



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

Date Submitted: 04/14/17

Date Reported: 05/04/17

Attn: David Burchard

Project: Estrella Foothills High School

RESULTS

Client ID: 1001
ACT Lab No.: BZ05113

Sample Type: Drinking Water
Sample Time: 04/05/17 07:03

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1002
ACT Lab No.: BZ05114

Sample Type: Drinking Water
Sample Time: 04/05/17 07:07

<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	05/01/17	05/01/17	200.8	1.0	2.06	ug/L	SLM

Client ID: 1003
ACT Lab No.: BZ05115

Sample Type: Drinking Water
Sample Time: 04/05/17 06:52

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1004
ACT Lab No.: BZ05116

Sample Type: Drinking Water
Sample Time: 04/05/17 06:44

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

RESULTS

Client ID: 1005
ACT Lab No.: BZ05117

Sample Type: Drinking Water
Sample Time: 04/05/17 06:37

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1006
ACT Lab No.: BZ05118

Sample Type: Drinking Water
Sample Time: 04/05/17 07:14

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1007
ACT Lab No.: BZ05119

Sample Type: Drinking Water
Sample Time: 04/05/17 07:10

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1008
ACT Lab No.: BZ05120

Sample Type: Drinking Water
Sample Time: 04/05/17 06:49

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1009
ACT Lab No.: BZ05121

Sample Type: Drinking Water
Sample Time: 04/05/17 07:20

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1010
ACT Lab No.: BZ05122

Sample Type: Drinking Water
Sample Time: 04/05/17 07:32

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

RESULTS

Client ID: 1011
ACT Lab No.: BZ05123

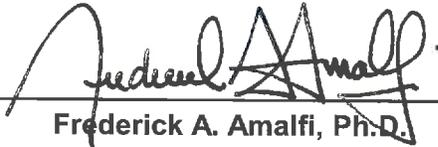
Sample Type: Drinking Water
Sample Time: 04/05/17 07:25

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 1012
ACT Lab No.: BZ05124

Sample Type: Drinking Water
Sample Time: 04/05/17 07:34

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Reviewed by: 

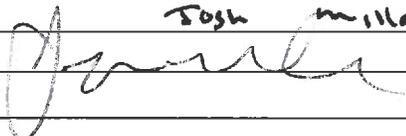
Frederick A. Amalfi, Ph.D.
Laboratory Director

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

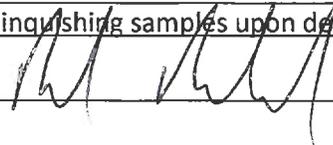
Name of School District	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	400
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	East end Inside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1001
Date of Collection	4-5-17
Time of Collection	7:03
Printed Name of Sample Collector	Tosh Millan
Signature Sample Collector	

Notes Sample collector:

BZ-05113

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
APR 14 2017 25°C 11:00 Amber B	

For relinquishing samples upon delivery to labs only

Relinquished date and signature 

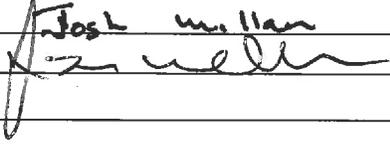
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	500
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	504
Sample Identification Number (Write this number on the sample container and on this sheet)	1002
Date of Collection	4-5-17
Time of Collection	7:07
Printed Name of Sample Collector	Josh Miller
Signature Sample Collector	

Notes Sample collector: *South east sink*

BZ-05114

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	300
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	West work room
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1003
Date of Collection	4-5-17
Time of Collection	6:52
Printed Name of Sample Collector	Josh millan
Signature Sample Collector	

Notes Sample collector:

BZ-05115

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

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

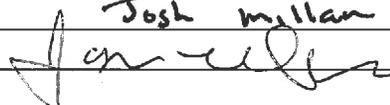
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	260
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	202 Art Room
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1004
Date of Collection	4-5-17
Time of Collection	6:44
Printed Name of Sample Collector	Josh Millan
Signature Sample Collector	

Notes Sample collector:	BZ-05116
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For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

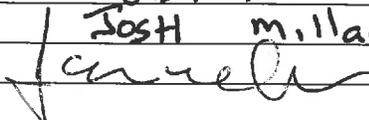
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	100
Type of Fixture (tap, drinking fountain etc.)	TAP
Location of Fixture (example, room number)	copy room
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1005
Date of Collection	4-5-17
Time of Collection	6:37 AM
Printed Name of Sample Collector	Josh millan
Signature Sample Collector	

Notes Sample collector:

BZ-05117

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

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

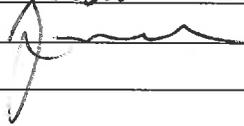
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	200
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	outside 200
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1006
Date of Collection	4-5-17
Time of Collection	7:17
Printed Name of Sample Collector	Josh millan
Signature Sample Collector	

Notes Sample collector:

BZ-05118

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

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

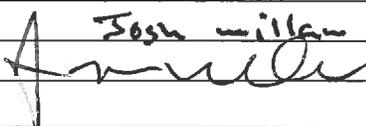
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	600
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	621
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1007
Date of Collection	4-5-17
Time of Collection	7:10
Printed Name of Sample Collector	Josh Miller
Signature Sample Collector	

Notes Sample collector:

BZ-05119

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

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

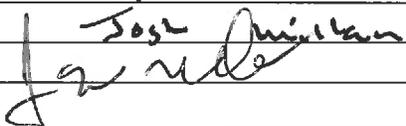
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	700
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	work room
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1008
Date of Collection	4-5-17
Time of Collection	6:49
Printed Name of Sample Collector	Jose Millan
Signature Sample Collector	

Notes Sample collector:

BZ-05120

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

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

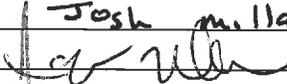
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	800
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	Gym Eastside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1009
Date of Collection	4-5-17
Time of Collection	7:20
Printed Name of Sample Collector	Josh Mullan
Signature Sample Collector	

Notes Sample collector:

BZ-05121

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

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

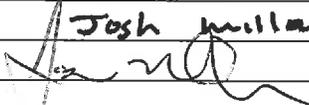
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	Concession stand
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	Baseball / softball
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1010
Date of Collection	4-5-17
Time of Collection	7:32
Printed Name of Sample Collector	Josh Millan
Signature Sample Collector	

Notes Sample collector:	BZ-05122
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For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

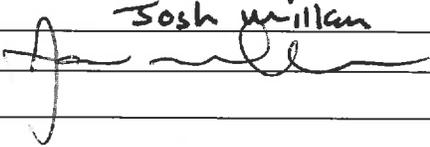
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	900
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	PAC Lobby
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	1011
Date of Collection	4-5-17
Time of Collection	7:25
Printed Name of Sample Collector	Josh William
Signature Sample Collector	

Notes Sample collector:

BZ-05123

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

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

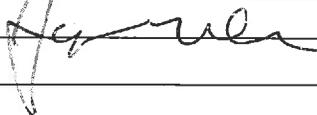
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Buckeye Union High School District
School Name	Estrella Foothills High School
Building (name/number)	<i>Concession Stand</i>
Type of Fixture (tap, drinking fountain etc.)	<i>Drinking fountain</i>
Location of Fixture (example, room number)	<i>Football</i>
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	<i>1012</i>
Date of Collection	<i>4-5-17</i>
Time of Collection	<i>7:34</i>
Printed Name of Sample Collector	<i>Josh millan</i>
Signature Sample Collector	

Notes Sample collector:

BZ-05124

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
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.