



AQUATIC CONSULTING & TESTING, INC.

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Lic. No. AZ0003

LABORATORY REPORT

Client: ADEQ
Lead in Drinking Water School Proj.
1110 W. Washington Street
Phoenix, AZ 85007
Attn: David Burchard

Date Submitted: 04/04/17
Date Reported: 04/07/17

Project: Tonopah Valley HS

RESULTS

Client ID: 1001 Fountain
ACT Lab No.: BZ04530

Sample Type: Drinking Water
Sample Time: 03/28/17 05:10

| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | <1.00 | ug/L | SLM |

Client ID: 1001 Lobby
ACT Lab No.: BZ04531

Sample Type: Drinking Water
Sample Time: 03/28/17 05:12

| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | 1.15 | ug/L | SLM |

Client ID: 1002
ACT Lab No.: BZ04532

Sample Type: Drinking Water
Sample Time: 03/23/17 06:35

| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | <1.00 | ug/L | SLM |

Client ID: 1003
ACT Lab No.: BZ04533

Sample Type: Drinking Water
Sample Time: 03/22/17 04:30

| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | <1.00 | ug/L | SLM |

Client ID: 1004
ACT Lab No.: BZ04534

Sample Type: Drinking Water
Sample Time: 03/23/17 06:15

| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | <1.00 | ug/L | SLM |

RESULTS

Client ID: 1005
ACT Lab No.: BZ04535

Sample Type: Drinking Water
Sample Time: 03/21/17 06:35

| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | <1.00 | ug/L | SLM |

Client ID: 1006
ACT Lab No.: BZ04536

Sample Type: Drinking Water
Sample Time: 03/23/17 04:45

| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | <1.00 | ug/L | SLM |

Client ID: 1007
ACT Lab No.: BZ04537

Sample Type: Drinking Water
Sample Time: 03/23/17 05:20

| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | <1.00 | ug/L | SLM |

Client ID: 1008
ACT Lab No.: BZ04538

Sample Type: Drinking Water
Sample Time: 03/22/00 05:25

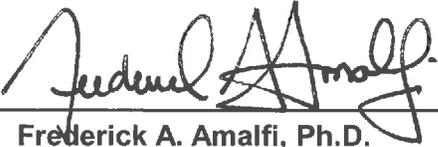
| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | <1.00 | ug/L | SLM |

Client ID: 1009
ACT Lab No.: BZ04539

Sample Type: Drinking Water
Sample Time: 03/21/17 06:15

| <u>Parameter</u> | <u>Analysis Date</u> | | <u>Method No.</u> | <u>MDL</u> | <u>Result</u> | <u>Unit</u> | <u>Analyst</u> |
|------------------|----------------------|------------|-------------------|------------|---------------|-------------|----------------|
| | <u>Start</u> | <u>End</u> | | | | | |
| Lead | 04/05/17 | 04/05/17 | 200.8 | 1.0 | <1.00 | ug/L | SLM |

Reviewed by: _____

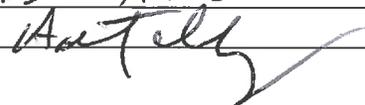

Frederick A. Amalfi, Ph.D.
Laboratory Director

Sample Collection Record

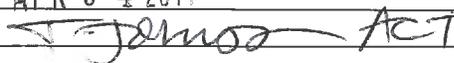
To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 300 Pool Room 300 Bldg |
| Type of Fixture (tap, drinking fountain etc.) | Drinking Fountain |
| Location of Fixture (example, room number) | pool room |
| Sample Identification Number (ensure this number is also on the sample container) | 1001 |
| Date of Collection | 3/28/17 |
| Time of Collection | 5:10 AM |
| Name of Sample Collector | Arnel Tellez |
| Signature Sample Collector |  |

Notes Sample collector:

| | |
|---|--|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 04 2017 220 |
| Signature |  ACT |
| Notes: | |
| BZ-04530 | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Sample Collection Record

To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 300 Bldg pool Room |
| Type of Fixture (tap, drinking fountain etc.) | Drinking Fountain |
| Location of Fixture (example, room number) | pool room LOBBY |
| Sample Identification Number (ensure this number is also on the sample container) | 1001 |
| Date of Collection | 3/28/17 |
| Time of Collection | 5:12 AM |
| Name of Sample Collector | ANGEL TELLEZ |
| Signature Sample Collector | <i>Angel Tellez</i> |

Notes Sample collector:

| | |
|---|-------------|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 04 2017 |
| Signature | |
| Notes: | |
| BZ-04531 | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Sample Collection Record

To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 506 CONCESSIONS |
| Type of Fixture (tap, drinking fountain etc.) | FAUCET |
| Location of Fixture (example, room number) | N/A |
| Sample Identification Number (ensure this number is also on the sample container) | 1002 |
| Date of Collection | 3/23/17 |
| Time of Collection | 6:35 AM |
| Name of Sample Collector | ANGEL TELLEZ |
| Signature Sample Collector | <i>Angel Tellez</i> |

Notes Sample collector:

| | |
|---|-------------|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 04 2017 |
| Signature | |
| <p>BZ-04532</p> | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Sample Collection Record

To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 600 BUS BARN |
| Type of Fixture (tap, drinking fountain etc.) | FACET |
| Location of Fixture (example, room number) | BREAK ROOM |
| Sample Identification Number (ensure this number is also on the sample container) | 1003 |
| Date of Collection | 3/22/17 |
| Time of Collection | 4:30 AM |
| Name of Sample Collector | ANGEL TELLEZ |
| Signature Sample Collector | <i>Angel Telly</i> |

Notes Sample collector:

| | |
|---|-------------|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 04 2017 |
| Signature | |
| Notes: | |
| BZ-04533 | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

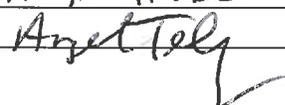
These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Sample Collection Record

To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 700 District office |
| Type of Fixture (tap, drinking fountain etc.) | Drinking Fountain |
| Location of Fixture (example, room number) | LOBBY |
| Sample Identification Number (ensure this number is also on the sample container) | 1004 |
| Date of Collection | 3/23/17 |
| Time of Collection | 6:15 AM |
| Name of Sample Collector | ANGEL TELLEZ |
| Signature Sample Collector |  |

Notes Sample collector:

| | |
|---|------------|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 4 2017 |
| Signature | |
| <p>BZ-04534</p> | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Sample Collection Record

To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 100 Gym |
| Type of Fixture (tap, drinking fountain etc.) | Drinking Fountain |
| Location of Fixture (example, room number) | 100 Gym Hallway south |
| Sample Identification Number (ensure this number is also on the sample container) | 1005 |
| Date of Collection | 6:35 AM 3/21/17 |
| Time of Collection | 6:35 AM |
| Name of Sample Collector | ANGEL TELLEZ |
| Signature Sample Collector | Angel Tellez |

Notes Sample collector:

| | |
|---|-------------|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 04 2017 |
| Signature | |
| BZ-04535 | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Sample Collection Record

To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 200 |
| Type of Fixture (tap, drinking fountain etc.) | FACET |
| Location of Fixture (example, room number) | Kitchen |
| Sample Identification Number (ensure this number is also on the sample container) | 1006 |
| Date of Collection | 3/23/17 |
| Time of Collection | 4:45 Am |
| Name of Sample Collector | Angel Teller |
| Signature Sample Collector | <i>Angel Teller</i> |

Notes Sample collector:

| | |
|---|-------------|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 04 2017 |
| Signature | |
| <p>BZ-04536</p> | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Sample Collection Record

To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 300 Bldg |
| Type of Fixture (tap, drinking fountain etc.) | OFFICE RR FAUCET |
| Location of Fixture (example, room number) | OFFICE RR |
| Sample Identification Number (ensure this number is also on the sample container) | 1007 |
| Date of Collection | 5:20 AM 3/23/17 |
| Time of Collection | 5:20 AM |
| Name of Sample Collector | Angel Tellez |
| Signature Sample Collector | <i>Angel Tellez</i> |

Notes Sample collector:

| | |
|---|------------|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 4 2017 |
| Signature | |
| Notes: | |
| BZ-04537 | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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Sample Collection Record

To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 400 |
| Type of Fixture (tap, drinking fountain etc.) | Drinking Fountain |
| Location of Fixture (example, room number) | UPSTAIR HALLWAY |
| Sample Identification Number (ensure this number is also on the sample container) | 1008 |
| Date of Collection | 3/22/17 |
| Time of Collection | 5:25 AM |
| Name of Sample Collector | Angel Telloz |
| Signature Sample Collector | <i>Angel Telloz</i> |

Notes Sample collector:

| | |
|---|-------------|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 04 2017 |
| Signature | |
| <p>BZ-04538</p> | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Sample Collection Record

To be completed by the sample collector

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 | Saddle Mountain Unified District |
| Name of School | Tonopah Valley High School |
| Building (name/number) | 200 B |
| Type of Fixture (tap, drinking fountain etc.) | Drinking Fountain |
| Location of Fixture (example, room number) | Auditorium Lobby |
| Sample Identification Number (ensure this number is also on the sample container) | 1009 |
| Date of Collection | 3/21/17 |
| Time of Collection | 6:15 AM |
| Name of Sample Collector | ANGEL TELLEZ |
| Signature Sample Collector | <i>Angel Tellez</i> |

Notes Sample collector:

| | |
|---|----------------------|
| For Lab use only | |
| Analyze this drinking water sample for lead | |
| Date and Time Lab received | APR 04 2017 @ 14:40 |
| Signature | <i>J. Jensen</i> ACT |
| Notes: | |
| BZ-04539 <i>22C</i> | |

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.