

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  
05/12/2017



Eurofins Eaton  
Analytical

TDF: Thomas.D.French  
Project Manager

Report:658490  
Project:BISBEE-UD  
ADHS License #:AZ0778  
Group:Bisbee 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
Arizona	AZ0778	Montana	Cert 0035
Arkansas	Certified	Nebraska	Certified
California-Monrovia-ELAP	2813	Nevada	CA00006-2016
California-Colton- ELAP	2812	New Hampshire *	2959
California-Folsom- ELAP	2820	New Jersey *	CA 008
California-Fresno- ELAP	2966	New Mexico	Certified
Colorado	Certified	New York *	11320
Connecticut	PH-0107	North Carolina	06701
Delaware	CA 006	North Dakota	R-009
Florida *	E871024	Oregon (Primary AB) *	ORELAP 4034
Georgia	947	Pennsylvania *	68-565
Guam	16-003r	Puerto Rico	Certified
Hawaii	Certified	Rhode Island	LAO00326
Idaho	Certified	South Carolina	87016
Illinois *	200033	South Dakota	Certified
Indiana	C-CA-01	Tennessee	TN02839
Kansas *	E-10268	Texas *	T104704230-15-9
Kentucky	90107	Utah *	CA000062016-10
Louisiana *	LA16003	Vermont	VT0114
Maine	CA0006	Virginia *	460260
Maryland	224	Washington	C838
Commonwealth of Northern Marianas Is.	MP0004	Wyoming	Certified
Massachusetts	M-CA006	EPA Region 5	Certified
Michigan	9906	Los Angeles County Sanitation Districts	10264

\* NELAP/TNI Recognized Accreditation Bodies

ISO 17025 Accredited Method List

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

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

SPECIFIC TESTS	METHOD OR TECHNIQUE USED	Environmental (Drinking Water)	Environmental (Waste Water)	Water as a Component of Food and Bev/Bev/ Bottled Water
1,4-Dioxane	EPA 522	x		x
2,3,7,8-TCDD	Modified EPA 1613B	x		x
Acrylamide	In House Method (2440)	x		x
Alkalinity	SM 2320B	x	x	x
Ammonia	EPA 350.1		x	x
Ammonia	SM 4500-NH3 H		x	x
Anions and DBPs by IC	EPA 300.0	x	x	x
Anions and DBPs by IC	EPA 300.1	x		x
Asbestos	EPA 100.2	x	x	
Bicarbonate Alkalinity as HCO <sub>3</sub>	SM 2320B	x	x	x
BOD / CBOD	SM 5210B		x	x
Bromate	In House Method (2447)	x		x
Carbamates	EPA 531.2	x		x
Carbonate as CO <sub>3</sub>	SM 2330B	x	x	x
Carbonyls	EPA 556	x		x
COD	EPA 410.4 / SM 5220D		x	
Chloramines	SM 4500-CL G	x	x	x
Chlorinated Acids	EPA 515.4	x		x
Chlorinated Acids	EPA 555	x		x
Chlorine Dioxide	SM 4500-CLO <sub>2</sub> 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-SiO <sub>2</sub> C	x	x	
Sulfide	SM 4500-S <sup>-</sup> D		x	
Sulfite	SM 4500-SO <sub>3</sub> 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 #: 658490  
Project: BISBEE-UD  
Sample Group: Bisbee High School

Project Manager: Thomas.D.French  
Phone: (480) 778-1558  
PO #: ADEQ16-116686:3  
Sampler: Mica Siea/W. R. Hodges

The following samples were received from you on **May 08, 2017** at **1342**. 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>201705080250</u>	1001 A	05/03/2017 0611
	Sample Type: Water Faucet Facility ID: 1st Wing Sample Point ID: Hall	
	@ICPMS	Freight - Outbound
		Freight - Return
<u>201705080251</u>	1001 B	05/03/2017 0617
	Sample Type: Drinking Fountain Facility ID: Cafeteria Sample Point ID: Front of Dinning Hall	
	@ICPMS	
<u>201705080252</u>	1002 A	05/03/2017 0615
	Sample Type: Drinking Fountain #1 Facility ID: 2nd Wing Sample Point ID: Front of Wing	
	@ICPMS	
<u>201705080253</u>	1002 B	05/03/2017 0615
	Sample Type: Drinking Fountain #2 Facility ID: 2nd Wing Sample Point ID: Front of Wing	
	@ICPMS	
<u>201705080254</u>	1004 A	05/03/2017 0635
	Sample Type: Front of Gym Drinking Fountain Facility ID: Gymnasium Sample Point ID: Front of Gym	
	@ICPMS	
<u>201705080255</u>	1004 B	05/03/2017 0635
	Sample Type: Drinking Fountain by Boys Locker room Facility ID: Gymnasium Sample Point ID: by Boy's Locker Rm in Court Ar	
	@ICPMS	
<u>201705080256</u>	1004 C	05/03/2017 0706
	Sample Type: Water Hose Facility ID: Gym Ice Room Sample Point ID: Ice Room	
	@ICPMS	
<u>201705080257</u>	1005 A	05/03/2017 0640

## 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 #: 658490  
 Project: BISBEE-UD  
 Sample Group: Bisbee High School

Project Manager: Thomas.D.French  
 Phone: (480) 778-1558  
 PO #: ADEQ16-116686:3  
 Sampler: Mica Siea/W. R. Hodges

The following samples were received from you on **May 08, 2017** at **1342**. 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
	Sample Type: Drinking Fountain Facility ID: Wight Room Sample Point ID: Middle of Wall by Cage @ICPMS	
<u>201705080258</u>	1005 B	05/03/2017 0640
	Sample Type: Drinking Fountain Facility ID: Wight Room Sample Point ID: Middle of Wall by Cage @ICPMS	
<u>201705080259</u>	1005 C	05/03/2017 0636
	Sample Type: Drink Fountain Facility ID: Small Gym Sample Point ID: Back of Building @ICPMS	
<u>201705080260</u>	1005 D	05/03/2017 0634
	Sample Type: Drinking Fountain Facility ID: Small Gym Sample Point ID: Front Entrance @ICPMS	
<u>201705080261</u>	1007	05/03/2017 0632
	Sample Type: Water Fountain/Drinking Fountain Facility ID: Auditorium Sample Point ID: Front of Building @ICPMS	
<u>201705080262</u>	1008	05/03/2017 0620
	Sample Type: Drinking Fountain Facility ID: Administration Sample Point ID: End of Hall by Athletic Dir Of @ICPMS	
<u>201705080263</u>	1010 A	05/03/2017 0733
	Sample Type: Drinking Fountain Facility ID: Shop Building Sample Point ID: Shop Building Old Decal @ICPMS	
<u>201705080264</u>	1010 B	05/03/2017 0735
	Sample Type: Drinking Fountain Facility ID: Shop Building Sample Point ID: Shop Building Old Decal	

## 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 #: 658490  
Project: BISBEE-UD  
Sample Group: Bisbee High School

Project Manager: Thomas.D.French  
Phone: (480) 778-1558  
PO #: ADEQ16-116686:3  
Sampler: Mica Siea/W. R. Hodges

The following samples were received from you on **May 08, 2017** at **1342**. 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
	@ICPMS	
201705080265	1015	05/03/2017 0615
	Sample Type: Tap Facility ID: Bus Barn Shop Sample Point ID: Shop	
	@ICPMS	
201705080266	1016	05/03/2017 0615
	Sample Type: Tap Facility ID: Bus Barn Office Sample Point ID: Female Restroom	
	@ICPMS	
201705080267	1017	05/03/2017 0920
	Sample Type: Tap Facility ID: Concession Stand Sample Point ID: In Concession Stand	
	@ICPMS	
201705080268	WBP Restroom (1018)	05/03/2017 0935
	Sample Type: Fountain Facility ID: Stadium Sample Point ID: Restrooms	
	@ICPMS	
201705080269	Tennis Courts (1019)	05/03/2017 0928
	Sample Type: Tap Facility ID: Restrooms Sample Point ID: Restrooms	
	@ICPMS	
201705080270	Track	05/03/2017 0905
	Sample Type: Not Provided Facility ID: Not Provided Sample Point ID: Not Provided	
	@ICPMS	

## Test Description

@ICPMS -- ICPMS Metals

658490

## 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	Bisbee unified School District #2
School Name	Bisbee high school
Building (name/number)	1st wing
Type of Fixture (tap, drinking fountain etc.)	water fountain
Location of Fixture (example, room number)	Hall
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1001
Date of Collection	05-03-17
Time of Collection	0611
Printed Name of Sample Collector	Mica Siria
Signature Sample Collector	Mica Siria

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	MAV 5-8-17 1342
Signature	5-8-17 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	<u>Cafeteria Bisbee Unified School District</u>
School Name	<u>Bisbee UD</u>
Building (name/number)	<u>Cafeteria</u>
Type of Fixture (tap, drinking fountain etc.)	<u>drinking fountain</u>
Location of Fixture (example, room number)	<u>front of dining hall</u>
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	<u>1001</u>
Date of Collection	<u>05-03-17</u>
Time of Collection	<u>0617</u>
Printed Name of Sample Collector	<u>Mica Siria</u>
Signature Sample Collector	<u>Mica Siria</u>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	<u>5-8-17 13:42</u>
Signature	<u>MKV</u>
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	Bisbee unified school district #2
School Name	Bisbee high school
Building (name/number)	2nd wing
Type of Fixture (tap, drinking fountain etc.)	drinking fountain #1
Location of Fixture (example, room number)	front of wing
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1002
Date of Collection	05-03-17
Time of Collection	0615
Printed Name of Sample Collector	Mica Sierra
Signature Sample Collector	Mica Sierra

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
Signature	MAP
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	Bisbee unified school district #2
School Name	Bisbee High School
Building (name/number)	2nd wing
Type of Fixture (tap, drinking fountain etc.)	drinking fountain #2
Location of Fixture (example, room number)	front of wing
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1002
Date of Collection	05-03-07
Time of Collection	0615
Printed Name of Sample Collector	Mica Sibila
Signature Sample Collector	Mica Sibila

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-07 13:42
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	<u>Roosevelt Unified School District #2</u>
School Name	<u>Roosevelt High School</u>
Building (name/number)	<u>Gymnasium</u>
Type of Fixture (tap, drinking fountain etc.)	<u>Front of Gym drinking fountain</u>
Location of Fixture (example, room number)	<u>Front of Gym</u>
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	<u>1004</u>
Date of Collection	<u>05-03-17</u>
Time of Collection	<u>06:35</u>
Printed Name of Sample Collector	<u>Mico Silva</u>
Signature Sample Collector	<u>Mico Silva</u>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	<u>5-8-17 13:47</u>
Signature	<u>MB</u>
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	Bisbee unified school district #2
School Name	Bisbee High School
Building (name/number)	Gymnasium
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain by boys locker room
Location of Fixture (example, room number)	by boys locker room in court area
Sample Identification Number ( <b>Write this number on the sample container and on this sheet</b> )	1044
Date of Collection	05-03-17
Time of Collection	After school 0635
Printed Name of Sample Collector	Maria Sierra
Signature Sample Collector	Maria Sierra

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
Signature	MPV
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	Bisbee un. Fed school district #2
School Name	Bisbee High School
Building (name/number)	Gym ICE Room
Type of Fixture (tap, drinking fountain etc.)	water hose
Location of Fixture (example, room number)	ICE Room
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1004
Date of Collection	05-03-17
Time of Collection	0706
Printed Name of Sample Collector	Mica Silva
Signature Sample Collector	Mica Silva

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:47
Signature	MV
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	Bisbee unified school district
School Name	bisbee unified high school
Building (name/number)	weight room
Type of Fixture (tap, drinking fountain etc.)	drinking fountain
Location of Fixture (example, room number)	middle of wall by cage
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1005
Date of Collection	05-08-17
Time of Collection	0640
Printed Name of Sample Collector	Mica Garcia
Signature Sample Collector	Mica Garcia

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
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	Bisbee unified school district
School Name	bisbee High School
Building (name/number)	Weight room
Type of Fixture (tap, drinking fountain etc.)	drinking fountain
Location of Fixture (example, room number)	Middle of wall by cage
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1005
Date of Collection	05.03.13
Time of Collection	0640
Printed Name of Sample Collector	M. E. Silva
Signature Sample Collector	<i>M. E. Silva</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-13 13:42
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	Bisbee unified school district #2
School Name	Bisbee High School
Building (name/number)	Small gym
Type of Fixture (tap, drinking fountain etc.)	drinking fountain
Location of Fixture (example, room number)	Back of building
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1005
Date of Collection	05-03-17
Time of Collection	0636
Printed Name of Sample Collector	Mica Sierra
Signature Sample Collector	Mica Sierra

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
Signature	MBV
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	Bisbee unified school district #1
School Name	Small gym Bisbee high school
Building (name/number)	Small gym
Type of Fixture (tap, drinking fountain etc.)	drinking fountain
Location of Fixture (example, room number)	front entrance
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1005
Date of Collection	05-03-12
Time of Collection	0634
Printed Name of Sample Collector	Mina Soria
Signature Sample Collector	Mina Soria

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-12 13:42
Signature	mm
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	Risbee unified school district #2
School Name	Risbee High School
Building (name/number)	Auditorium
Type of Fixture (tap, drinking fountain etc.)	water fountain / drinking fountain
Location of Fixture (example, room number)	Front of building
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1017
Date of Collection	05-03-17
Time of Collection	0630
Printed Name of Sample Collector	Mica Soria
Signature Sample Collector	Mica Soria

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
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	Bisbee unified school district #2
School Name	Bisbee High School
Building (name/number)	Administration
Type of Fixture (tap, drinking fountain etc.)	drinking fountain
Location of Fixture (example, room number)	End of hall by Athletic directors office
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1008
Date of Collection	05-03-17
Time of Collection	0620
Printed Name of Sample Collector	Maria Silva
Signature Sample Collector	Maria Silva

Notes Sample collector: The sample is low because the fountain spraid every where.

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:47
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	Roosevelt Unified School District #2
School Name	Risbee High &
Building (name/number)	shop building
Type of Fixture (tap, drinking fountain etc.)	drinking fountain
Location of Fixture (example, room number)	Shop building old Decal
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1010
Date of Collection	05-03-17
Time of Collection	0733
Printed Name of Sample Collector	Mica Silva
Signature Sample Collector	Mica Silva

Notes Sample collector:

Rec'd 2 samples same ID different sampling time 7:33 & 7:35.

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
Signature	MAN
Notes:	

For relinquishing samples upon delivery to labs only

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

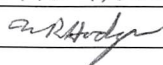
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log

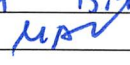
*for experienced sample collectors*

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	BISBEE UNIFIED
School Name	BISBEE HIGH SCHOOL
Building (name/number)	BUS BARN SHOP
Type of Fixture (tap, drinking fountain etc.)	TAP
Location of Fixture (example, room number)	SHOP
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1015
Date of Collection	5/3/17
Time of Collection	6:15 AM
Printed Name of Sample Collector	W. R. HODGES
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

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

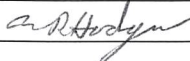
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## 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	BISBEE UNIFIED
School Name	BISBEE HIGH SCHOOL
Building (name/number)	BUS BARN OFFICE
Type of Fixture (tap, drinking fountain etc.)	TAP
Location of Fixture (example, room number)	FEMALE REST ROOM
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1016
Date of Collection	5/3/17
Time of Collection	6:15 AM
Printed Name of Sample Collector	W. R. HODGES
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
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	BISBEE UNIFIED
School Name	WARREN BALL PARK
Building (name/number)	CONCESSION STAND
Type of Fixture (tap, drinking fountain etc.)	TAP
Location of Fixture (example, room number)	IN CONCESSION STAND
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1017
Date of Collection	5/3/17
Time of Collection	9:20 AM
Printed Name of Sample Collector	W.R. HODGES
Signature Sample Collector	<i>WR Hodges</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
Signature	<i>mu</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	Bisbee-UD
School Name	
Building (name/number)	
Type of Fixture (tap, drinking fountain etc.)	
Location of Fixture (example, room number)	
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	WBP Restroom
Date of Collection	5-3-17
Time of Collection	9:35
Printed Name of Sample Collector	
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
Signature	M. B.
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	
School Name	
Building (name/number)	
Type of Fixture (tap, drinking fountain etc.)	
Location of Fixture (example, room number)	
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	Tennis Courts
Date of Collection	5-3-17
Time of Collection	9:28
Printed Name of Sample Collector	
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
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	
School Name	
Building (name/number)	
Type of Fixture (tap, drinking fountain etc.)	
Location of Fixture (example, room number)	
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	Track
Date of Collection	5-3-17
Time of Collection	9:05
Printed Name of Sample Collector	
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:47
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	BISBEE UNIFIED
School Name	WARREN BALL PARK
Building (name/number)	STADIUM
Type of Fixture (tap, drinking fountain etc.)	FOUNTAIN
Location of Fixture (example, room number)	REST ROOMS
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1018
Date of Collection	5/3/17
Time of Collection	9:20 AM
Printed Name of Sample Collector	W. R. HODGIES
Signature Sample Collector	<i>WRHodgies</i>

Notes Sample collector:

Not rec'd

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:42
Signature	<i>MAV</i>
Notes:	

For relinquishing samples upon delivery to labs only

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

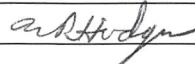
*These samples were collected for lead screening purposes only and cannot be used for compliance.*

## Collection Log

*for experienced sample collectors*

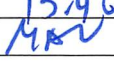
Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

☒ 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	BISBEE UNIFIED
School Name	WARREN TENNIS COURTS
Building (name/number)	REST ROOMS
Type of Fixture (tap, drinking fountain etc.)	TAP
Location of Fixture (example, room number)	REST ROOM
Sample Identification Number ( <b><u>Write this number on the sample container and on this sheet</u></b> )	1019
Date of Collection	5/3/17
Time of Collection	09:30
Printed Name of Sample Collector	W. R. HODGES
Signature Sample Collector	

Notes Sample collector:

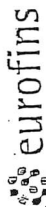
NOT rec'd

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	5-8-17 13:46
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

# INTERNAL CHAIN OF CUSTODY RECORD

EEA Folder Number: 658490

SAMPLE TEMP RECEIVED:

IR Gun ID = 5700 (Observation = 20.8 °C) (Corr. Factor = 0.1 °C) (Final = 20.7 °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:                     

TRK# **7204 7946 6170**

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 = <u>          </u> °C) (Corr. Factor = <u>          </u> °C) (Final = <u>          </u> °C)	2 = (Observation = <u>          </u> °C) (Corr. Factor = <u>          </u> °C) (Final = <u>          </u> °C)
3 = (Observation = <u>          </u> °C) (Corr. Factor = <u>          </u> °C) (Final = <u>          </u> °C)	4 = (Observation = <u>          </u> °C) (Corr. Factor = <u>          </u> °C) (Final = <u>          </u> °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>[Signature]</u>	PRINT NAME: <u>F/BE L (40172)</u>	COMPANY/TITLE: <u>Eurofins Eaton Analytical</u>	DATE: <u>5-8-17</u>	TIME: <u>13:42</u>
---------------------------------	-----------------------------------	---	---------------------	--------------------

Bisbee Unified District	Bisbee High School	X	1001	WING ONE	CLASSROOMS, CAFETERIA	1959	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	X	1002	WING TWO	CLASSROOMS, LIBRARY	1959	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	X	1003	<del>WING THREE</del>	CLASSROOMS	1959	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	X	1004	GYMNASIUM	ATHLETICS, CLASSROOMS	1959	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	X	1005	SMALL GYM, WEIGHT ROOM	ATHLETICS, CLASSROOMS	1975	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School		1006	<del>MUSIC BUILDING</del> JA	CLASSROOM	1959	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School		1007	AUDITORIUM	ASSEMBLIES, ETC.	1959	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School		1008	ADMINISTRATION BUILDING	ADMINISTRATION	1959	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School		1009	<del>MUSIC BUILDING</del> JA SOUTH	CLASSROOM	1970	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School		1010	SHOPS BUILDING	CLASSROOMS, ATHLETICS	1959	519 Melody Ln	Bisbee	85603-0028	Cochise	2

Bisbee Unified District	Bisbee High School	1011	TR <sup>AD</sup> ACK/FIELD HOUSE	STORAGE	1994	519 Melody Ln	Bisbee	85603-0028	Cochise	1
Bisbee Unified District	Bisbee High School	1012	N/A STORAGE BUILDING 1	STORAGE	1980	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	1013	N/A STORAGE BUILDING 2	STORAGE	1967	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	1014	N/A STORAGE BUILDING 3	STORAGE	1967	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	1015	✓ BUS BARN	BUS GARAGE	1975	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	1016	✓ BUS GARAGE/OFFICE	BUS ADMINISTRATION	1976	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	1017	✓ WARREN BALLPARK, SNACK BAR	CONCESSIONS	1974	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	1018	✓ WARREN BALLPARK, STADIUM	LOCKER SHOWER FACILITY	1904	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Bisbee Unified District	Bisbee High School	1019	✓ WARREN TENNIS COURTS	TENNIS STORAGE	1960	519 Melody Ln	Bisbee	85603-0028	Cochise	2
Total Containers										35

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

**Laboratory Comments**

**Report:** 658490  
**Project:** BISBEE-UD  
**Group:** Bisbee High School

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

---

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

**Report:** 658490  
**Project:** BISBEE-UD  
**Group:** Bisbee High School

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

Samples Received on:  
05/08/2017 1342

Analyzed	Analyte	Sample ID	Result	Federal MCL	Units	MRL
05/11/2017 15:23	Lead Total ICAP/MS	<b><u>201705080251</u></b> <b><u>1001 B</u></b>	2.0	15	ug/L	0.5
05/11/2017 15:26	Lead Total ICAP/MS	<b><u>201705080254</u></b> <b><u>1004 A</u></b>	1.3	15	ug/L	0.5
05/11/2017 15:26	Lead Total ICAP/MS	<b><u>201705080255</u></b> <b><u>1004 B</u></b>	0.66	15	ug/L	0.5
05/11/2017 15:27	Lead Total ICAP/MS	<b><u>201705080256</u></b> <b><u>1004 C</u></b>	17	15	ug/L	0.5
05/11/2017 15:30	Lead Total ICAP/MS	<b><u>201705080259</u></b> <b><u>1005 C</u></b>	10	15	ug/L	0.5
05/11/2017 15:32	Lead Total ICAP/MS	<b><u>201705080260</u></b> <b><u>1005 D</u></b>	12	15	ug/L	0.5
05/11/2017 15:34	Lead Total ICAP/MS	<b><u>201705080261</u></b> <b><u>1007</u></b>	1.1	15	ug/L	0.5
05/11/2017 15:35	Lead Total ICAP/MS	<b><u>201705080262</u></b> <b><u>1008</u></b>	7.0	15	ug/L	0.5
05/11/2017 15:36	Lead Total ICAP/MS	<b><u>201705080263</u></b> <b><u>1010 A</u></b>	2.1	15	ug/L	0.5
05/11/2017 15:37	Lead Total ICAP/MS	<b><u>201705080264</u></b> <b><u>1010 B</u></b>	2.4	15	ug/L	0.5
05/11/2017 15:37	Lead Total ICAP/MS	<b><u>201705080265</u></b> <b><u>1015</u></b>	1.1	15	ug/L	0.5
05/11/2017 15:38	Lead Total ICAP/MS	<b><u>201705080266</u></b> <b><u>1016</u></b>	1.3	15	ug/L	0.5
05/11/2017 15:39	Lead Total ICAP/MS	<b><u>201705080267</u></b> <b><u>1017</u></b>	0.82	15	ug/L	0.5
05/11/2017 15:42	Lead Total ICAP/MS	<b><u>201705080269</u></b> <b><u>Tennis Courts (1019)</u></b>	11	15	ug/L	0.5

**SUMMARY OF POSITIVE DATA ONLY**

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

**Report:** 658490  
**Project:** BISBEE-UD  
**Group:** Bisbee High School

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

Samples Received on:  
05/08/2017 1342

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
<b>1001 A (201705080250)</b>						<b>Sampled on 05/03/2017 0611</b>			
Sample Type: Water Faucet Facility ID: 1st Wing Sample Point ID: Hall									
<b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:19	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b>1001 B (201705080251)</b>						<b>Sampled on 05/03/2017 0617</b>			
Sample Type: Drinking Fountain Facility ID: Cafeteria Sample Point ID: Front of Dinning Hall									
<b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:23	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	2.0	ug/L	0.5	1
<b>1002 A (201705080252)</b>						<b>Sampled on 05/03/2017 0615</b>			
Sample Type: Drinking Fountain #1 Facility ID: 2nd Wing Sample Point ID: Front of Wing									
<b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:24	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b>1002 B (201705080253)</b>						<b>Sampled on 05/03/2017 0615</b>			
Sample Type: Drinking Fountain #2 Facility ID: 2nd Wing Sample Point ID: Front of Wing									
<b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:25	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b>1004 A (201705080254)</b>						<b>Sampled on 05/03/2017 0635</b>			
Sample Type: Front of Gym Drinking Fountain Facility ID: Gymnasium Sample Point ID: Front of Gym									
<b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:26	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	1.3	ug/L	0.5	1
<b>1004 B (201705080255)</b>						<b>Sampled on 05/03/2017 0635</b>			
Sample Type: Drinking Fountain by Boys Locker room Facility ID: Gymnasium Sample Point ID: by Boy's Locker Rm in Court Ar									
<b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:26	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	0.66	ug/L	0.5	1
<b>1004 C (201705080256)</b>						<b>Sampled on 05/03/2017 0706</b>			
Sample Type: Water Hose Facility ID: Gym Ice Room Sample Point ID: Ice Room									
<b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:27	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	17	ug/L	0.5	1
<b>1005 A (201705080257)</b>						<b>Sampled on 05/03/2017 0640</b>			

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

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

**Report:** 658490  
**Project:** BISBEE-UD  
**Group:** Bisbee High School

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

Samples Received on:  
05/08/2017 1342

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
Sample Type: Drinking Fountain Facility ID: Wight Room Sample Point ID: Middle of Wall by Cage <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:28	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b>1005 B (201705080258)</b>						<b>Sampled on 05/03/2017 0640</b>			
Sample Type: Drinking Fountain Facility ID: Wight Room Sample Point ID: Middle of Wall by Cage <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:29	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b>1005 C (201705080259)</b>						<b>Sampled on 05/03/2017 0636</b>			
Sample Type: Drink Fountain Facility ID: Small Gym Sample Point ID: Back of Building <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:30	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	10	ug/L	0.5	1
<b>1005 D (201705080260)</b>						<b>Sampled on 05/03/2017 0634</b>			
Sample Type: Drinking Fountain Facility ID: Small Gym Sample Point ID: Front Entrance <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:32	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	12	ug/L	0.5	1
<b>1007 (201705080261)</b>						<b>Sampled on 05/03/2017 0632</b>			
Sample Type: Water Fountain/Drinking Fountain Facility ID: Auditorium Sample Point ID: Front of Building <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:34	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	1.1	ug/L	0.5	1
<b>1008 (201705080262)</b>						<b>Sampled on 05/03/2017 0620</b>			
Sample Type: Drinking Fountain Facility ID: Administration Sample Point ID: End of Hall by Athletic Dir Of <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:35	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	7.0	ug/L	0.5	1
<b>1010 A (201705080263)</b>						<b>Sampled on 05/03/2017 0733</b>			
Sample Type: Drinking Fountain Facility ID: Shop Building Sample Point ID: Shop Building Old Decal <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:36	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	2.1	ug/L	0.5	1
<b>1010 B (201705080264)</b>						<b>Sampled on 05/03/2017 0735</b>			

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

**Report:** 658490  
**Project:** BISBEE-UD  
**Group:** Bisbee High School

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

Samples Received on:  
05/08/2017 1342

Prepped	Analyzed	Prep Batch	Analytical Batch	Method	Analyte	Result	Units	MRL	Dilution
Sample Type: Drinking Fountain Facility ID: Shop Building Sample Point ID: Shop Building Old Decal <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:37	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	2.4	ug/L	0.5	1
<b><u>1015 (201705080265)</u></b>						<b>Sampled on 05/03/2017 0615</b>			
Sample Type: Tap Facility ID: Bus Barn Shop Sample Point ID: Shop <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:37	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	1.1	ug/L	0.5	1
<b><u>1016 (201705080266)</u></b>						<b>Sampled on 05/03/2017 0615</b>			
Sample Type: Tap Facility ID: Bus Barn Office Sample Point ID: Female Restroom <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:38	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	1.3	ug/L	0.5	1
<b><u>1017 (201705080267)</u></b>						<b>Sampled on 05/03/2017 0920</b>			
Sample Type: Tap Facility ID: Concession Stand Sample Point ID: In Concession Stand <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:39	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	0.82	ug/L	0.5	1
<b><u>WBP Restroom (1018) (201705080268)</u></b>						<b>Sampled on 05/03/2017 0935</b>			
Sample Type: Fountain Facility ID: Stadium Sample Point ID: Restrooms <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:41	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1
<b><u>Tennis Courts (1019) (201705080269)</u></b>						<b>Sampled on 05/03/2017 0928</b>			
Sample Type: Tap Facility ID: Restrooms Sample Point ID: Restrooms <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:42	993314	994269	(EPA 200.8)	Lead Total ICAP/MS	11	ug/L	0.5	1
<b><u>Track (201705080270)</u></b>						<b>Sampled on 05/03/2017 0905</b>			
Sample Type: Not Provided Facility ID: Not Provided Sample Point ID: Not Provided <b>EPA 200.8 - ICPMS Metals</b>									
05/09/17	05/11/17 15:46	993314	994272	(EPA 200.8)	Lead Total ICAP/MS	ND	ug/L	0.5	1

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

## Laboratory QC Summary

**Report:** 658490  
**Project:** BISBEE-UD  
**Group:** Bisbee High School

Arizona Department of Environmental Quality

---

## ICPMS Metals

**Prep Batch: 993314 Analytical Batch: 994269**

201705080250	1001 A
201705080251	1001 B
201705080252	1002 A
201705080253	1002 B
201705080254	1004 A
201705080255	1004 B
201705080256	1004 C
201705080257	1005 A
201705080258	1005 B
201705080259	1005 C
201705080260	1005 D
201705080261	1007
201705080262	1008
201705080263	1010 A
201705080264	1010 B
201705080265	1015
201705080266	1016
201705080267	1017
201705080268	WBP Restroom (1018)
201705080269	Tennis Courts (1019)

**Analysis Date: 05/11/2017**

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

## ICPMS Metals

**Prep Batch: 993314 Analytical Batch: 994272**

201705080270	Track
--------------	-------

**Analysis Date: 05/11/2017**

Analyzed by: RPD

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

**Report:** 658490  
**Project:** BISBEE-UD  
**Group:** Bisbee High School

## Arizona Department of Environmental Quality

QC Type	Analyte	Native	Spiked	Recovered	Units	Yield (%)	Limits (%)	RPDLimit (%)	RPD%
<b>ICPMS Metals by EPA 200.8</b>									
<b>Analytical Batch: 994269</b>					<b>Analysis Date: 05/11/2017</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	0.50
MBLK	Lead Total ICAP/MS			<0.25	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.509	ug/L	102	(50-150)		
MS_201705080250	Lead Total ICAP/MS	ND	20	20.9	ug/L	104	(70-130)		
MS2_201705080260	Lead Total ICAP/MS	12	20	32.9	ug/L	104	(70-130)		
MSD_201705080250	Lead Total ICAP/MS	ND	20	21.4	ug/L	107	(70-130)	20	2.4
MSD2_201705080260	Lead Total ICAP/MS	12	20	33.5	ug/L	108	(70-130)	20	1.8
<b>ICPMS Metals by EPA 200.8</b>									
<b>Analytical Batch: 994272</b>					<b>Analysis Date: 05/11/2017</b>				
LCS1	Lead Total ICAP/MS		20	20.0	ug/L	100	(85-115)		
LCS2	Lead Total ICAP/MS		20	20.2	ug/L	101	(85-115)	20	0.50
MBLK	Lead Total ICAP/MS			<0.25	ug/L				
MRL_CHK	Lead Total ICAP/MS		0.5	0.526	ug/L	105	(50-150)		
MS_201705080270	Lead Total ICAP/MS	ND	20	21.1	ug/L	106	(70-130)		
MS2_201705091235	Lead Total ICAP/MS	1.9	20	23.2	ug/L	107	(70-130)		
MSD_201705080270	Lead Total ICAP/MS	ND	20	21.2	ug/L	106	(70-130)	20	0.47
MSD2_201705091235	Lead Total ICAP/MS	1.9	20	22.9	ug/L	105	(70-130)	20	1.3

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.