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: 3.9.21

Sampler: LEP

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

5440.X Collection Data

Five Portions sm 9221 | Presence/Absence sm 9223B

Lab ID / Bottle ID	Time	Location	CL2	Source	Reason	Type	Vol mL	# Positive Tubes: Prsmp 24	Prsmp 48	Confirmed 24	Confirmed 24	Confirmed 48	Confirmed 48	#	Coliform P/A or MPN: Total	Fecal	E.coli	CFU mL 35 C @ 48HR
X / 506	0912	OT @ 1193 SILVERTIP	.55	3	A	C	20.0	Ø	Ø					Ø	<1.1			

Notification/Comments/Transported @ < 10 degree C

Set-Up: Date/Time/By: 3.9 1545 LLJ

Completed: Date/By: 3.11.21 EF

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