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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Lab Use Only Kenai Watershed Forum Name Lab Numbe 44129 Sterling Highway Mailing **Address** Soldotna, AK 99669 Phone: 907-953-2605 Email/Fax: O Public Water System ID No. Sample Information: O Residential Water System Kenai River TRIBUTARY Legal Description: NO NAME CREEK Sample Location: By: KPB Date: 7-22-2014 Time: 09:00 Sampled: ✓ Routine Sample Type: Special Purpose O Check Sample (For previous unsatisfactory sample with lab number (_ Treated (chlorine, UV, etc.) Disinfection: Untreated Time: /2:56 Date: 7-22-20/4 Relinguished: Date: 77.11414 Time: 17556 Bv: Paid: Received: Comments: _ Condition: Satisfactory O Rejected This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse Vero be filed out by leas 4 Date Test Started: 625 Time Test Started: Analyst: **Analyst TEST RESULTS (SM 9222D)** Time Date Colonies/100 ml Direct Count O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies O Satisfactory Unsatisfactory Comments:

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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Kenai Watershed Forum Name 44129 Sterling Highway Mailina **Address** Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Public Water System ID No. O Residential Water System Sample Information: Legal Description: Kenai River 1.5 - KENAI CITY DOCK Sample Location: Mile By: KPB Date: 7-22-2014 Time: 09:35 Sampled: Special Purpose _____ Sample Type: O Check Sample (For previous unsatisfactory sample with lab number (O Treated (chlorine, UV, etc.) Disinfection: O Untreated Date: 7-22-2014 Time: 12:56 Relinquished: Time: (2)56 Paid: Date: <u>77.11.41</u> Received: Rejected Comments: Satisfactory Condition: This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse I To be filled out by Lab 4 Date Test Started: アセブハ Time Test Started: **Analyst** Time TEST RESULTS (SM 9222D) Date Colonies/100 ml Direct Count O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies 111 Satisfactory Unsatisfactory Comments:

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

FECAL C	OLIFORM	BACTERIA AN	<i>ALYSIS</i> by M	lembrane	Filter		i konsektorov elektronov uz Edebbolic			
Client Name	Kenai Wa	atershed Forum			5.Fe (2009) 27 K (600 US)	se Only 7	0µ- 12	47-04		
Mailing	44129 Sterling Highway				Lab Number Control Control					
Address	Soldotna, AK 99669				Phoi	1e : 907-953-	-2605			
					Ema	il/Fax:				
Sample In	formation	: O Reside	ntial Water Sys	stem	O Public \	Water Syste	m ID No			
Legal Des	cription:	Kenai River				<u></u>				
Sample Lo	ocation:	Mile 2.5	KENAI C	TTY 10	ck D	uP				
Sampled:		Date: 7-22-2	<u>/4</u> Time:	10:00	_ By: _	KPB				
Sample Ty	/pe:		o s	pecial Purpo	se					
		O Check Samp	le (For previous u	nsatisfactory sa	mple with lai	o number ()		
Disinfection	on:	O Untreated	OT	reated (chlor	ine, UV, e	tc.)		·····		
Relinquisi	hed:	Date: 7-22-20	<u> </u>	12:56	Ву	301	3	`		
Received:	•	Date: ZZJUU	<u>ে</u> Time:	12:56	By:	HW	Paid: _			
Condition	:	Satisfactory		O Re	jected	Comment	s:			
	By submi	This itting a sample for testing to T	report is for the exclusive auriainen Engineering &	e use of the party to Testing, Inc. (TET),	whom it is addres the Client agrees	sed. to the terms and cor	nditions on reverse.			
			- U Tobe f		Lab V					
Date Test	Started: 2	225414	Time Tes	t Started:	1735		Analyst:	<u>\$7</u>		
TEST RES	BULTS (SM	1 9222D)		Date		Time		Analyst		
Direct Cou	int3	SColonie	s/100 ml	237	Why M	1+35		51		
		gative for Fecal Co		•	•					
	Pos	sitive for Fecal Col	iform - # Colon	ies <u>35</u>						
		isfactory O								
Comments	s:									
	·									

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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client ab Use Only Name Kenai Watershed Forum an Jumpar Mailing 44129 Sterling Highway Address Soldotna, AK 99669 Phone: 907-953-2605 Email/Fax: O Residential Water System O Public Water System ID No._____ Sample Information: Legal Description: Kenai River 6.5 - CUNNINGHAM PARK Sample Location: By: USFWS Date: 7-22-2014 Time: *07-51* Sampled: Sample Type: O Special Purpose O Check Sample (For previous unsatisfactory sample with lab number (_____ O Treated (chlorine, UV, etc.) Disinfection: O Untreated Time: 1/203 Date: 7-22-2014 Relinguished: Time: 1/203 Paid: Date: 771019 14 By: Received: Comments: Satisfactory Rejected Condition: This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse Time Test Started: 17スの Date Test Started: 60 Analyst: **TEST RESULTS (SM 9222D) Analyst Date** Time Colonies/100 ml Direct Count O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies Satisfactory Unsatisfactory Comments:

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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client lan Use Only Kenai Watershed Forum Name se billion de 44129 Sterling Highway Mailing **Address** Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Public Water System ID No. O Residential Water System Sample Information: Legal Description: Kenai River TRIBUTARY Mile 10 - BEAVER CREEK Sample Location: By: _ USFWS Time: 08:26 Date: 7-22-2014 Sampled: Sample Type: Routine O Special Purpose _____ O Check Sample (For previous unsatisfactory sample with lab number (_ O Treated (chlorine, UV, etc.) Disinfection: Untreated Date: 7-22-2014 Relinguished: Date: 77_\\)L4 [4 Time: 11 70 5 By: Paid: Received: O Rejected Comments: Condition: Satisfactory This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse Analyst: \$7 Date Test Started: <u>"רצל"</u> Time Test Started: \230 **Analyst TEST RESULTS (SM 9222D)** Date **Time** 1230 **Direct Count** Colonies/100 ml O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies 14 Unsatisfactory Satisfactory Comments:

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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Kenai Watershed Forum Lab Use Only Name tat Number 44129 Sterling Highway Mailing Address Soldotna, AK 99669 Phone: 907-953-2605 Email/Fax: Sample Information: O Residential Water System O Public Water System ID No._____ Legal Description: Kenai River 10.1 - KENAI RIVER Sample Location: Date: 7-22-2014 USFWS Time: 08:45 Sampled: Bv: ✓ Routine Sample Type: Special Purpose O Check Sample (For previous unsatisfactory sample with lab number (_ O Untreated Treated (chlorine, UV, etc.) Disinfection: Date: 7-22-2614 Time: // 205 Bv:(// Relinguished: Date: <u>77) 1444</u> Time: 1/305 Paid: Received: By: Satisfactory Condition: O Rejected Comments: This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse are and markening the Early Date Test Started: LLSMIM Time Test Started: Analyst: Time **TEST RESULTS (SM 9222D) Analyst** Date Colonies/100 ml Direct Count O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies O Satisfactory O Unsatisfactory Comments:

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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Kenai Watershed Forum Name Mailing 44129 Sterling Highway **Address** Soldotna, AK 99669 Phone: 907-953-2605 Email/Fax: O Public Water System ID No. Sample Information: O Residential Water System Legal Description: Kenai River Mile 12.5 - PILLARS Sample Location: Date: 7-22-2014 Time: 09-501 By: USFWS Sampled: Routine Sample Type: O Special Purpose _____ O Check Sample (For previous unsatisfactory sample with lab number (______ O Treated (chlorine, UV, etc.) Disinfection: Untreated Date: 7-22-2014 Time: 1/205 Relinguished: Time: 1/205 Paid: ______ Date: 7250414 Received: Condition: Satisfactory Rejected Comments: This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse. (230 Date Test Started: 223/14 Time Test Started: Analyst: **TEST RESULTS (SM 9222D) Analyst** Date 1230 Direct Count \ Colonies/100 ml O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies Unsatisfactory Satisfactory Comments:

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

FECAL C	OLIFORM	I BACTERIA AN	<i>IALYSIS</i> by	Membran	e Filter		an a company of the c	
Client Name	Kenai W	enai Watershed Forum				Use Only =) 04=1	<u> </u>
Mailing	44129 St	terling Highway				. C. 11/2-1		At a control of the c
Address	Soldotna	, AK 99669			Pho	ne: 907-95	3-2605	
					Em	ail/Fax:		
Sample In	nformation	: O Reside	ential Water	System	O Public	Water Syst	em ID No	
Legal Des	cription:	Kenai River						
Sample Lo	ocation:	Mile 18 - P	DACHER'S	COVE				
Sampled:		Date: 7-22-2	ci4 Tin	ne: <u>09:34</u>	<u>'</u>	USFWS	2	
Sample T	ype:		0	Special Purp	oose			
		O Check Samp	ole (For previou	ıs unsatisfactory	sample with la	ab number ()
Disinfection	on:	O Untreated	0	Treated (chl	orine, UV, e	etc.)		<u>.</u>
Relinquisi	hed:	Date: 7-22-	2014 Tin	ne: <u>//:0.</u>	∑ By: (∠	817	<u> </u>	
Received:	.	Date: Z シリレ	414 Tin	ne: <u>// o</u> S	By:	HW	Paid:	
Condition	:	Satisfactory		O F	Rejected	Commer	nts:	
	By subm	Thing a sample for testing to	s report is for the excl Tauriainen Engineerin	usive use of the party ng & Testing, Inc. (TET	to whom it is addre), the Client agree	essed. s to the terms and o	conditions on reverse.	
				e filled out to	y Lab ↓			
Date Test	Started: _	414555	Time 1	est Started:	(230		Analyst:	S1_
TEST RES	SULTS (SN	, 1 9222D)		Date		Time		Analyst
Direct Cou	ınt	ØColonie	s/100 ml	23-	Syri	1520		<u>57</u>
	Neg	gative for Fecal C	oliform					
	O Pos	sitive for Fecal Co	liform - # Col	lonies				
	O Sat	isfactory C) Unsatisfact	ory				
Comments	3:							
				···				

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FECAL C	OLIFORM	BAC	CTERIA ANAL	<i>ysıs</i> by	Memb	rane F	Filter			
Client Name							Lab	Use Only o Number	7014-1	231=98
Mailing	44129 Sterling Highway						Lau	rwanser.		
Address	Soldotna, AK 99669						Pho	one: 907-9	53-2605	
·						•	Em	ail/Fax:		
Sample In	formation	:	O Residentia	l Water S	ystem	() Public	: Water Sys	stem ID No	
Legal Des	cription:	Ker	nai River						 	
Sample Lo	cation:	Mile	18 - POAC	HER'S (COVE	DUPL	TCATE	E	·	
Sampled:		Date	: 7-22-201	<u>ર્ય</u> Tim	e: <u>09.</u>	34	By:	USFin	15	
Sample Ty	pe:	⊘ F	Routine	0	Special	Purpos	e			
		0 0	Check Sample (I	or previous	unsatisfa	actory sam	ple with l	ab number (_)
Disinfectio	n:	οι	Intreated	0	Treated	l (chlorir	ne, UV,	etc.)		
Relinquish	ed:	Date	: <u>7-72-201</u>	<u>Y</u> Tim	e: <u>//</u>	:05	Ву:	B.C	35_	
Received:		Date	: ZZJVL414	<u>{</u> Tim∈	e: <u>//</u>	05	Ву:	Her	Paid	:
Condition:		@ S	Satisfactory		(O Reje	cted	Comme	ents:	
	By subm	tting a sa	This repor mple for testing to Tauriair	is for the exclusion Engineering	sive use of th & Testing, Ir	ne party to wh	om it is addre Client agree	essed. es to the terms an	d conditions on revers	e.
						maay _l e				
Date Test S	Started: <u>7</u>	23/	414	Time Te	est Starl	ted: <u>[2</u>	30		Analyst: _	51
TEST RES	ULTS (SM	9222	.D)		ı	Date		Time		Analyst
Direct Cour	nt	<u> </u>	Colonies/10	0 ml	ζ.	2324	<u>M</u>	<u>(23</u>	<u> </u>	
	O Neg	ative	for Fecal Colifo	m		•				
	Pos	itive fo	or Fecal Coliforr	n -# Colo	nies	<u>L</u>				
	O Sati	sfacto	ry 🔾 Un	satisfacto	ry					•
Comments:										
				<u> </u>						
							<u>.</u>			

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PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Lab Use Only Name Kenai Watershed Forum Lab Number 44129 Sterling Highway Mailing Address Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Residential Water System O Public Water System ID No._____ Sample Information: Legal Description: Kenai River TRIBUTARY 19 - SLIKOK CREEK Mile Sample Location: By: ADFG Date: 7-22-2014 Time: <u>/0:54</u> KWF Sampled: Routine Sample Type: Special Purpose O Check Sample (For previous unsatisfactory sample with lab number (____ O Untreated O Treated (chlorine, UV, etc.) Disinfection: Date: 7-22-2014 Time: 12:56 Bv:(Relinquished: Date: 2210414 Time: パンしらゆ By: Paid: Received: Rejected Comments: Condition: Satisfactory This report is for the exclusive use of the party to whom it is addressed.

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 4 Date Test Started: LL Time Test Started: Analyst: **Time TEST RESULTS (SM 9222D) Analyst** Date Colonies/100 ml Direct Count O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies_ Satisfactory Unsatisfactory Comments:

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

FECAL C	OLIFORM	I BACTERIA ANALYSI	s by Memb	rane Fil	ter	and denote the following to the control of the cont	Survey to a supplication of the survey of th	over the first control of the contro
Client Name	Kenai W	atershed Forum) 14- 15	744—0S	
Mailing	44129 St	erling Highway		Egol	lumber <u>C</u>			
Address	Soldotna	, AK 99669		Phon	e : 907-953-26	 i05		
					Email	I/Fax:		
Sample In	formation	: O Residential W	ater System	O	Public V	Vater System	ID No	
Legal Des	cription:	Kenai River						
Sample Lo	ocation:	Mile 21 - SoLD	OTNA BRI	DGE				
Sampled:		Date: 7-22-2014	Time: <u>/</u> 0。	17	Ву:	ADFG &	KWE	
Sample Ty	/pe:		O Special		_	•		
		O Check Sample (For p	orevious unsatisfa	ctory sample	e with lab	number ()
Disinfectio	on:	O Untreated	O Treated	(chlorine,	UV, etc	p.)		
Relinquist	ned:	Date: 7-22-2014	Time: <u>/2</u>	.56 E	Зу:	316	\$	
Received:		Date: 72 JULY 14	Time:	:56 E	3y: <u>1</u>	tu	Paid:	
Condition:	:	Satisfactory) Rejecte	ed	Comments:		-
	By submi	This report is for itting a sample for testing to Tauriainen Er	the exclusive use of the ngineering & Testing, In	e party to whom c. (TET), the Cli	it is addresse ient agrees to	ed. o the terms and condition	ns on reverse.	
			io de filled o) 4			
Date Test S	Started: 2	2J1414 Ti	me Test Start	ed: [7]	72	An	alyst:	57
TEST RES		# ·	_	ate		- Time	•	Analyst
Direct Cour	nt	Colonies/100 m	، <u>ء</u>	235/17	14	(735		57
	O Neg	ative for Fecal Coliform		•				
	Pos	itive for Fecal Coliform - :	# Colonies <u>3</u>					
	O Sati	sfactory O Unsati	sfactory	 -				
Comments	<u> </u>		-					_

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

FECAL C	OLIFORM	BACTER	RIA ANALYS	sis by Meml	orane Fi	ilter		e santania e e e e e e e e e e e e e e e e e e e		
Client Name	Kenai Wa	Kenai Watershed Forum				Lab U	se Orily 2 Number 2	,014-Ti	31=03 31=03	
Mailing	44129 Sterling Highway			_						
Address	Soldotna, AK 99669			_	Phon	re: 907-953	-2605			
					_	Emai	il/Fax:		,	
Sample In	formation	<i>:</i> 0	Residential	Water System	0	Public V	Vater Syste	m ID No		
Legal Des	cription:	Kenai R	iver TRI	BUTARY						
Sample Lo	ocation:	Mile 2	Z - Sou	LOOTNA CO	REEK					
Sampled:		Date: <u>7</u>	-22-2014	Time: <u>08</u>	30_	Ву: _	ADF46	and Kw	<u> </u>	
Sample Ty	/pe:	♂ Routi	ne	O Specia	l Purpose	·				
		O Chec	k Sample (Fo	r previous unsatis	factory sam	ple with lab	number ()	
Disinfection	on:	O Untre	ated	O Treate	d (chlorine, UV, etc.)					
Relinquis	hed:	Date: <u>7</u> -	22-2014	Time:	1:05	Ву:	30	5		
Received:		Date: Z	211414	Time:	105	Ву:	HW	_ Paid:		
Condition	:	Satist	factory		O Rejec	cted	Commen	ts:		
•	By subm	itting a sample fo	This report is r testing to Tauriaine	for the exclusive use of n Engineering & Testing,	the party to who inc. (TET), the	om it is addres: Client agrees	sed. to the terms and co	onditions on reverse.		
Date Test	Started: 2	224/4		Time Test Sta	rted: <u>1</u> 5	<u>}></u>		Analyst:	51	
TEST RES		•			Date		Time		Analyst	
Direct Cou	nt	8	Colonies/100	ml	235	4714	(2)		51	
		-	ecal Coliforn	n		•				
	Pos	sitive for Fe	ecal Coliform	- # Colonies_	8_					
	○ Sat	isfactory	O Uns	atisfactory						
Comments	s:									
	-								······································	
	<u></u>									

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PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Kenai Watershed Forum Name Mailing 44129 Sterling Highway **Address** Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Public Water System ID No._____ O Residential Water System Sample Information: Legal Description: Kenai River SWIFTWATER PARK Mile Sample Location: By: ADFiG and KWF Time: 091/3 Sampled: Ø Routine Special Purpose ____ Sample Type: O Check Sample (For previous unsatisfactory sample with lab number (_______ O Treated (chlorine, UV, etc.) Disinfection: Untreated Time: // 505 By: 6 Date: 7-22-2014 Relinguished: Paid: Time: _// ○ 5 Date: 77 10 414 Received: Satisfactory Rejected Comments: Condition: This report is for the exclusive use of the party to whom it is addressed. By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse. Date Test Started: 2274114 Time Test Started: Analyst: **Analyst** Date Time **TEST RESULTS (SM 9222D)** Direct Count Colonies/100 ml O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies Satisfactory Unsatisfactory Comments:

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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Name Kenai Watershed Forum Lab Number 44129 Sterling Highway Mailing **Address** Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Public Water System ID No. O Residential Water System Sample Information: Legal Description: Kenai River TRIBUTARY 30 - FUNNY RIVER Sample Location: Date: 7-22-2014 CIAA By: ___ Time: //:00 Sampled: Routine Sample Type: Special Purpose O Check Sample (For previous unsatisfactory sample with lab number (_ O Treated (chlorine, UV, etc.) Disinfection: Untreated Date: 7-22-2014 Time: 12.56 Relinguished: Time: 17:56 Paid: Date: 22506914 By: Received: Comments: Satisfactory Rejected Condition: This report is for the exclusive use of the party to whom it is addressed. By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse II To be filled out by Lab 4 Date Test Started: Time Test Started: Analyst: **TEST RESULTS (SM 9222D) Analyst** Date Time Colonies/100 ml Direct Count O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies Satisfactory Unsatisfactory Comments:

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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Kenai Watershed Forum Name Lab Number 44129 Sterling Highway Mailing **Address** Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Public Water System ID No. O Residential Water System Sample Information: Legal Description: Kenai River 31 - MORGAN'S LANDING Sample Location: By: CIAA Time: <u>09</u>: 20 Date: 7-72-2014 Sampled: Routine O Special Purpose Sample Type: O Check Sample (For previous unsatisfactory sample with lab number (____ O Treated (chlorine, UV, etc.) Disinfection: O Untreated Date: 7-22-2014 Time: 12:56 Bv: Relinquished: Time: 12,56 By: Paid: Date: ZZIX414 Received: Rejected Comments: Condition: Satisfactory This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse Uniform fillegrout by Lab U Date Test Started: Time Test Started: Analyst: Time Anaiyst TEST RESULTS (SM 9222D) Date Colonies/100 ml Direct Count O Negative for Fecal Coliform O Satisfactory Unsatisfactory Comments:

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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Lab Use Only Name Kenai Watershed Forum Lab Number Mailing 44129 Sterling Highway **Address** Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Residential Water System O Public Water System ID No._____ Sample Information: Kenai River TRIBUTARU Legal Description: Mile 36 - MOOSE RIVER Sample Location: By: CIAA Date: 7-22-2014 Time: <u>09:58</u> Sampled: Routine O Special Purpose Sample Type: O Check Sample (For previous unsatisfactory sample with lab number (O Treated (chlorine, UV, etc.) Disinfection: O Untreated Date: 7-22-2014 Time: 12:56 Relinguished: Time: 12:56 Date: ZZJULY14 By: Paid: Received: O Rejected Comments: _ Satisfactory Condition: This report is for the exclusive use of the party to whom it is addressed.

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: 22 July Time Test Started: Analyst: **TEST RESULTS (SM 9222D) Date** Time Analyst Colonies/100 ml Direct Count O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies Unsatisfactory Satisfactory Comments:

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

PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter

Client Name	Kenai W	atershed Forum		Lab Use Only						
Mailing	44129 S	terling Highway		- Lab Number <u>(0)9-1/648-</u>						
Address	Soldotna	ı, AK 99669		Pho	ne: 907-953-2605					
				Ema	il/Fax:					
Sample In	nformation	o: O Residential V	Vater System	O Public \	Water System ID N	lo				
Legal Des	scription:	Kenai River		and the second s						
Sample L	ocation:	Mile 40 - BIN	6's LAN,	DING	<u> </u>					
Sampled:		Date: 7-22-7014	Time: _// \$	<u>//</u>	DEC & DNA	₹				
Sample T	ype:	Routine	O Special	Purpose						
		O Check Sample (For	previous unsatisfa	ctory sample with lat	number ()				
Disinfection	on:	O Untreated	O Treated	(chlorine, UV, et	tc.)					
Relinquis	hed:	Date: 7-22-2014	Time: <u>/ 2</u>	:56 By	363					
Received:		Date: ZZJUH14	Time: <u>/2</u>	56 By:	Hu F	Paid:				
Condition	:	Satisfactory		Rejected	Comments:					
	By subm	This report is fo itting a sample for testing to Tauriainen E	r the exclusive use of the ingineering & Testing, Inc	party to whom it is address c. (TET), the Client agrees	sed. to the terms and conditions on	reverse.				
		the state of the s	To be filled to	ntoy Lab 4	The second second					
Date Test	Started: 2	22 July 14 T	ime Test Starte	ed: 1815	Analys	it: <u>\$7</u>				
TEST RES	ULTS (SN	1 9222D) [']		ate	Time	Analyst				
Direct Cou	nt	Colonies/100 n	nl <u> </u>	23 54/4	1815	<u>\$7</u>				
	O Neg	ative for Fecal Coliform	^	,						
	Pos	itive for Fecal Coliform -	# Colonies <u>う</u>	<u> </u>						
	O Sati	sfactory O Unsat	isfactory	, ,1						
Comments	:			τ 						
			11 2 2 2 2 2							
				ξ						

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FECAL C	COLIFORM	I BACTERIA ANALYSI	s by Membr	ane Filter			
Client Name	Kenai W	atershed Forum			Use Only c Number	2014-12	48-01
Mailing	44129 St	terling Highway		Eat			
Address	Soldotna	, AK 99669		Pho	one: 907-953	3-2605	
				Em	ail/Fax:		
Sample in		: O Residential W	ater System	O Public	Water Syste	em ID No	
Legal Des	scription:	Kenai River					
Sample L	ocation:	Mile 43 - UPSTA	EAM of	DOW ISLA	ND		
Sampled:	•	Date: <u>7-22-2014</u>	Time: <u>/ / / /</u>	<u>8</u> By:	DEC &	DNR	
Sample T	уре:	Routine Routine		Purpose			
		O Check Sample (For p	revious unsatisfac	tory sample with la	ab number ()
Disinfecti	ion:	O Untreated		(chlorine, UV,			
Relinquis	hed:	Date: 7-22-2014	Time: 12:	56 By	36	25_	
Received	:	Date: 22/02/14	Time: 125	<u>56</u> By: _	Hw	_ Paid: _	
Condition) :	Satisfactory		Rejected	Commer	ıts:	
	Ry cuhm	This report is for nitting a sample for testing to Tauriainen Er	the exclusive use of the	party to whom it is addre	essed. es to the terms and o	onditions on reverse.	
	Oy Substitution		Folbe filled of				
Date Test	Started: 2	2 July TI	me Test Starte	d: 1815		Analyst:	57
	SULTS (SN		_	ate	Time		Analyst
Direct Cou	.nt	Colonies/100 m	$\frac{1}{2}$	35.1714	180		_\$7_
	O Neg	gative for Fecal Coliform	_	•			
	Pos	sitive for Fecal Coliform -	# Colonies	_			
		isfactory O Unsati					
Comment	s:						
				<u> </u>			
			····				

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FECAL C	COLIFORN	I BACTERIA ANAL	YSIS by Wer	nbrane Fil	iter		ng/olg/sag			
Client Name	Kenai Watershed Forum Lab Use Only Lab Number 2014 - 1246-9									
Mailing	44129 S	terling Highway								
Address	Soldotna	, AK 99669		<u> </u>	Phone	907-953-26	05			
					Email/	Fax:				
Sample In	nformation	: O Residentia	al Water Syste	m O	Public Wa	ater System I	D No			
Legal Des	scription:	Kenai River 7	RIBUTARY				·			
Sample Le	ocation:	Mile 44 - M	DUTH OF	KILEY	RIVER					
Sampled:		Date: 7-22-20	<i>∐</i> Time: <u> </u>	39:26	Ву:	DEC &	DNR			
Sample T	уре:	✓ Routine								
		O Check Sample ((For previous unsa	tisfactory samp	le with lab n	umber (
Disinfecti	on:	O Untreated	O Trea	ted (chlorine	, UV, etc.)				
Relinquis	hed:	Date: 7-22-2014	<u>/</u>	12:56	Ву:	500				
Received:	:	Date: ZLIVY 14	Time:	12:56	Ву:	the	Paid: _			
Condition):	Satisfactory		O Reject	ted	Comments:				
	Bv subn	This repo nitting a sample for testing to Tauria	nt is for the exclusive use inen Engineering & Testi	of the party to whoming, Inc. (TET), the C	n it is addressed client agrees to t	l. he terms and conditio	ns on reverse.			
100,000,000			To be ille							
Date Test	Started:	227:1,14	Time Test S	tarted: (6	35	An	alyst:	5 7 _		
TEST RES		f		Date		Time		Analyst		
Direct Cou	` 4	Colonies/1	00 ml	23July	14	1635		_\$1_		
	O Neg	gative for Fecal Colife	orm	,						
	Pos	sitive for Fecal Colifor	m - # Colonies	12						
	O Sat	isfactory O Ur	nsatisfactory							
Comments	s:		,		.		<u> </u>			
										
					· .		<u> </u>			

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PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Kenai Watershed Forum Name 44129 Sterling Highway Mailing **Address** Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Public Water System ID No._____ Sample Information: O Residential Water System Legal Description: Kenai River SKELAK LAKE Sample Location: BY: DEC & DNR Time: <u>08:3</u>/ Sampled: Sample Type: Special Purpose O Check Sample (For previous unsatisfactory sample with lab number (_____ Treated (chlorine, UV, etc.) Disinfection: O Untreated Time: 12:56 Date: 7-22-2014 Relinguished: Time: 12:56 Date: ZZJULY14 Bv: Paid: Received: Rejected Comments: Condition: Satisfactory This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse I To be filled out by Lab I Date Test Started: 273414 Time Test Started: Analyst: Time **Analyst** TEST RESULTS (SM 9222D) Date Colonies/100 ml Direct Count Negative for Fecal Coliform O Positive for Fecal Coliform - # Colonies O Unsatisfactory Satisfactory Comments: _____

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FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Lab Use Only Kenai Watershed Forum Name leh Number Mailing 44129 Sterling Highway **Address** Soldotna, AK 99669 Phone: 907-953-2605 Email/Fax: Sample Information: O Residential Water System O Public Water System ID No. Legal Description: Kenai River 70 - JIM'S Mile LANDING Sample Location: By: USFS Date: 7-22-2014 Time: 10130 Sampled: Routine Sample Type: O Special Purpose _____ O Check Sample (For previous unsatisfactory sample with lab number (Disinfection: O Untreated Treated (chlorine, UV, etc.) Date: 7-27-2014 Time: 12:56 Relinauished: Date: 221014 14 Time: /2156 By:__ Paid: Received: Condition: Satisfactory O Rejected Comments: This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse Jan terilei on by sic Date Test Started: 223 Time Test Started: Analyst: **Analyst** TEST RESULTS (SM 9222D) Time Direct Count Colonies/100 ml O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies O Unsatisfactory Satisfactory Comments:

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PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Kenai Watershed Forum Name Lab Numbei 44129 Sterling Highway Mailing **Address** Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Residential Water System O Public Water System ID No._____ Sample Information: Kenai River TRIBUTARY Legal Description: 74 - RUSSIAN RIVER Sample Location: Date: 7-22-2014 By: USFS Sampled: Time: <u>69:45</u> Routine Sample Type: Special Purpose O Check Sample (For previous unsatisfactory sample with lab number (___ O Untreated O Treated (chlorine, UV, etc.) Disinfection: Date: 7-22-2014 Time: 12:56 By: Relinguished: Date: 27 10414 Time: 12,56 By: Paid: Received: O Rejected Comments: Condition: Satisfactory This report is for the exclusive use of the party to whom it is addressed.

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: 275 Time Test Started: Analyst: Analyst TEST RESULTS (SM 9222D) Time Date Direct Count Colonies/100 ml O Negative for Fecal Coliform Positive for Fecal Coliform - # Colonies O Satisfactory Unsatisfactory Comments:

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PLEASE READ INSTRUCTIONS ON BACK PRINT ALL INFORMATION Test Requires ADVANCE NOTICE Please Call Prior to Bringing in Sample

FECAL COLIFORM BACTERIA ANALYSIS by Membrane Filter Client Lab Use Only Kenai Watershed Forum Name 44129 Sterling Highway Mailing Address Phone: 907-953-2605 Soldotna, AK 99669 Email/Fax: O Public Water System ID No. Sample Information: O Residential Water System Legal Description: Kenai River 82 - KENAI LAKE BRIDGE Mile Sample Location: Date: 7-22-2014 By: USES Time: <u>/)9 { 00 </u> Sampled: O Special Purpose _____ Sample Type: O Check Sample (For previous unsatisfactory sample with lab number (O Treated (chlorine, UV, etc.) O Untreated Disinfection: Date: 7-22-2014 Time: /2:56 Bv Relinquished: Time: (2:56 By: Ha) Date: 7210LY 14 Paid: Received: O Rejected Comments: Condition: Satisfactory This report is for the exclusive use of the party to whom it is addressed.

By submitting a sample for testing to Tauriainen Engineering & Testing, Inc. (TET), the Client agrees to the terms and conditions on reverse To be filed out by sabel Time Test Started: 1635 Analyst: Date Test Started: LLSJ **Analyst TEST RESULTS (SM 9222D)** Date Time Direct Count Colonies/100 ml Negative for Fecal Coliform O Positive for Fecal Coliform - # Colonies 🗹 Unsatisfactory O Satisfactory Comments: