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

State Certification # 1359
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# BACTERIOLOGICAL EXAMINATION OF WATER

YOSEMITE ALPINE CSD
P O BOX 31
FISH CAMP CA 93623

SWRCB 2210923

YACSD@HOTMAIL.COM

KAREN C) 559 301 8719 / 642 2893
DICK RYON 925 447 8907

Date: 4.9.19

Sampler: LEP

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

4769.L 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 | |
| L / N#E | 0935 | OT @ 1193 SILVERTIP | L.05 | 3 | A | C | 20.0 | Ø | Ø | | | | | Ø | <1.1 | | | |
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Notification/Comments/Transported @ < 10 degree C

Set-Up: Date/Time/By: 4.9 1600 JLA

Completed: Date/By: 4.11.19 LEP

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