

AquaLab

18843 Fir Dr
Twain Harte, CA 95383

12 October 2021

Dick Ryon

Yosemite Alpine CSD
PO Box 31
Fish Camp, CA 93623

RE: Dist

Enclosed are the results for sample(s) received on 09/14/21 15:36 by Aqualab. The sample(s) were analyzed according to instructions in accompanying chain-of-custody, utilizing EPA or other ELAP approved methodologies and . Results are summarized on the following pages.

Please see quality control report for a summary of QC data pertaining to this project.

The sample(s) will be stored for 30 days after completion of analysis, then disposed of in accordance with State and Federal regulations. Sample(s) may be archived by prior arrangement.

Thank you for the opportunity to service the needs of your company.

Sincerely,



Lindsay Parnala
Laboratory Manager

AquaLab

18843 Fir Dr
Twain Harte, CA 95383

CERTIFICATE OF ANALYSIS

Yosemite Alpine CSD
PO Box 31
Fish Camp, CA 93623

Project Number: 2210923
Project Name: Dist
Project Manager: Dick Ryon

Work Order No.:

ANALYTICAL REPORT FOR SAMPLES

Sample ID	Laboratory ID	Matrix	Date Sampled	Date Received
outside tap@1193 Silver Tip	A111420-01	Water	09/14/21 09:06	09/14/21 15:36



Approved By

Precision Enviro-Tech. <> California D.O.H.S. Cert. #2387

Yosemite Alpine CSD
PO Box 31
Fish Camp, CA 93623

Project Number: 2210923
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Microbiological Parameters by APHA Standard Methods

Analyte	Result	Reporting			Analyzed	Method	Notes
		Limit	Units	Dilution			
outside tap@1193 Silver Tip (A111420-01) Water Sampled: 09/14/21 09:06 Received: 09/14/21 15:36							
Total Coliforms	<1.1	1.1	MPN/100 ml	1	09/16/21	SM 9221 B,C	
Total E. Coli	<1.1	1.1	"	"	"	"	
Fecal Coliforms	<1.1	1.1	"	"	"	"	



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Analyte	Result	Reporting Limit	Units	Spike Level	Source Result	%REC	RPD	Notes
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Notes and Definitions

Item	Definition	
Dry	Sample results reported on a dry weight basis.	
ND	Analyte NOT DETECTED at or below the reporting limit.	
<i>mg/L = milligrams per Liter = ppm</i>	<i>G- Grab Sample</i>	<i>Comp-Grab- Composite of 4 Grab Sample during 24hrs Grab period and composite into 1 sample prior analysis</i>
<i>ug/L = micrograms per Liter = ppb</i>	<i>C-Composite Sample</i>	
<i>DLR = Detection Limit for Purpose of Reporting. Exceptional sample matrices or interferences may result in higher detection limits.</i>		
<i>MCL- Maximum contaminant level (MCL) is the highest concentration of chemicals permitted in drinking water systems</i>		
RPD	Relative Percent Difference	
%REC	Percent Recovery	
Source	Sample that was matrix spiked or duplicated.	

MMO-MUG-P/A - Total Coliform and E.Coli Test in Drinking Water by MMO-MUG, using Standard Method 22nd Edition.

The State Board of Health requires that bacteriological results must be 'ABSENCE' or less than 1.1 (for MTF method) to meet drinking water requirements.



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AQUALab
P.O. BOX 356
Twin Harbors, CA 95383

CHAIN OF CUSTODY

Page 1 of 1



Work Order No. A11420

Client Name Yosemite Alpine CSD		Project Name Dist		Requested Analyses		EOD Requirement		Requested Turn Around									
Client Contact Dick Ryon		Project Number [None]		Total Colform-SM9221-C 5tube MTF		Excel EDD <input type="checkbox"/>		Rush requests subject to additional charge. Rush requests subject to lab approval.									
Address PO Box 31		Project Description				Geotracker <input type="checkbox"/>											
City Fish Camp		PO Number		Shipped By Pick-Up		DWQ upload <input type="checkbox"/>		Standard (days)									
State/Zip CA, 93623		Shipped By				QA/QC <input type="checkbox"/>											
Phone (925) 447-8907 /		Matrix Soil <input type="checkbox"/>		Regulator <input type="checkbox"/>		Specify: Global ID		Expedited (days)									
Fax		Surface <input type="checkbox"/>		State Specify: <input type="checkbox"/>		System ID		Due Date									
Sampler Lindsay Parrala		Sample Signature		Potable <input type="checkbox"/>		Waste W <input type="checkbox"/>											
Laboratory Work Order No. / ID		Sampled Date		Sampled Time		Sample Type Code		Matrix Code		Container Count		Preservation Code		Sample Condition Temperature		Laboratory Work Order No. / Sample ID	
outside tap@1193 Silver Tip						G		W		1		E::1		1			
Relinquished By		Date/Time		Received By		Date/Time		Date/Time		Date/Time		Date/Time		Date/Time		Date/Time	
Relinquished By		Date/Time		Received By		Date/Time		Date/Time		Date/Time		Date/Time		Date/Time		Date/Time	
Cooler Numbers and Temperatures Default Cooler at 4 9C		Date/Time		Received By		Date/Time		Date/Time		Date/Time		Date/Time		Date/Time		Date/Time	
Matrix Codes:		W=Ground Water-Potable		Preserv. Codes: 1=Dechlorinate; Store cool at 4°C		Cont. Codes: g=100 mL Bacti		COMPOSITE SAMPLER SETUP: Sampler (s) _____ Date Setup _____ Time _____ comment: _____		SAMPLING		Special Instruction					

AquaLab Water Analysis
 P.O. Box 356
 Twain Harte CA 95383

State Certification # 1359
 (209) 586-3400
 Fax: (209) 586-1492

BACTERIOLOGICAL EXAMINATION OF WATER

YOSEMITE ALPINE CSD
 P O BOX 31
 FISH CAMP CA 93623

SWRCB 2210923

YACSD@HOTMAIL.COM
 mcgintyt@pacbell.net

KAREN C) 559 301 8719 / 642 2893
 DICK RYON 925 447 8907 TIM 415 850 8755

Date: 9.14.21

Sampler: *WSP*

Source		Reason	Type
1) Surface/ Spring	4) Reservoir	A) Routine	C) Total Coliform
2) Well Head	5) Distribution	B) Repeat	F) Fecal Coliform
3) Well Distribution	6) Treatment Plant	C) Special	H) Heterotrophic Plate Count
			E) <i>E. coli</i>

A111420 Collection Data Five Portions sm 9221 Presence/Absence sm 9223B

Lab ID Bottle ID	Time	Location	CL2	Source	Reason	Type	Vol mL	# Positive Tubes							Coliform			CFU mL 35 C @ 48HR	
								Prsmp		Confirmed					P/A or MPN				
								24	48	24	24	48	48	#	Total	Fecal	E.coli		
<i>01</i> <i>V03</i>	<i>0906</i>	OT @ 1193 SILVERTIP	<i>10-05</i>				20.0												

Notification/Comments/Transported @ < 10 degree C

Set-Up: Date/Time/By:

Completed: Date/By:

These Tests () Do Meet State Standards
 () Do Not