

TAURIAINEN ENGINEERING & TESTING

35186 Spur Hwy Soldotna, AK 99669 (907)262-4624
FAX 262-5777 engineeringalaska@gcl.net

PLEASE READ INSTRUCTIONS ON BACK
PRINT ALL INFORMATION

Test Requires Advance Notice
Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum

Mailing Address 47129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1291-01

Phone (907)260-5449 x1207

Email/Fax maggie@kenaiwatershed.org
Other Kenai River wa

Sample Information: ☐ Residential Water System ☐ PWSID _____

Legal Description:/Building: RM 22

Sample Location: (bathroom, kitchen, etc) Soldotna Creek

Sampled: Date: 7-30-19 Time: 08:10 By: CH

Sample Type: ☐ Routine ☒ Special Purpose WA
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: CH

Received: Date: 30 JUL 19 Time: 1230 By: thw Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the Client agrees to the terms and conditions on reverse.

↓ To be filled out by Lab ↓

Date Test Started: 30 July 19 Time Test Started: 1435 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 121 Colonies/100ml

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 121
☐ Satisfactory ☐ Unsatisfactory

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1435</u>	<u>ST</u>

Comments: _____

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1291-02

Phone (907)260-5449 x1207

Email/Fax maggie@Kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID ☒ Other Kenai River WA

Legal Description:/Building: RM 82

Sample Location: (bathroom, kitchen, etc) Kenai Lake Bridge

Sampled: Date: 7-30-19 Time: 08:30 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.)

Relinquished: Date: 7-30-19 Time: 12:30 By: CH

Received: Date: 30 JUL 19 Time: 1230 By: HW Paid:

Condition: ☒ Satisfactory ☐ Rejected Comments:

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↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1435 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 1 Colonies/100ml

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1435</u>	<u>ST</u>

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 1
☐ Satisfactory ☐ Unsatisfactory

Comments:

TAURIAINEN ENGINEERING & TESTING

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1291-03

Phone (907)260-5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID RM 19 ☒ Other Kenai River WQ

Legal Description:/Building: RM 19

Sample Location: (bathroom, kitchen, etc.) Sligo K Creek

Sampled: Date: 7-30-19 Time: 09:00 By: CH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: CH

Received: Date: 30 JUL 19 Time: 1230 By: JW Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1435 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 74 Colonies/100ml

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1435</u>	<u>ST</u>

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 74
☐ Satisfactory ☐ Unsatisfactory

Comments: _____

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1291-04

Phone (907) 260-5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID ☒ Other Kenai River Water

Legal Description:/Building: RM 79.5

Sample Location: (bathroom, kitchen, etc) Juneau Creek

Sampled: Date: 7-30-19 Time: 09:05 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WA
☐ Check Sample (For previous unsatisfactory sample with lab number)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.)

Relinquished: Date: 7-30-19 Time: 12:30 By: CH

Received: Date 30 JUL 19 Time: 1230 By: HW Paid:

Condition: ☒ Satisfactory ☐ Rejected Comments:

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↓ To be filled out by Lab ↓

Date Test Started: 30 July 19 Time Test Started: 1435 Analyst: ST

TEST RESULTS (SM 922D)

Direct Count: 7 Colonies/100ml

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1435</u>	<u>ST</u>

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 7
☐ Satisfactory ☐ Unsatisfactory

Comments:

TAURIAINEN ENGINEERING & TESTING

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FAX 262-5777 engineeringalaska@gcl.net

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum

Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1291-05

Phone 907 260 5449 x1207

Email/Fax Maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID _____ ☒ Other Kenai River WQ

Legal Description:/Building: - RM 6.5

Sample Location: (bathroom, kitchen, etc) Cummingham Park

Sampled: Date: 7.30.19 Time: 9:11 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7.30.19 Time: 12:30 By: TR

Received: Date: 30 JUL 19 Time: 1230 By: HW Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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Date Test Started: 30 JUL 19 Time Test Started: 1435 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 12 Colonies/100ml

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1435</u>	<u>ST</u>

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 12
☐ Satisfactory ☐ Unsatisfactory

Comments: _____

TAURIAINEN ENGINEERING & TESTING

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum

Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1291-06

Phone (907)260-5449 x1207

Email/Fax maggie@kenaiwatershed.org
Kenai River WA

Sample Information: ☐ Residential Water System ☐ PWSID RM 21 ☒ Other Kenai River WA

Legal Description:/Building: RM 21

Sample Location: (bathroom, kitchen, etc.) Soldotna Bridge

Sampled: Date: 7-30-19 Time: 09:32 By: CH

Sample Type: ☐ Routine ☒ Special Purpose WA
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: CH

Received: Date: 30 JUL 19 Time: 1830 By: Hev Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1435 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 8 Colonies/100ml

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1435</u>	<u>ST</u>

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 8
☐ Satisfactory ☐ Unsatisfactory

Comments: _____

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1291-07

Phone 907 260 5449 41207

Email/Fax Maggie@Kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID _____ ☒ Other Kenai River WQ

Legal Description:/Building: - R M 1.5

Sample Location: (bathroom, kitchen, etc) Kenai City DOCKS

Sampled: Date: 7-30-19 Time: 08:44 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: Morgan Clark CH

Received: Date: 30 JULY 19 Time: 1230 By: HW Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1435 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 79 Colonies/100ml

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1435</u>	<u>ST</u>

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 79
☐ Satisfactory ☐ Unsatisfactory

Comments: _____

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Stening Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1292-01

Phone 907-260-5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID ☒ Other Kenai River WQ

Legal Description:/Building: RM 8

Sample Location: (bathroom, kitchen, etc) No Name Creek (Duplicate)

Sampled: Date: 7/30/19 Time: 09:35 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ

☐ Check Sample (For previous unsatisfactory sample with lab number)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.)

Relinquished: Date: 7-30-19 Time: 12:30 By: Maggie CH

Received: Date: 30 JUL 19 Time: 1230 By: HW Paid:

Condition: ☒ Satisfactory ☐ Rejected Comments:

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↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1545 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 93 Colonies/100ml

☐ Negative for Fecal Coliform

☒ Positive for Fecal Coliform - # Colonies 93

☐ Satisfactory

☐ Unsatisfactory

Comments:

TAURIAINEN ENGINEERING & TESTING

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1292-02

Phone 907 2100 5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID ☒ Other Kenai River WQ

Legal Description:/Building: RMP Dup

Sample Location: (bathroom, kitchen, etc) No Name Creek

Sampled: Date: 7-30-19 Time: 09:45 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.)

Relinquished: Date: 7-30-19 Time: 12:30 By: ~~Algebra~~ CH

Received: Date: 30 JUL 19 Time: 1230 By: thw Paid:

Condition: ☒ Satisfactory ☐ Rejected Comments:

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Date Test Started: 30 JUL 19 Time Test Started: 1545 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 98 Colonies/100ml

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 98
☐ Satisfactory ☐ Unsatisfactory

Comments:

TAURIAINEN ENGINEERING & TESTING

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1292-03

Phone (907) 260-5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID RM30 ☐ Other Kenai River WA

Legal Description:/Building: RM30

Sample Location: (bathroom, kitchen, etc) Funny River

Sampled: Date: 7-30-19 Time: 9:50 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WA
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: TB

Received: Date: 30 JUL 19 Time: 1230 By: HW Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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Date Test Started: 30 JUL 19 Time Test Started: 1545 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 40 Colonies/100ml

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 40
☐ Satisfactory ☐ Unsatisfactory

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1545</u>	<u>ST</u>

Comments: _____

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client

Name Kenai Watershed Forum

Mailing 44129 Sterling Hwy

Address Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1292-04

Phone 907-260-5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID ☒ Other Kenai River WQ

Legal Description:/Building: RN10

Sample Location: (bathroom, kitchen, etc) Beaver Creek

Sampled: Date: 7-30-19 Time: 9:54 AM By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.)

Relinquished: Date: 7-30-19 Time: 12:30 By: TB

Received: Date 30 JUL 19 Time: 1230 By: HW Paid:

Condition: ☒ Satisfactory ☐ Rejected Comments:

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↓ To be filled out by Lab ↓

Date Test Started: 30 July 19 Time Test Started: 1545 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 19 Colonies/100ml

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 19
☐ Satisfactory ☐ Unsatisfactory

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1545</u>	<u>ST</u>

Comments:

TAURIAINEN ENGINEERING & TESTING

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1293-01

Phone (907)260-5449 x1207

Email/Fax maggie@Kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID _____ ☒ Other Kenai River WA

Legal Description:/Building: RM 74

Sample Location: (bathroom, kitchen, etc) Russian River

Sampled: Date: 7-30-19 Time: 10:00 AM By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: CH

Received: Date: 31 JUL 19 Time: 1230 By: HW Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1630 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 1 Colonies/100ml

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1630</u>	<u>ST</u>

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 1
☐ Satisfactory ☐ Unsatisfactory

Comments: _____

TAURIAINEN ENGINEERING & TESTING

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum

Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1293-02

Phone (907)260-5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID _____ Other Kenai River WQ

Legal Description:/Building: RM 23

Sample Location: (bathroom, kitchen, etc) Swiftwater Park

Sampled: Date: 7-30-19 Time: 10:15AM By: CH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: CH

Received: Date: 30 JUL 19 Time: 1230 By: HW Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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Date Test Started: 30 JUL 19 Time Test Started: 1630 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 5 Colonies/100ml

Date 31 JUL 19 Time 1630 Analyst ST

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 5
☐ Satisfactory ☐ Unsatisfactory

Comments: _____

TAURIAINEN ENGINEERING & TESTING

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1293-03

Phone 907-260-5449 x1207

Email/Fax Maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID ☒ Other Kenai River WQ

Legal Description:/Building: RM 10.1

Sample Location: (bathroom, kitchen, etc) Kenai River

Sampled: Date: 7-30-19 Time: 10:27 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.)

Relinquished: Date: 7-30-19 Time: 12:30 By: TB

Received: Date: 30 July 19 Time: 1230 By: Heu Paid:

Condition: ☒ Satisfactory ☐ Rejected Comments:

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↓ To be filled out by Lab ↓

Date Test Started: 30 July 19 Time Test Started: 1630 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 2 Colonies/100ml

Date	Time	Analyst
<u>31 July 19</u>	<u>1630</u>	<u>ST</u>

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 2
☐ Satisfactory ☐ Unsatisfactory

Comments:

TAURIAINEN ENGINEERING & TESTING

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FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum

Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1294-01

Phone (907) 260-5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID ☒ Other Kenai River WQ

Legal Description:/Building: RM 31

Sample Location: (bathroom, kitchen, etc) Morgan's Landing

Sampled: Date: 7-30-19 Time: 10:40 By: JH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.)

Relinquished: Date: 7-30-19 Time: 12:30 By: TR

Received: Date: 30 JUL 19 Time: 1230 By: JW Paid:

Condition: ☒ Satisfactory ☐ Rejected Comments:

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By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the Client agrees to the terms and conditions on reverse.

↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1710 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 3 Colonies/100ml

Date 31 JUL 19 Time 1710 Analyst ST

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 3
☐ Satisfactory ☐ Unsatisfactory

Comments:

TAURIAINEN ENGINEERING & TESTING

35186 Spur Hwy Soldotna, AK 99669 (907)262-4624
FAX 262-5777 engineeringalaska@gcl.net

PLEASE READ INSTRUCTIONS ON BACK
PRINT ALL INFORMATION

Test Requires Advance Notice
Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum

Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1294-02

Phone (907) 260-5449 x1207

Email/Fax maggie@Kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID ☒ Other Kenai River WA

Legal Description:/Building: RM 36

Sample Location: (bathroom, kitchen, etc) Moose River

Sampled: Date: 7-30-19 Time: 10:40 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.)

Relinquished: Date: 7-30-19 Time: 12:30 By: TB

Received: Date 30 JUL 19 Time: 1230 By: HW Paid:

Condition: ☒ Satisfactory ☐ Rejected Comments:

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By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the Client agrees to the terms and conditions on reverse.

↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1710 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 1 Colonies/100ml

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 1
☐ Satisfactory ☐ Unsatisfactory

Date 31 JUL 19 Time 1710 Analyst ST

Comments:

TAURIAINEN ENGINEERING & TESTING

35186 Spur Hwy Soldotna, AK 99669 (907)262-4624
FAX 262-5777 engineeringalaska@gcl.net

PLEASE READ INSTRUCTIONS ON BACK
PRINT ALL INFORMATION

Test Requires Advance Notice
Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1294-03

Phone (907) 260-5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID RM 12.5 ☒ Other Kenai River WQ

Legal Description:/Building: RM 12.5

Sample Location: (bathroom, kitchen, etc) Pillars

Sampled: Date: 7-30-19 Time: 10:44 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: TR

Received: Date: 30 JUL 19 Time: 1230 By: HW Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1710 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 3 Colonies/100ml

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 3
☐ Satisfactory ☐ Unsatisfactory

Date 31 JUL 19 Time 1710 Analyst ST

Comments: _____

TAURIAINEN ENGINEERING & TESTING

35186 Spur Hwy Soldotna, AK 99669 (907)262-4624
FAX 262-5777 engineeringalaska@gcl.net

PLEASE READ INSTRUCTIONS ON BACK
PRINT ALL INFORMATION

Test Requires Advance Notice
Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum

Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1294-04

Phone (907) 260-5449 x1207

Email/Fax maggie@kenaiwatershed.org
Other Kenai River WA

Sample Information: ☐ Residential Water System ☐ PWSID _____ ☒ Other Kenai River WA

Legal Description:/Building: RM 70

Sample Location: (bathroom, kitchen, etc) Jim's Landing

Sampled: Date: 7-30-19 Time: 10:48 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WA
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: TB

Received: Date: 30 JUL 19 Time: 1230 By: Heu Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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By submitting a sample for testing to Tauriainen Engineering & Testing, Inc., (TET) the Client agrees to the terms and conditions on reverse.

↓ **To be filled out by Lab** ↓

Date Test Started: 30 JUL 19 **Time Test Started:** 1710 **Analyst:** ST

TEST RESULTS (SM 9222D)

Direct Count: 0 Colonies/100ml

- ☒ Negative for Fecal Coliform
☐ Positive for Fecal Coliform - # Colonies _____
☐ Satisfactory ☐ Unsatisfactory

Date	Time	Analyst
<u>31 JUL 19</u>	<u>1710</u>	<u>ST</u>

Comments: _____

TAURIAINEN ENGINEERING & TESTING

35186 Spur Hwy Soldotna, AK 99669 (907)262-4624
FAX 262-5777 engineeringalaska@gcl.net

PLEASE READ INSTRUCTIONS ON BACK
PRINT ALL INFORMATION

Test Requires Advance Notice
Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1295-01

Phone (907) 260-5449 x1207

Email/Fax maggie@kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID RM18 ☒ Other Kenai River WQ

Legal Description:/Building: RM18

Sample Location: (bathroom, kitchen, etc) Poachers Cove

Sampled: Date: 7-30-19 Time: 11:04 By: MH

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: TB

Received: Date: 30 JUL 19 Time: 1230 By: HW Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1800 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 2 Colonies/100ml

Date 31 JUL 19 Time 1800 Analyst ST

- ☐ Negative for Fecal Coliform
☒ Positive for Fecal Coliform - # Colonies 2
☐ Satisfactory ☐ Unsatisfactory

Comments: _____

TAURIAINEN ENGINEERING & TESTING

35186 Spur Hwy Soldotna, AK 99669 (907)262-4624
FAX 262-5777 engineeringalaska@gcl.net

PLEASE READ INSTRUCTIONS ON BACK
PRINT ALL INFORMATION

Test Requires Advance Notice
Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA DRINKING WATER ANALYSIS BY MEMBRANE FILTER

Client Name Kenai Watershed Forum
Mailing Address 44129 Sterling Hwy
Soldotna, AK 99669

Lab Use Only
Lab Number 2019-1295-02

Phone (907) 260-5449 x1207

Email/Fax maggie@Kenaiwatershed.org

Sample Information: ☐ Residential Water System ☐ PWSID Other Kenai River WQ

Legal Description:/Building: Morgan's Landing (DUPL) FM31

Sample Location: (bathroom, kitchen, etc) Moose River (Duplicate)

Sampled: Date: 7-30-19 Time: 11:15 By: MF

Sample Type: ☐ Routine ☒ Special Purpose WQ
☐ Check Sample (For previous unsatisfactory sample with lab number _____)

Disinfection: ☒ Untreated ☐ Treated (chlorine, UV, etc.) _____

Relinquished: Date: 7-30-19 Time: 12:30 By: TB

Received: Date: 30 JUL 19 Time: 1230 By: fu Paid: _____

Condition: ☒ Satisfactory ☐ Rejected Comments: _____

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↓ To be filled out by Lab ↓

Date Test Started: 30 JUL 19 Time Test Started: 1800 Analyst: ST

TEST RESULTS (SM 9222D)

Direct Count: 0 Colonies/100ml

Date 31 JUL 19 Time 1800 Analyst ST

- ☒ Negative for Fecal Coliform
☐ Positive for Fecal Coliform - # Colonies _____
☐ Satisfactory ☐ Unsatisfactory

Comments: _____