



# AQUATIC CONSULTING & TESTING, INC.

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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

**Attn:** David Burchard

**Date Submitted:** 02/02/17

**Date Reported:** 02/26/17

**Project:** Tolleson Union Dist, Copper C

## RESULTS

**Client ID:** CCHS-1  
**ACT Lab No.:** BZ01114

**Sample Type:** Drinking Water  
**Sample Time:** 01/30/17 06:23

<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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

**Client ID:** CCHS-2  
**ACT Lab No.:** BZ01115

**Sample Type:** Drinking Water  
**Sample Time:** 01/30/17 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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

**Client ID:** CCHS-3  
**ACT Lab No.:** BZ01116

**Sample Type:** Drinking Water  
**Sample Time:** 01/30/17 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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

**Client ID:** CCHS-4  
**ACT Lab No.:** BZ01117

**Sample Type:** Drinking Water  
**Sample Time:** 01/30/17 06:27

<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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

## RESULTS

Client ID: CCHS-5  
ACT Lab No.: BZ01118

Sample Type: Drinking Water  
Sample Time: 01/30/17 06:32

<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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: CCHS-6  
ACT Lab No.: BZ01119

Sample Type: Drinking Water  
Sample Time: 01/30/17 06:40

<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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: CCHS-7  
ACT Lab No.: BZ01120

Sample Type: Drinking Water  
Sample Time: 01/30/17 06:42

<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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: CCHS-8  
ACT Lab No.: BZ01121

Sample Type: Drinking Water  
Sample Time: 01/30/17 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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: CCHS-9  
ACT Lab No.: BZ01122

Sample Type: Drinking Water  
Sample Time: 01/30/17 06:47

<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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: CCHS-10  
ACT Lab No.: BZ01123

Sample Type: Drinking Water  
Sample Time: 01/30/17 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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

## RESULTS

Client ID: CCHS-11  
ACT Lab No.: BZ01124

Sample Type: Drinking Water  
Sample Time: 01/30/17 06:53

<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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

Client ID: CCHS-12  
ACT Lab No.: BZ01125

Sample Type: Drinking Water  
Sample Time: 01/30/17 06:57

<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	02/15/17	02/15/17	200.8	0.0010	<0.0010	mg/L	SLM

Reviewed by: \_\_\_\_\_



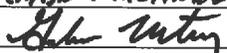
Frederick A. Amalfi, Ph.D.  
Laboratory Director

## Sample Collection Record

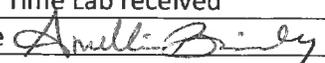
To be completed by the sample collector

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.

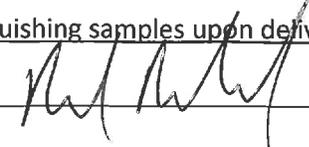
Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	100
Type of Fixture (tap, drinking fountain etc.)	BB BREAK ROOM SINK
Location of Fixture (example, room number)	110
Sample Identification Number (ensure this number is also on the sample container)	CC HS - 1
Date of Collection	1-30-17
Time of Collection	6:23 am
Name of Sample Collector	GABE MARTINEZ
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 02 2017 15:36
Signature 	
Notes:	@18°C
<b>BZ-01114</b>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature  2/2/17

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	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	200 Bldg.
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	206 Hallway
Sample Identification Number (ensure this number is also on the sample container)	CCHS-2
Date of Collection	1-30-17
Time of Collection	6:25 am
Name of Sample Collector	GABE MARTINE
Signature Sample Collector	<i>Gabe Martine</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 02 2017 15:36
Signature	<i>Amelia B...</i>
Notes:	
BZ-01115	@18c

For relinquishing samples upon delivery to labs only

Relinquished date and signature *[Signature]* 2/2/17

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

Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	912 Kitchen
Type of Fixture (tap, drinking fountain etc.)	SINK
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	CCHS-3
Date of Collection	1.30.17
Time of Collection	6:17 am
Name of Sample Collector	GABE MARTINEZ
Signature Sample Collector	<i>Gabe Martinez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 02 2017 15:36
Signature	<i>Paula Brigg</i>
Notes:	
<b>BZ-01116</b>	@18°C

For relinquishing samples upon delivery to labs only

Relinquished date and signature *[Signature]* 2/2/17

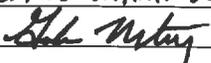
These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

# Sample Collection Record

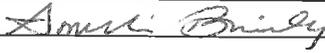
To be completed by the sample collector

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.

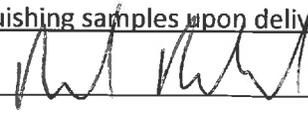
Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	300
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	CCHS-4
Date of Collection	1-30-17
Time of Collection	6:27 am.
Name of Sample Collector	GABE MARTINEZ
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 0 2 2017 15:30
Signature	
Notes:	
<b>BZ-01117</b>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature  2/2/17

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

Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	800
Type of Fixture (tap, drinking fountain etc.)	DRINKING Fountain
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	CCHS-5
Date of Collection	1-30-17
Time of Collection	6:32 am
Name of Sample Collector	GABE MARTINEZ
Signature Sample Collector	<i>Gabe Martinez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 02 2017 15:36
Signature	<i>Ann Bailey</i>
Notes:	
<b>BZ-01118</b>	@18°C

For relinquishing samples upon delivery to labs only

Relinquished date and signature *[Signature]* 2/2/17

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

Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	1000
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	CCHS-6
Date of Collection	1-30-17
Time of Collection	6:40 am
Name of Sample Collector	GABE MARTINEZ
Signature Sample Collector	<i>Gabe Martinez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 02 2017 15:30
Signature	<i>Amelie Binley</i>
Notes	@18°C
<b>BZ-01119</b>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature *[Signature]* 2/2/17

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Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	1300
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	CCHS-8
Date of Collection	1.30.17
Time of Collection	6:44 AM
Name of Sample Collector	GABE MARTINEZ
Signature Sample Collector	<i>Gabe Martinez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 02 2017 15:36
Signature	<i>Amelia Brindley</i>
Notes:	
<b>BZ-01121</b>	<i>@180c</i>

For relinquishing samples upon delivery to labs only

Relinquished date and signature *[Signature]* 2/2/17

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

Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	1400
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	CCMS-9
Date of Collection	1.30.17
Time of Collection	6:47am
Name of Sample Collector	GABE MARTINEZ
Signature Sample Collector	<i>Gabe Martinez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 02 2017 15:34
Signature	<i>Amelia Bailey</i>
Notes:	C/80C
BZ-01122	

For relinquishing samples upon delivery to labs only

Relinquished date and signature *M. Bahf* 2/2/17

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## Sample Collection Record

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

Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	500
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	CCHS-10
Date of Collection	1-30-17
Time of Collection	6:30 am
Name of Sample Collector	GARE MARTINEZ
Signature Sample Collector	<i>Gare Martinez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 0 2 2017 15:30
Signature	<i>Amelia Berry</i>
Notes:	
<div style="display: flex; justify-content: space-between; align-items: center;"> <span style="font-size: 1.2em; font-weight: bold;">BZ-01123</span> <span style="font-size: 1.5em;">@/B.C</span> </div>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature *[Signature]* 2/2/17

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

Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	1500
Type of Fixture (tap, drinking fountain etc.)	DRINKING Fountain
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	CCHS-11
Date of Collection	1.30.17
Time of Collection	6:55 am
Name of Sample Collector	GISE MARTINEZ
Signature Sample Collector	<i>Gise Martinez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 02 2017 15:36
Signature	<i>Amelia B...</i>
Notes:	
<b>BZ-01124</b>	<i>ABC</i>

For relinquishing samples upon delivery to labs only

Relinquished date and signature *[Signature]* 2/2/17

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

Name of School District	Tolleson Union High School District
Name of School	Copper Canyon High School
Building (name/number)	PAC
Type of Fixture (tap, drinking fountain etc.)	DRINKING FOUNTAIN
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	CCHS-12
Date of Collection	1.30.17
Time of Collection	6:57am
Name of Sample Collector	GABE MARTINEZ
Signature Sample Collector	<i>Gabe Martinez</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	FEB 02 2017 <span style="float: right;">15:36</span>
Signature	<i>Amelie Briney</i>
Notes:	
<b>BZ-01125</b>	@18°C

For relinquishing samples upon delivery to labs only

Relinquished date and signature *[Signature]* 2/2/17

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