



AQUATIC CONSULTING & TESTING, INC.

1525 W. University Drive, Suite 106
P.O. Box 1510
Tempe, Arizona 85281
Phone: (480) 921-8044 • Fax: (480) 921-0049

Lic. No. AZ0003

LABORATORY REPORT

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

Date Submitted: 01/12/17
Date Reported: 02/06/17

Attn: David Burchard

Project: Fowler Elementary

RESULTS

Client ID: FES1
ACT Lab No.: BZ00370

Sample Type: Surface Water
Sample Time: 01/09/17 06:00

<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	01/19/17	01/19/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: FES2
ACT Lab No.: BZ00371

Sample Type: Surface Water
Sample Time: 01/09/17 06:01

<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	01/19/17	01/19/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: FES3
ACT Lab No.: BZ00372

Sample Type: Surface Water
Sample Time: 01/09/17 06:03

<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	01/19/17	01/19/17	200.8	0.0010	0.0012	mg/L	SLM

Client ID: FES4
ACT Lab No.: BZ00373

Sample Type: Surface Water
Sample Time: 01/09/17 06:00

<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	01/19/17	01/19/17	200.8	0.0010	0.0020	mg/L	SLM

RESULTS

Client ID: FES5
ACT Lab No.: BZ00374

Sample Type: Surface Water
Sample Time: 01/09/17 06:10

<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	01/19/17	01/19/17	200.8	0.0010	0.012	mg/L	SLM

Client ID: FES6
ACT Lab No.: BZ00375

Sample Type: Surface Water
Sample Time: 01/09/17 06:17

<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	01/19/17	01/19/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: FES7
ACT Lab No.: BZ00376

Sample Type: Surface Water
Sample Time: 01/09/17 06:20

<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	01/19/17	01/19/17	200.8	0.0010	0.0018	mg/L	SLM

Client ID: FES8
ACT Lab No.: BZ00377

Sample Type: Surface Water
Sample Time: 01/09/17 06:22

<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	01/19/17	01/19/17	200.8	0.0010	0.0016	mg/L	SLM

Client ID: FES9
ACT Lab No.: BZ00378

Sample Type: Surface Water
Sample Time: 01/09/17 06:25

<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	01/19/17	01/19/17	200.8	0.0010	0.0012	mg/L	SLM

Client ID: FES10
ACT Lab No.: BZ00379

Sample Type: Surface Water
Sample Time: 01/09/17 06:25

<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	01/19/17	01/19/17	200.8	0.0010	0.0025	mg/L	SLM

RESULTS

Client ID: FES11
ACT Lab No.: BZ00380

Sample Type: Surface Water
Sample Time: 01/09/17 06:30

<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	01/19/17	01/19/17	200.8	0.0010	0.0011	mg/L	SLM

Client ID: FES12
ACT Lab No.: BZ00381

Sample Type: Surface Water
Sample Time: 01/09/17 06:31

<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	01/19/17	01/19/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: FES13
ACT Lab No.: BZ00382

Sample Type: Surface Water
Sample Time: 01/09/17 06:34

<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	01/19/17	01/19/17	200.8	0.0010	<0.0010	mg/L	SLM

Reviewed by: _____

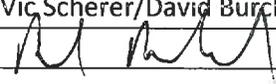


Frederick A. Amalfi, Ph.D.
Laboratory Director

Sample Recordkeeping Form

For initial lead drinking water samples

To be completed by the sample collector

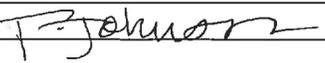
Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	500
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	Copier area
Sample Identification Number (ensure this number is also on the sample container)	FES 1
Date of Collection	1/9//17
Time of Collection	6:00 a.m
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes

BZ-00370

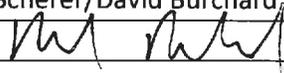
One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

24e
NoIce

Sample Recordkeeping Form For initial lead drinking water samples

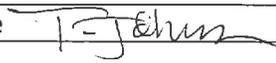
To be completed by the sample collector

Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	500
Type of Fixture (tap, drinking fountain etc..)	Tip
Location of Fixture (example, room number)	Sink Kitchen
Sample Identification Number (ensure this number is also on the sample container)	FES 2
Date of Collection	1/9//17
Time of Collection	6:01 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes	BZ-00371
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One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

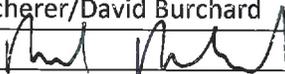
For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

249
No. 10

Sample Recordkeeping Form

For initial lead drinking water samples

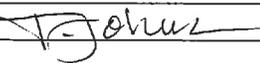
To be completed by the sample collector

Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	200
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	SINK, room 208
Sample Identification Number (ensure this number is also on the sample container)	FES 3
Date of Collection	1/9//17
Time of Collection	6:03 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes	BZ-00372
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One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

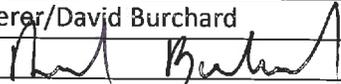
For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

24°C
NOICE

Sample Recordkeeping Form

For initial lead drinking water samples

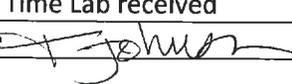
To be completed by the sample collector

Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	200
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	Sink room 207
Sample Identification Number (ensure this number is also on the sample container)	FES 4
Date of Collection	1/9//17
Time of Collection	6:00
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes	BZ-00373
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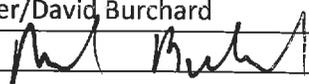
One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

24°C
No Ice

Sample Recordkeeping Form For initial lead drinking water samples

To be completed by the sample collector

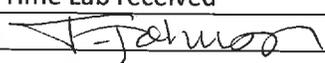
Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	400
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	Sink room 418
Sample Identification Number (ensure this number is also on the sample container)	FES 5
Date of Collection	1/9/17
Time of Collection	6:10 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes

BZ-00374

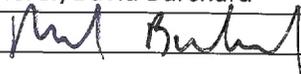
One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

24°C
No Ice

Sample Recordkeeping Form For initial lead drinking water samples

To be completed by the sample collector

Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	300
Type of Fixture (tap, drinking fountain etc..)	Drinking Fountain
Location of Fixture (example, room number)	Sink room 313
Sample Identification Number (ensure this number is also on the sample container)	FES 6
Date of Collection	1/9//17
Time of Collection	6:17 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

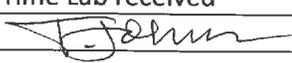
Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling



Notes

BZ-00375

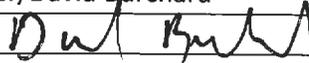
One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @14:54

24°C
No Ice

Sample Recordkeeping Form For initial lead drinking water samples

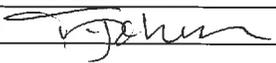
To be completed by the sample collector

Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	300
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	Sink room 310
Sample Identification Number (ensure this number is also on the sample container)	FES 7
Date of Collection	1/9//17
Time of Collection	6:20 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes	BZ-00376
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One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

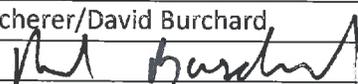
For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

24°C
No IQ

Sample Recordkeeping Form

For initial lead drinking water samples

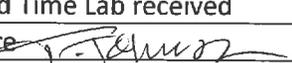
To be completed by the sample collector

Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	100
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	near room 112
Sample Identification Number (ensure this number is also on the sample container)	FES 8
Date of Collection	1/9//17
Time of Collection	6:22 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes	BZ-00377
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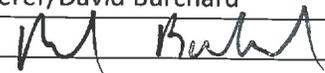
One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

240C
N2I9

Sample Recordkeeping Form For initial lead drinking water samples

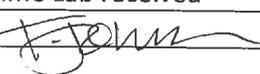
To be completed by the sample collector

Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	100
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	Sink health office
Sample Identification Number (ensure this number is also on the sample container)	FES 9
Date of Collection	1/9/17
Time of Collection	6:25 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes	BZ-00378
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One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

For Lab use only	
Date and Time Lab received	JAN 12 2017 @ 14:54
Signature 	

24°C
No Ice

Sample Recordkeeping Form

For initial lead drinking water samples

To be completed by the sample collector

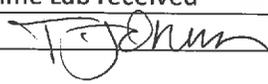
Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	800
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	SINK room 807
Sample Identification Number (ensure this number is also on the sample container)	FES 10
Date of Collection	1/9//17
Time of Collection	6:25 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes

BZ-00379

One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

24°C
No Ice

Sample Recordkeeping Form For initial lead drinking water samples

To be completed by the sample collector

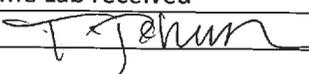
Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	800
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	South side
Sample Identification Number (ensure this number is also on the sample container)	FES 11
Date of Collection	1/9//17
Time of Collection	6:30 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes

BZ-00380

One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:52

24°C
No Ice

Sample Recordkeeping Form

For initial lead drinking water samples

To be completed by the sample collector

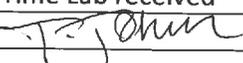
Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	600
Type of Fixture (tap, drinking fountain etc..)	Drinking fountain
Location of Fixture (example, room number)	sink room 611
Sample Identification Number (ensure this number is also on the sample container)	FES 12
Date of Collection	1/9//17
Time of Collection	6:30 6:31 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes

BZ-00381

One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

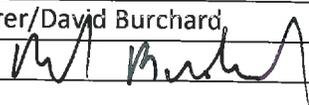
For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

24°C
No Ice

Sample Recordkeeping Form

For initial lead drinking water samples

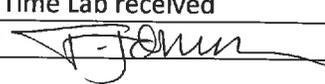
To be completed by the sample collector

Name of School District	Fowler Elementary District
Name of School	Fowler Elementary School
Name (or number) of Building	1000
Type of Fixture (tap, drinking fountain etc..)	Drink fountain
Location of Fixture (example, room number)	Sink @ Preschool room 113
Sample Identification Number (ensure this number is also on the sample container)	FES 13
Date of Collection	1/9//17
Time of Collection	6:34 am
Name of Sample Collector	Vic Scherer/David Burchard
Signature Sample Collector	

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

Notes	BZ-00382
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One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

For Lab use only	
Date and Time Lab received	
Signature 	JAN 12 2017 @ 14:54

24°C
No Ice