6:03am
Printed Name of Sample Collector	Christian Estrada
Signature Sample Collector	

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
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*

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	NUSD #1
School Name	NHS
Building (name/number)	L
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain east
Location of Fixture (example, room number)	Room L5
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	L5
Date of Collection	March 7, 2017
Time of Collection	5:58AM
Printed Name of Sample Collector	Christian Estrada
Signature Sample Collector	Christian Estrada

Notes Sample collector:
-------------------------

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3/10/17 15:06
Signature	MAN
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

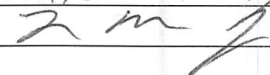
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log


*for experienced sample collectors*

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	NUSD #1
School Name	MHS
Building (name/number)	P
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Weight room (Apache Stadium)
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	P
Date of Collection	March 7, 2017
Time of Collection	5:27
Printed Name of Sample Collector	Luis Munguia
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3.10.17 15:06
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

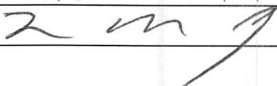
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log

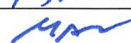
*for experienced sample collectors*

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	NUSD #1
School Name	NHS
Building (name/number)	R
Type of Fixture (tap, drinking fountain etc.)	NE sink
Location of Fixture (example, room number)	Room R2
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	R2
Date of Collection	March 7, 2017
Time of Collection	5:19
Printed Name of Sample Collector	Luis Munguia
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

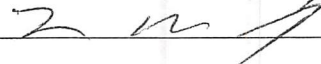
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log


*for experienced sample collectors*

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- ☒ 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	NUSD #1
School Name	NHS
Building (name/number)	B
Type of Fixture (tap, drinking fountain etc.)	Bathroom lavatory
Location of Fixture (example, room number)	B building bathrooms
Sample Identification Number ( <b>Write the number here and on sample container</b> )	BB
Date of Collection	March 7, 2017
Time of Collection	5:54
Printed Name of Sample Collector	Luis Munguia
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3/10/17 15:06
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.*

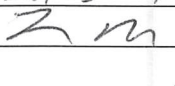


## Collection Log


*for experienced sample collectors*

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- ☒ 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	NUSD #1
School Name	NHS
Building (name/number)	L
Type of Fixture (tap, drinking fountain etc.)	Sink
Location of Fixture (example, room number)	Room L4
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	L4
Date of Collection	March 7, 2017
Time of Collection	5:44
Printed Name of Sample Collector	Luis Munguia
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3.10.17 15:06
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

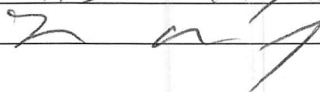
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log

for experienced sample collectors

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	NUSD #1
School Name	NHS
Building (name/number)	S
Type of Fixture (tap, drinking fountain etc.)	N/A
Location of Fixture (example, room number)	N/A
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	N/A
Date of Collection	March 7, 2017
Time of Collection	
Printed Name of Sample Collector	Luis Munguia
Signature Sample Collector	

Notes Sample collector:

No water sources were available to collect samples.

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	MAN 3.10.17 15:06
Signature	MAN
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature \_\_\_\_\_

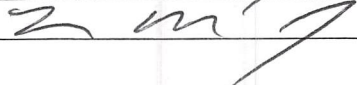
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log

for experienced sample collectors

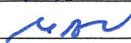
Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

- ☒ 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	NUSD #1
School Name	Nogales High School
Building (name/number)	Q
Type of Fixture (tap, drinking fountain etc.)	N/A
Location of Fixture (example, room number)	N/A
Sample Identification Number ( <b><u>Write the number here and on sample container</u></b> )	N/A
Date of Collection	March 7, 2017
Time of Collection	
Printed Name of Sample Collector	Luis Munguia
Signature Sample Collector	

Notes Sample collector:

No water sources were available to collect samples.

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	3-10-17 15:06
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.*



Eaton Analytical

## Kit Order for Arizona Department of Environmental Quality

Thomas.D.French is your Eurofins Eaton Analytical Service Manager

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

Kit #: 159230



Created By: Thomas.D.French - [TDF]  
Deliver By: 02/17/2017  
STG: Bottle Orders  
Ice Type: W

Client ID: ADEQ-LEAD

Project Code: NOGALES-USD Bottle Orders

Group Name: Nogales High School

PO#/JOB#:

### Note: Sampler Please return this paper with your samples

**Ship Sample Kits to**  
Nogales Unified School District  
610 W. Western Avenue  
Nogales, AZ 85621  
  
Attn: Ricardo De La Riva  
Phone: (520) 287-0800

**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

39

@ICPMS

Bottle Qty - Type [ preservative information ]

1 - 250ml poly [ no preservative ]

UN DOT #

### Comments

Nogales High School. Include Nogales Unified District School-Specific Sample list, 39 Lead Sampling Plan Records, packing instructions for return shipment to Eurofins Eaton Analytical, Inc. 750 Royal Oaks Drive, Suite C, Monrovia, CA 91016. 39 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.

Code

Status

Date Shipped

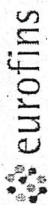
Via

Tracking #

# of Coolers

Prepared By





Eaton Analytical

# INTERNAL CHAIN OF CUSTODY RECORD

IEEA Folder Number:

SAMPLE TEMP RECEIVED:

IR Gun ID = 570A (Observation = 23.3 °C) (Corr. Factor -1 °C) (Final = 22.3 °C)

SAMPLES REC'D DAY OF COLLECTION? ☐

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: <u>MAN</u>	PRINT NAME <u>MAN</u>	COMPANY/TITLE <u>Eurofins Eaton Analytical</u>	DATE <u>3-10-17</u>	TIME <u>15:06</u>
-------------------------	-----------------------	--	---------------------	-------------------

7204 7946 2943

Nogales Unified District	Nogales High School	1001	Building A		Classrooms	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1002	Lockers A		Lockers	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1003	Restroom B		Restrooms	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1004	Building C		Classrooms	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1005	Lockers D		Lockers	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1006	Building F		Music	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1007	Rest/Locker F		Rest/Lockers	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1008	Building G		Classrooms	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1009	Building H		Classrooms	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1010	Building J		Library/Classroom	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2

Nogales Unified District	Nogales High School	1011	Building E		Gym/Cafeteria	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1012	Building K		Administration	1982	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1013	Building M		Classrooms	1990	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	1
Nogales Unified District	Nogales High School	1014	Building N		Auditorium	1986	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1015	Building Q		Classrooms	1989	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	1
Nogales Unified District	Nogales High School	1016	Building L		Indus.Arts Classroom	1982	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1017	Building P		Weight/Locker Room	1988	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	1
Nogales Unified District	Nogales High School	1018	Building R		Classrooms	1994	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	1
Nogales Unified District	Nogales High School	1019	Building S		Classrooms	1994	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	1
Nogales Unified District	Nogales High School	1020	Building B		Classrooms	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2

Nogales Unified District	Nogales High School	1021	Central Kitchen	Kitchen	1994	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	1
Nogales Unified District	Nogales High School	1022	Building D	Classrooms	1981	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	2
Nogales Unified District	Nogales High School	1023	Building H Special Ed Addition	Special Ed	2004	1900 N Apache Blvd	Nogales	85621-	Santa Cruz	1
<b>Total Containers</b>										39



Highlighted areas are where samples were collected

# NOGALES HIGH SCHOOL

## FIRE DRILL

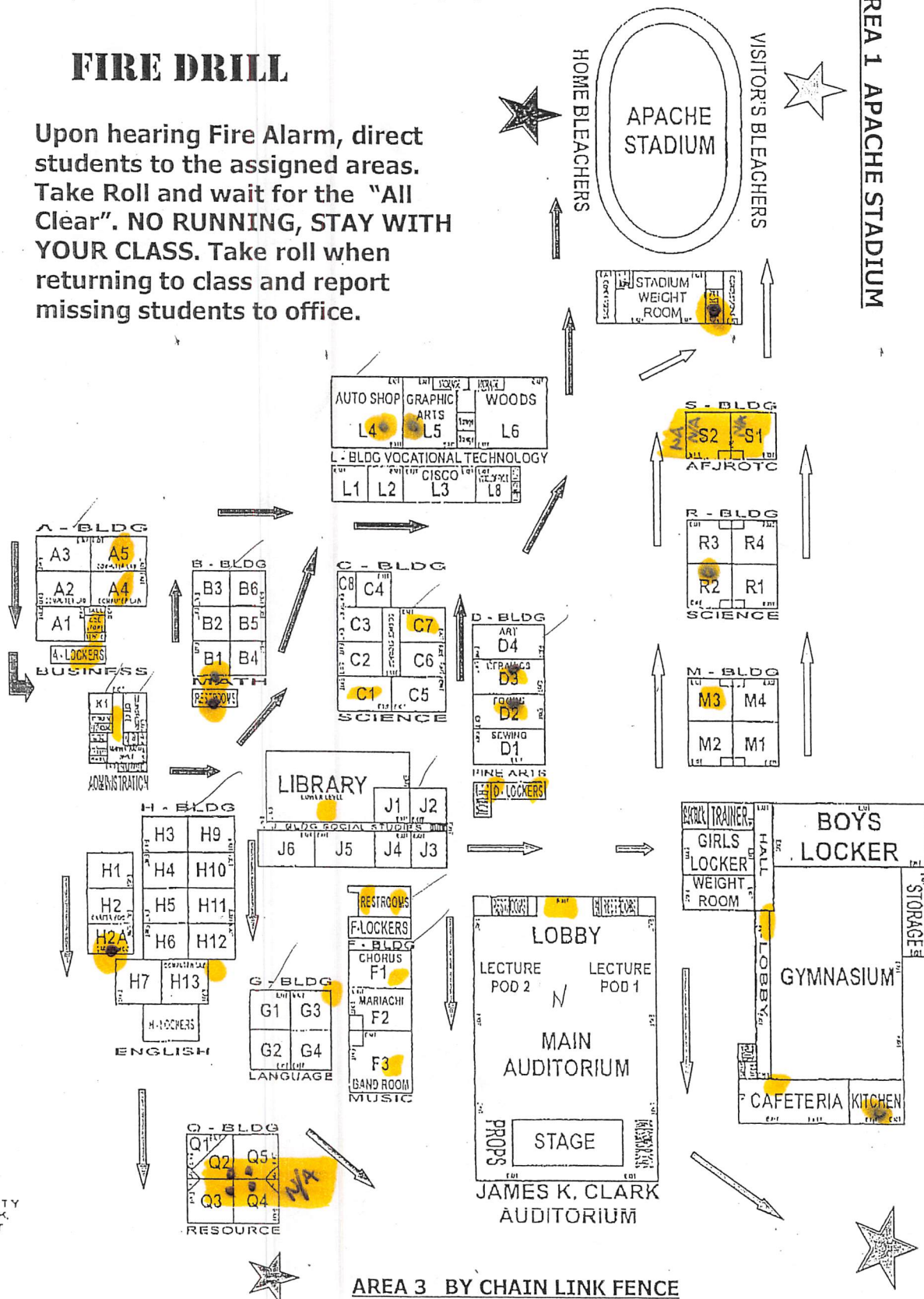
Upon hearing Fire Alarm, direct students to the assigned areas. Take Roll and wait for the "All Clear". NO RUNNING, STAY WITH YOUR CLASS. Take roll when returning to class and report missing students to office.

FIRE LANE

PLEASE KEEP CLEAR

FIRE LANE

SECURITY CHECK POINT



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**Laboratory Comments**  
**Report: 644391**

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

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Laboratory Hits  
Report: 644391

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

Samples Received on:  
03/10/2017 1506

Analyzed	Analyte	Sample ID	Result	Federal MCL	Units	MRL
03/12/2017 16:33	Lead Total ICAP/MS	<b>201703100669</b> <b><u>003808</u></b>	7.6	15	ug/L	0.5
03/12/2017 16:34	Lead Total ICAP/MS	<b>201703100670</b> <b><u>003398</u></b>	2.1	15	ug/L	0.5
03/12/2017 16:35	Lead Total ICAP/MS	<b>201703100671</b> <b><u>003432</u></b>	0.73	15	ug/L	0.5
03/12/2017 16:35	Lead Total ICAP/MS	<b>201703100672</b> <b><u>003802</u></b>	2.0	15	ug/L	0.5
03/12/2017 16:36	Lead Total ICAP/MS	<b>201703100673</b> <b><u>003810</u></b>	1.9	15	ug/L	0.5
03/15/2017 10:54	Lead Total ICAP/MS	<b>201703100674</b> <b><u>003399</u></b>	4.3	15	ug/L	0.5
03/12/2017 16:44	Lead Total ICAP/MS	<b>201703100675</b> <b><u>003414</u></b>	0.73	15	ug/L	0.5
03/12/2017 16:46	Lead Total ICAP/MS	<b>201703100677</b> <b><u>003765</u></b>	0.52	15	ug/L	0.5
03/12/2017 16:47	Lead Total ICAP/MS	<b>201703100678</b> <b><u>003767</u></b>	0.80	15	ug/L	0.5
03/12/2017 16:47	Lead Total ICAP/MS	<b>201703100679</b> <b><u>003780</u></b>	2.9	15	ug/L	0.5
03/12/2017 16:50	Lead Total ICAP/MS	<b>201703100680</b> <b><u>003784</u></b>	0.83	15	ug/L	0.5
03/12/2017 16:50	Lead Total ICAP/MS	<b>201703100681</b> <b><u>003790</u></b>	25	15	ug/L	0.5
03/12/2017 16:51	Lead Total ICAP/MS	<b>201703100682</b> <b><u>003412</u></b>	6.1	15	ug/L	0.5
03/12/2017 16:53	Lead Total ICAP/MS	<b>201703100684</b> <b><u>003756</u></b>	1.4	15	ug/L	0.5
03/12/2017 16:55	Lead Total ICAP/MS	<b>201703100685</b> <b><u>003760</u></b>	4.9	15	ug/L	0.5
		<b>201703100686</b> <b><u>003761</u></b>				

SUMMARY OF POSITIVE DATA ONLY

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Laboratory Hits  
Report: 644391

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

Samples Received on:  
03/10/2017 1506

Analyzed	Analyte	Sample ID	Result	Federal MCL	Units	MRL
03/12/2017 16:56	Lead Total ICAP/MS		24	15	ug/L	0.5
	<b>201703100687</b>	<b><u>003762</u></b>				
03/12/2017 16:57	Lead Total ICAP/MS		2.6	15	ug/L	0.5
	<b>201703100688</b>	<b><u>003763</u></b>				
03/12/2017 16:59	Lead Total ICAP/MS		0.97	15	ug/L	0.5
	<b>201703100689</b>	<b><u>003775</u></b>				
03/12/2017 17:00	Lead Total ICAP/MS		4.9	15	ug/L	0.5
	<b>201703100691</b>	<b><u>003793</u></b>				
03/12/2017 17:01	Lead Total ICAP/MS		6.2	15	ug/L	0.5
	<b>201703100693</b>	<b><u>003806</u></b>				
03/12/2017 17:03	Lead Total ICAP/MS		1.9	15	ug/L	0.5
	<b>201703100694</b>	<b><u>003816</u></b>				
03/12/2017 17:09	Lead Total ICAP/MS		0.68	15	ug/L	0.5
	<b>201703100695</b>	<b><u>003817</u></b>				
03/12/2017 17:11	Lead Total ICAP/MS		0.72	15	ug/L	0.5
	<b>201703100696</b>	<b><u>B.D.F</u></b>				
03/12/2017 17:12	Lead Total ICAP/MS		0.81	15	ug/L	0.5
	<b>201703100697</b>	<b><u>C.K.</u></b>				
03/12/2017 17:13	Lead Total ICAP/MS		0.70	15	ug/L	0.5
	<b>201703100698</b>	<b><u>D2</u></b>				
03/12/2017 17:13	Lead Total ICAP/MS		2.8	15	ug/L	0.5
	<b>201703100699</b>	<b><u>D3</u></b>				
03/12/2017 17:14	Lead Total ICAP/MS		0.77	15	ug/L	0.5
	<b>201703100701</b>	<b><u>L5</u></b>				
03/12/2017 17:16	Lead Total ICAP/MS		1.1	15	ug/L	0.5
	<b>201703100702</b>	<b><u>P</u></b>				
03/12/2017 17:18	Lead Total ICAP/MS		2.0	15	ug/L	0.5
	<b>201703100704</b>	<b><u>BB</u></b>				
03/12/2017 17:20	Lead Total ICAP/MS		2.2	15	ug/L	0.5
	<b>201703100705</b>	<b><u>L4</u></b>				
03/12/2017 16:42	Lead Total ICAP/MS		1.9	15	ug/L	0.5

SUMMARY OF POSITIVE DATA ONLY



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Laboratory Data  
Report: 644391

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

Samples Received on:  
03/10/2017 1506

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
<b>003808 (201703100669)</b>						<b>Sampled on 03/08/2017 0533</b>			
Sample Type: Hose Bib Nootjersorse Facility ID: G Sample Point ID: G Building Outside									
<b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:33	977520	977575	(EPA 200.8)	Lead Total ICAP/MS	7.6	ug/L	0.5	1
<b>003398 (201703100670)</b>						<b>Sampled on 03/08/2017 0515</b>			
Sample Type: Drinking Fountain Facility ID: J Sample Point ID: Library Lobby									
<b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:34	977520	977575	(EPA 200.8)	Lead Total ICAP/MS	2.1	ug/L	0.5	1
<b>003432 (201703100671)</b>						<b>Sampled on 03/08/2017 0512</b>			
Sample Type: Drinking Fountain Facility ID: N - Auditorium Sample Point ID: Entrance Hallway									
<b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:35	977520	977575	(EPA 200.8)	Lead Total ICAP/MS	0.73	ug/L	0.5	1
<b>003802 (201703100672)</b>						<b>Sampled on 03/08/2017 0510</b>			
Sample Type: Drinking Fountain Facility ID: E GYM Sample Point ID: GYM Hallway									
<b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:35	977520	977575	(EPA 200.8)	Lead Total ICAP/MS	2.0	ug/L	0.5	1
<b>003810 (201703100673)</b>						<b>Sampled on 03/08/2017 0515</b>			
Sample Type: Drinking Fountain Facility ID: J Building Sample Point ID: Library Lobby									
<b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:36	977520	977575	(EPA 200.8)	Lead Total ICAP/MS	1.9	ug/L	0.5	1
<b>003399 (201703100674)</b>						<b>Sampled on 03/08/2017 0533</b>			
Sample Type: Hose Bib/(no other Service) Facility ID: G-2 Sample Point ID: G Building Outside									
<b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/15/17 10:54	977520	977695	(EPA 200.8)	Lead Total ICAP/MS	4.3	ug/L	0.5	1
<b>003414 (201703100675)</b>						<b>Sampled on 03/08/2017 0520</b>			
Sample Type: Drinking Fountain Facility ID: Administration K-2 Sample Point ID: Administration Hallway									
<b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:44	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	0.73	ug/L	0.5	1
<b>003430 (201703100676)</b>						<b>Sampled on 03/08/2017 0526</b>			

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

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Laboratory Data  
Report: 644391

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

Samples Received on:  
03/10/2017 1506

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
Sample Type: Drinking Fountain Facility ID: Building H-2 Sample Point ID: H Building Outside <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:45	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b><u>003765 (201703100677)</u></b>						<b>Sampled on 03/08/2017 0526</b>			
Sample Type: Drinking Fountain Facility ID: H-1 Sample Point ID: H Building Outside <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:46	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	0.52	ug/L	0.5	1
<b><u>003767 (201703100678)</u></b>						<b>Sampled on 03/08/2017 0512</b>			
Sample Type: Drinking Fountain Facility ID: Auditorium N-2 Sample Point ID: Auditorium (Hallway Entrance) <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:47	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	0.80	ug/L	0.5	1
<b><u>003780 (201703100679)</u></b>						<b>Sampled on 03/08/2017 0508</b>			
Sample Type: Drinking Fountain Facility ID: Cafeteria E Sample Point ID: Cafeteria Entrance <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:47	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	2.9	ug/L	0.5	1
<b><u>003784 (201703100680)</u></b>						<b>Sampled on 03/08/2017 0520</b>			
Sample Type: Drinking Fountain Facility ID: Administration K-1 Sample Point ID: Administration Hallway <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:50	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	0.83	ug/L	0.5	1
<b><u>003790 (201703100681)</u></b>						<b>Sampled on 03/08/2017 0539</b>			
Sample Type: Sinl (no other service) Facility ID: M Sample Point ID: M Building Inside <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:50	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	25	ug/L	0.5	1
<b><u>003412 (201703100682)</u></b>						<b>Sampled on 03/08/2017 0540</b>			
Sample Type: Sink Facility ID: B Sample Point ID: Boys Restroom <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 16:51	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	6.1	ug/L	0.5	1
<b><u>003433 (201703100683)</u></b>						<b>Sampled on 03/08/2017 0510</b>			

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Laboratory Data  
Report: 644391

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

Samples Received on:  
03/10/2017 1506

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
Sample Type: Water Fountain/Drinking Facility ID: D Sample Point ID: Not Provided EPA 200.8 - ICPMS Metals									
03/11/17	03/12/17 16:52	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
003756 (201703100684)						Sampled on 03/08/2017 0547			
Sample Type: Custodial Room Facility ID: A Sample Point ID: Not Provided EPA 200.8 - ICPMS Metals									
03/11/17	03/12/17 16:53	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	1.4	ug/L	0.5	1
003760 (201703100685)						Sampled on 03/08/2017 0535			
Sample Type: Sink Facility ID: C Sample Point ID: C-7 EPA 200.8 - ICPMS Metals									
03/11/17	03/12/17 16:55	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	4.9	ug/L	0.5	1
003761 (201703100686)						Sampled on 03/08/2017 0530			
Sample Type: Sink Facility ID: C Sample Point ID: C-1 EPA 200.8 - ICPMS Metals									
03/11/17	03/12/17 16:56	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	24	ug/L	0.5	1
003762 (201703100687)						Sampled on 03/08/2017 0505			
Sample Type: Restroom Sink Facility ID: F Sample Point ID: Not Provided EPA 200.8 - ICPMS Metals									
03/11/17	03/12/17 16:57	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	2.6	ug/L	0.5	1
003763 (201703100688)						Sampled on 03/08/2017 0542			
Sample Type: Sink Facility ID: B Sample Point ID: Girls Restroom EPA 200.8 - ICPMS Metals									
03/11/17	03/12/17 16:59	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	0.97	ug/L	0.5	1
003775 (201703100689)						Sampled on 03/08/2017 0600			
Sample Type: Sink Facility ID: A-5 Sample Point ID: A-5 EPA 200.8 - ICPMS Metals									
03/11/17	03/12/17 17:00	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	4.9	ug/L	0.5	1
003781 (201703100690)						Sampled on 03/08/2017 0507			

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Laboratory Data  
Report: 644391

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

Samples Received on:  
03/10/2017 1506

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
Sample Type: Custorial Room Facility ID: F Sample Point ID: Not Provided <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:01	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b><u>003793 (201703100691)</u></b>						<b>Sampled on 03/08/2017 0555</b>			
Sample Type: Sink Facility ID: A-4 Sample Point ID: A-4 <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:01	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	6.2	ug/L	0.5	1
<b><u>003803 (201703100692)</u></b>						<b>Sampled on 03/08/2017 0515</b>			
Sample Type: Custodial Room Facility ID: D Sample Point ID: Not Provided <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:02	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b><u>003806 (201703100693)</u></b>						<b>Sampled on 03/08/2017 0545</b>			
Sample Type: Custodial Room Facility ID: A Sample Point ID: Not Provided <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:03	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	1.9	ug/L	0.5	1
<b><u>003816 (201703100694)</u></b>						<b>Sampled on 03/08/2017 0503</b>			
Sample Type: Drinking Fountain Facility ID: F Sample Point ID: F-1 <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:09	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	0.68	ug/L	0.5	1
<b><u>003817 (201703100695)</u></b>						<b>Sampled on 03/08/2017 0500</b>			
Sample Type: Drinking Fountain Facility ID: F Sample Point ID: F-3 <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:11	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	0.72	ug/L	0.5	1
<b><u>B.D.F (201703100696)</u></b>						<b>Sampled on 03/08/2017 0549</b>			
Sample Type: Drinking Fountain Facility ID: B Sample Point ID: Outside Building B <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:12	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	0.81	ug/L	0.5	1
<b><u>C.K. (201703100697)</u></b>						<b>Sampled on 03/08/2017 0500</b>			



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Laboratory Data  
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1110 West Washington Street  
Phoenix, AZ 85007

Samples Received on:  
03/10/2017 1506

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
Sample Type: Kitchen Sink Facility ID: Central Kitchen Sample Point ID: Kitchen <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:13	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	0.70	ug/L	0.5	1
<b><u>D2 (201703100698)</u></b>						<b>Sampled on 03/08/2017 0506</b>			
Sample Type: North Kitchen Sink Facility ID: D Sample Point ID: D2 <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:13	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	2.8	ug/L	0.5	1
<b><u>D3 (201703100699)</u></b>						<b>Sampled on 03/08/2017 0512</b>			
Sample Type: North Faucet Facility ID: D Sample Point ID: D3 <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:14	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	0.77	ug/L	0.5	1
<b><u>H2 (201703100700)</u></b>						<b>Sampled on 03/08/2017 0503</b>			
Sample Type: Room #2 Facility ID: H. Special Ed Sample Point ID: Kitchen Sink <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:15	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b><u>L5 (201703100701)</u></b>						<b>Sampled on 03/08/2017 0558</b>			
Sample Type: Drinking Fountain East Facility ID: L Sample Point ID: Room L5 <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:16	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	1.1	ug/L	0.5	1
<b><u>P (201703100702)</u></b>						<b>Sampled on 03/08/2017 0527</b>			
Sample Type: Drinking Fountain Facility ID: P Sample Point ID: P <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:18	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	2.0	ug/L	0.5	1
<b><u>R2 (201703100703)</u></b>						<b>Sampled on 03/08/2017 0519</b>			
Sample Type: NE Sink Facility ID: R Sample Point ID: R2 <b>EPA 200.8 - ICPMS Metals</b>									
03/11/17	03/12/17 17:19	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b><u>BB (201703100704)</u></b>						<b>Sampled on 03/08/2017 0554</b>			

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**Laboratory Data**  
**Report: 644391**

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

Samples Received on:  
03/10/2017 1506

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
<p>Sample Type: Bathroom Lavatory Facility ID: B Sample Point ID: BB</p> <p><b>EPA 200.8 - ICPMS Metals</b></p>									
03/11/17	03/12/17 17:20	977520	977577	(EPA 200.8)	Lead Total ICAP/MS	2.2	ug/L	0.5	1
<p><b><u>L4 (201703100705)</u></b></p> <p>Sample Type: Sink Facility ID: L Sample Point ID: L4</p> <p><b>EPA 200.8 - ICPMS Metals</b></p>									
03/11/17	03/12/17 16:42	977520	977576	(EPA 200.8)	Lead Total ICAP/MS	1.9	ug/L	0.5	1

**Sampled on 03/08/2017 0544**

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## ICPMS Metals

**Prep Batch: 977520   Analytical Batch: 977575**

201703100669	003808
201703100670	003398
201703100671	003432
201703100672	003802
201703100673	003810

**Analysis Date: 03/12/2017**

Analyzed by: RPD  
Analyzed by: RPD  
Analyzed by: RPD  
Analyzed by: RPD  
Analyzed by: RPD

## ICPMS Metals

**Prep Batch: 977520   Analytical Batch: 977576**

201703100675	003414
201703100676	003430
201703100677	003765
201703100678	003767
201703100679	003780
201703100680	003784
201703100681	003790
201703100682	003412
201703100683	003433
201703100684	003756
201703100685	003760
201703100686	003761
201703100687	003762
201703100688	003763
201703100689	003775
201703100690	003781
201703100691	003793
201703100692	003803
201703100693	003806
201703100705	L4

**Analysis Date: 03/12/2017**[illegible]

## ICPMS Metals

**Prep Batch: 977520   Analytical Batch: 977577**

201703100694	003816
201703100695	003817
201703100696	B.D.F
201703100697	C.K.
201703100698	D2
201703100699	D3
201703100700	H2
201703100701	L5
201703100702	P
201703100703	R2
201703100704	BB

**Analysis Date: 03/12/2017**[illegible]

## ICPMS Metals

**Prep Batch: 977520   Analytical Batch: 977695**

**Analysis Date: 03/15/2017**

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201703100674

003399

Analyzed by: DTN



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QC Type	Analyte	Native	Spiked	Recovered	Units	Yield (%)	Limits (%)	RPDLimit (%)	RPD%
<b>ICPMS Metals by EPA 200.8</b>									
<b>Analytical Batch: 977575</b>					<b>Analysis Date: 03/12/2017</b>				
LCS1	Lead Total ICAP/MS		20	19.8	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			<0.5	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.484	ug/L	97	(50-150)		
MS_201703100654	Lead Total ICAP/MS	5.9	20	26.8	ug/L	105	(70-130)		
MS2_201703100664	Lead Total ICAP/MS	1.8	20	23.2	ug/L	107	(70-130)		
MSD_201703100654	Lead Total ICAP/MS	5.9	20	27.3	ug/L	107	(70-130)	20	1.9
MSD2_201703100664	Lead Total ICAP/MS	1.8	20	22.8	ug/L	105	(70-130)	20	1.3
<b>ICPMS Metals by EPA 200.8</b>									
<b>Analytical Batch: 977576</b>					<b>Analysis Date: 03/12/2017</b>				
LCS1	Lead Total ICAP/MS		20	20.0	ug/L	100	(85-115)		
LCS2	Lead Total ICAP/MS		20	19.8	ug/L	99	(85-115)	20	0.50
MBLK	Lead Total ICAP/MS			<0.5	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.493	ug/L	99	(50-150)		
MS_201703100705	Lead Total ICAP/MS	1.9	20	23.2	ug/L	106	(70-130)		
MS2_201703100684	Lead Total ICAP/MS	1.4	20	23.0	ug/L	108	(70-130)		
MSD_201703100705	Lead Total ICAP/MS	1.9	20	23.2	ug/L	106	(70-130)	20	0.0
MSD2_201703100684	Lead Total ICAP/MS	1.4	20	22.9	ug/L	107	(70-130)	20	0.44
<b>ICPMS Metals by EPA 200.8</b>									
<b>Analytical Batch: 977577</b>					<b>Analysis Date: 03/12/2017</b>				
LCS1	Lead Total ICAP/MS		20	19.7	ug/L	98	(85-115)		
LCS2	Lead Total ICAP/MS		20	19.8	ug/L	99	(85-115)	20	0.51
MBLK	Lead Total ICAP/MS			<0.5	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.496	ug/L	99	(50-150)		
MS_201703100694	Lead Total ICAP/MS	0.68	20	22.2	ug/L	107	(70-130)		
MS2_201703100704	Lead Total ICAP/MS	2.2	20	23.2	ug/L	105	(70-130)		
MSD_201703100694	Lead Total ICAP/MS	0.68	20	21.9	ug/L	106	(70-130)	20	1.4
MSD2_201703100704	Lead Total ICAP/MS	2.2	20	23.5	ug/L	106	(70-130)	20	1.3
<b>ICPMS Metals by EPA 200.8</b>									
<b>Analytical Batch: 977695</b>					<b>Analysis Date: 03/15/2017</b>				
LCS1	Lead Total ICAP/MS		20	20.4	ug/L	102	(85-115)		
LCS2	Lead Total ICAP/MS		20	20.6	ug/L	103	(85-115)	20	0.98
MBLK	Lead Total ICAP/MS			<0.5	ug/L				

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.

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QC Type	Analyte	Native	Spiked	Recovered	Units	Yield (%)	Limits (%)	RPDLimit (%)	RPD%
MRL_CHK	Lead Total ICAP/MS		0.5	0.509	ug/L	102	(50-150)		
MS_201703080582	Lead Total ICAP/MS	0.58	20	20.9	ug/L	101	(70-130)		
MS2_201703091167	Lead Total ICAP/MS	ND	20	20.5	ug/L	102	(70-130)		
MSD_201703080582	Lead Total ICAP/MS	0.58	20	20.9	ug/L	102	(70-130)	20	0.0
MSD2_201703091167	Lead Total ICAP/MS	ND	20	20.5	ug/L	103	(70-130)	20	0.0

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.