

DOCKETED

ORIGINAL



0000020155

ARIZONA-AMERICAN WATER COMPANY

2003 GENERAL RATE CASE

NOV 20 2003

DOCKET NOS. WS-01303A-02-0867, 0868, 0869, 0870, and 0908

RECEIVED

DOCKETED BY	<i>CA</i>
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RESPONSE TO DATA REQUEST NO. LRH 38

2003 NOV 20 P 2:37

Response provided by: Fredrick K. Schneider

Title: Manager

Company Name: Arizona-American Water Company

Address: 101 Corporate Center, Ste. 201
19820 North 7th Street
Phoenix, Arizona 85024

WS-01303A-02-0867
WS-01303A-02-0868
WS-01303A-02-0869
WS-01303A-02-0870
W-01303A-02-0908

Company Response Number: LRH 38-1

Q. During the public meeting on November 5, 2003 at Anthem, many customers complained of a water quality problem with "brown water." Did such a water quality problem occur? If so, please define the nature of the problem, its cause, the dates and duration of the occurrence(s), and what measures Arizona-American Water Company is taking to prevent a recurrence.

A. Anthem Water Discoloration: On Friday, September 5, 2003, Anthem staff and Anthem customers noticed a yellowish color in the finished water being produced by the Anthem water plant. The source of the color was believed to be due to a change in water quality from the Central Arizona Project (CAP) canal and from Lake Pleasant. Chlorine residual and turbidity samples at the plant were increased immediately to ensure all health and safety standards continued to be adhered to. Distribution sampling for chlorine was also immediately increased. The addition of powder activated carbon to the treatment process began almost immediately to mitigate the effects of any source water issues. An investigation on source water quality also began on September 5th. On Monday the 8th of September (the first day the labs were open) source water samples were taken for metals. The results of these samples confirmed the source of the discolored water. Higher than normal levels of manganese were present in the Lake Pleasant source water.

This occurs because the water being removed from the lake at this time of year is from the lower levels of Lake Pleasant. Water entering the CAP lower gates has almost no oxygen in it due to temperature stratification of the lake. The anoxic water is under reducing conditions which allows the biota in the lake to utilize any available oxygen molecule. The most likely available oxygen being utilized in these conditions are from manganese bicarbonates (MN(HCO3)2) and manganese sulfates (MNSO4). When the natural lake biota utilize available oxygen molecules from these compounds, the

manganese is liberated to the water column. When water containing manganese is treated with chlorine, the water turns yellow. This is the phenomenon experienced at Anthem, the City of Scottsdale and the City of Glendale.

On September 8th, Anthem began using a treatment chemical called potassium permanganate (ppm). This chemical oxidizes the liberated manganese in the water causing it to precipitate out. An immediate improvement was noted with the addition of the ppm. The correct dose of ppm was not immediately known due to changing source water conditions and analysis time needed for the lab to obtain sampling results.

On Saturday, September 13, 2003 color coming from the plant was at non-detectable levels and a system wide flushing program was initiated on September 14th. During this episode it is important to note that the Maricopa County Environmental Services Department and the Arizona Department of Environmental Quality was informed of the situation and was consulted with to find the solution. Microbiologic sampling for that month was tripled to ensure the safety of the water. According to the EPA, the level of manganese in the Anthem drinking water has no ill health effects. This colored water incident was purely an aesthetic problem.

A press release explaining the colored water issue was published in the local newspaper, The Desert Advocate, on September 17th. A notice explaining the issue was mailed to all Anthem residents on September 18th. American Water notified the City's of Phoenix, Scottsdale and Glendale of this source water issue so they could adjust their treatment processes to correct this problem. The City's of Glendale and Scottsdale had discolored water episodes due to this same source water problem.

ARIZONA-AMERICAN WATER COMPANY
2003 GENERAL RATE CASE
DOCKET NOS. WS-01303A-02-0867, 0868, 0869, 0870, and 0908
RESPONSE TO DATA REQUEST NO. LRH 38

Response provided by: Fredrick K. Schneider
Title: Manager
Company Name: Arizona-American Water Company
Address: 101 Corporate Center, Ste. 201
19820 North 7th Street
Phoenix, Arizona 85024

Company Response Number: LRH 38-2

Q. Provide copies of all water testing reports for Anthem from and after September 1, 2003.

A. See the attached reports.

1481333/73244.034

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

07-504
11-11-11

ARIZONA AMERICAN WATER CO.

System ID [9, 3, 05] [09:05] (24 hr clock)

System Name R. Moore

Sample Date [6/3-4/5-3001] Sample Time

Owner/Contact Person 623-465-2408

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone ANI-1 40145 Greshwin Dr

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number []

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/3/03 16:05	9/9/03 16:05	+
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER [0309-08234-001]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: []

Authorized Signature: [*Ru*]

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***
>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

[0171-51014] Arizona American Water Co.
System ID System Name

[09/03/03] [09:22] (24 hr clock) R. Moore
Sample Date Sample Time Owner/Contact Person

~~623-465-3000~~ 623-445-2400
Owner/Contact Fax Number Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone 40104 Integrity Trail
AN1-2
SAMPLING SITE ID

<p align="center">USE IF INITIAL SAMPLE WAS POSITIVE</p> <p>[]</p> <p>Original Violating Specimen Number</p> <p><input type="checkbox"/> Repeat, Original Location</p> <p><input type="checkbox"/> Repeat, Other Location</p> <p><input type="checkbox"/> Repeat, Downstream Location</p> <p><input type="checkbox"/> Repeat, Upstream Location</p> <p><input type="checkbox"/> 400 ml Repeat (Single Tap Only)</p> <p><input type="checkbox"/> 300 ml Repeat (Single Tap Only)</p>

*** MICROBIOLOGICAL ANALYSIS ***
>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/3/03 16:05	9/4/03 16:05	⊖
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<
To be filled out by laboratory personnel

SPECIMEN NUMBER

[0309-08234-002] **Legend Technical Services of Arizona, Inc.**
ID Number [AZ 0/0/0/4] Name:

Comments: []

Authorized Signature: [R. Moore]

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

071-504 Arizona American Water Co

System ID [9103103] [10:36] (24 hr clock)

System Name R. Moore

Sample Date 623-465-3001

Owner/Contact Person 623-445-2400

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone Plymouth DR

AN1-3

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

[]

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/13/03 16:05	9/14/03 16:05	0
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

[0309-08234-003]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: [_____]

Authorized Signature: [*pm*]

Date Public Water System Notified: [_____]

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

0171-15014 Arizona American Water Co.
System ID System Name

913103 [09:45] (24 hr clock) R Moore
Sample Date Sample Time Owner/Contact Person

623-465-3001 623-445-2400
Owner/Contact Fax Number Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN4 - 42413 CROSSWATER WAY
SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/3/03 16:05	9/4/03 16:05	+
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

[0309-08234-004]

ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments: _____

Authorized Signature: [Signature]

Date Public Water System Notified: _____

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***
>>>> PUBLIC WATER SYSTEM INFORMATION <<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

0171-151014 American Water / Anthem
 System ID System Name
 9/10/03 11:39 (24 hr clock) Richard Moore
 Sample Date Sample Time
 623-465-3001
 Owner/Contact Fax Number
 623-445-2474
 Owner/Contact Person Phone Number

SAMPLE TYPE
 Compliance Monitoring

SAMPLE COLLECTION POINT/ID
 Zone
 AWZ-1 3450 Steinbeck Dr
 SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE
 Original Violating Specimen Number
 Repeat, Original Location
 Repeat, Other Location
 Repeat, Downstream Location
 Repeat, Upstream Location
 400 ml Repeat (Single Tap Only)
 300 ml Repeat (Single Tap Only)

*** MICROBIOLOGICAL ANALYSIS ***
 >>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/10/03 1650	9/11/03 1650	0
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			0
9222B	Present/1	Fecal Coliform	3013			0
9221D	Present/1	Fecal Coliform	3013			0

>>>> LABORATORY INFORMATION <<<<
 To be filled out by laboratory personnel

SPECIMEN NUMBER
 0309-08557-001
 ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.
 Comments:
 Authorized Signature:
 Date Public Water System Notified:

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

1071-1510141 System ID American Water / Anthem System Name

9/10/03 Sample Date 11:22 (24 hr clock) Sample Time Richard Moore Owner/Contact Person

623-465-3001 Owner/Contact Fax Number 623-445-3474 Owner/Contact Person Phone Number

SAMPLE TYPE
 Compliance Monitoring

SAMPLE COLLECTION POINT/ID
 Zone

AN2-2 40937 Wild West Tr
SAMPLING SITE ID

<p align="center">USE IF INITIAL SAMPLE WAS POSITIVE</p> <p>Original Violating Specimen Number</p> <p><input type="checkbox"/> Repeat, Original Location</p> <p><input type="checkbox"/> Repeat, Other Location</p> <p><input type="checkbox"/> Repeat, Downstream Location</p> <p><input type="checkbox"/> Repeat, Upstream Location</p> <p><input type="checkbox"/> 400 ml Repeat (Single Tap Only)</p> <p><input type="checkbox"/> 300 ml Repeat (Single Tap Only)</p>
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*** MICROBIOLOGICAL ANALYSIS ***
>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/10/03 11:22	9/11/03 11:20	⊘
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<
To be filled out by laboratory personnel

SPECIMEN NUMBER
0309-08557-002

ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments: _____

Authorized Signature: [Signature]

Date Public Water System Notified: _____

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

0, 7, 1, 5, 0, 4

American Water / Anthem

System ID

System Name

9/10/03 10:35 (24 hr clock)

Richard Moore

Sample Date Sample Time

Owner/Contact Person

623-465-3001

623-445-2474

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN2-3 42520 Cross Timbers Ct

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/10/03 1050	9/11/03 1050	0
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel.

SPECIMEN NUMBER

0309 08557-003

ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments:

Authorized Signature:

Date Public Water System Notified:

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

10171-1510141
System ID

American Water / Anthem
System Name

9/17/03 107:19 (24 hr clock)
Sample Date Sample Time

Richard Moore
Owner/Contact Person

623-465-3001
Owner/Contact Fax Number

623-445-2474
Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

<p align="center">USE IF INITIAL SAMPLE WAS POSITIVE</p> <p>Original Violating Specimen Number</p> <p><input type="checkbox"/> Repeat, Original Location</p> <p><input type="checkbox"/> Repeat, Other Location</p> <p><input type="checkbox"/> Repeat, Downstream Location</p> <p><input type="checkbox"/> Repeat, Upstream Location</p> <p><input type="checkbox"/> 400 ml Repeat (Single Tap Only)</p> <p><input type="checkbox"/> 300 ml Repeat (Single Tap Only)</p>
--

SAMPLE COLLECTION POINT/ID

Zone

AN3-1 40717 Capital Ct
SAMPLING SITE ID

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/17/03 1525	9/17/03 1525	+
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

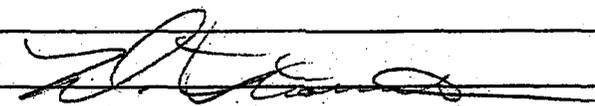
To be filled out by laboratory personnel

SPECIMEN NUMBER

0309-08843-001

ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments:

Authorized Signature: 

Date Public Water System Notified:

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[01/71-15/01/4]

American Water / Anthem

9-17-03 System ID
~~7/19/03~~
0-17-03 Sample Date

[08:13] (24 hr clock)
Sample Time

System Name

Richard Moore

Owner/Contact Person

623-445-2474

623-465-3001
Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN3-2 42017 Emerald Lake Ct

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

- Original Violating Specimen Number
- Repeat, Original Location
- Repeat, Other Location
- Repeat, Downstream Location
- Repeat, Upstream Location
- 400 ml Repeat (Single Tap Only)
- 300 ml Repeat (Single Tap Only)

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/12/03 1525	9/15/03 1525	⊕
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

[0309-08843-002]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: [_____]

Authorized Signature: [_____]

Date Public Water System Notified: [_____]

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

[0,7,15,0,4]

American Water / Anthem

System ID [9,17,03] [08:05] (24 hr clock)

System Name
Richard Woole

Sample Date [623-465-3001]

Owner/Contact Person
623-445-2474

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AW3-3 2915 W Plum Hollow

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

- Original Violating Specimen Number
- Repeat, Original Location
- Repeat, Other Location
- Repeat, Downstream Location
- Repeat, Upstream Location
- 400 ml Repeat (Single Tap Only)
- 300 ml Repeat (Single Tap Only)

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/17/03 1525	9/18/03 1525	0
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<

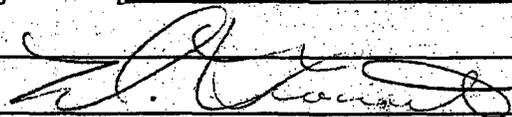
To be filled out by laboratory personnel

SPECIMEN NUMBER

0309-08843003

ID Number [AZ:0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: [_____]

Authorized Signature: []

Date Public Water System Notified: [_____]

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***
>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

[0171-15104] American Water / Anthem
 System ID System Name
 [9/8/03] [12:15] (24 hr clock) Richard Moore
 Sample Date Sample Time
 623-465-3001 623-445-2474
 Owner/Contact Fax Number Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN1-1 40145 Gershwin Dr
 SAMPLING SITE ID

<p align="center">USE IF INITIAL SAMPLE WAS POSITIVE</p> <p>[]</p> <p>Original Violating Specimen Number</p> <p><input type="checkbox"/> Repeat, Original Location</p> <p><input type="checkbox"/> Repeat, Other Location</p> <p><input type="checkbox"/> Repeat, Downstream Location</p> <p><input type="checkbox"/> Repeat, Upstream Location</p> <p><input type="checkbox"/> 400 ml Repeat (Single Tap Only)</p> <p><input type="checkbox"/> 300 ml Repeat (Single Tap Only)</p>

*** MICROBIOLOGICAL ANALYSIS ***
>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/8/03 1450	9/9/03 1650	+
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

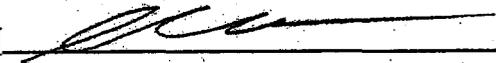
>>>> LABORATORY INFORMATION <<<<<
To be filled out by laboratory personnel

SPECIMEN NUMBER

[0307-08389-001]

ID Number [AZ 0/0/04] Name: [Legend Technical Services of Arizona, Inc.]

Comments: []

Authorized Signature: []

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**
 *** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***
 >>> PUBLIC WATER SYSTEM INFORMATION <<<<
 >>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

1071-191014
 System ID

American Water / Anthem
 System Name

9/8/03 12:22 (24 hr clock)
 Sample Date Sample Time

Richard Moore
 Owner/Contact Person

623-465-3001
 Owner/Contact Fax Number

623-445-2474
 Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN1-2 40104 Integrity Trail
 SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

- Original Violating Specimen Number
- Repeat, Original Location
- Repeat, Other Location
- Repeat, Downstream Location
- Repeat, Upstream Location
- 400 ml Repeat (Single Tap Only)
- 300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/8/03 11:50	7/9/03 11:50	⊘
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

0309-08389-002

Legend Technical Services of Arizona, Inc.

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: []

Authorized Signature: [Signature]

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

[0171-151014]

American Water / Anthem

System ID

System Name

[9 / 8 / 03]

[13 : 40] (24 hr clock)

Richard Moore

Sample Date

Sample Time

Owner/Contact Person

623-445-3001

623-445-2474

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number
 Repeat, Original Location
 Repeat, Other Location
 Repeat, Downstream Location
 Repeat, Upstream Location
 400 ml Repeat (Single Tap Only)
 300 ml Repeat (Single Tap Only)

SAMPLE COLLECTION POINT/ID

Zone

AN1-3 3527 Plymouth Dr

SAMPLING SITE ID

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/8/03 1050	9/9/03 1050	+
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<

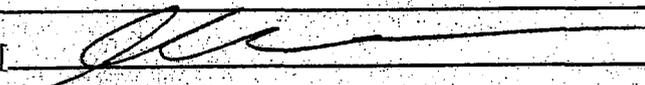
To be filled out by laboratory personnel

SPECIMEN NUMBER

[0309-08389-003]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: []

Authorized Signature: []

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

10/71-1510/41
System ID

American Water / Anthem
System Name

9/8/03 13:10 (24 hr clock)
Sample Date Sample Time

Richard Moore
Owner/Contact Person

623-465-3001
Owner/Contact Fax Number

623-445-2474
Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AW1-4 42413 CrossWater Way
SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/8/03 1650	9/9/03 1050	⊕
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

0309 08389-004

ID Number [AZ.0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments: []

Authorized Signature: []

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[07-1504]

American Water / Anthem

System ID [9/8/03] [12:30] (24 hr clock)

System Name Richard Moore

Sample Date [623-465-3001]

Owner/Contact Person [623-445-2474]

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

<p align="center">USE IF INITIAL SAMPLE WAS POSITIVE</p> <p>[]</p> <p>Original Violating Specimen Number</p> <p><input type="checkbox"/> Repeat, Original Location</p> <p><input type="checkbox"/> Repeat, Other Location</p> <p><input type="checkbox"/> Repeat, Downstream Location</p> <p><input type="checkbox"/> Repeat, Upstream Location</p> <p><input type="checkbox"/> 400 ml Repeat (Single Tap Only)</p> <p><input type="checkbox"/> 300 ml Repeat (Single Tap Only)</p>

SAMPLE COLLECTION POINT/ID

Zone

ANZ-1 3450 Steinbeck Dr

SAMPLING SITE ID

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/8/03 1650	9/9/03 1650	+
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

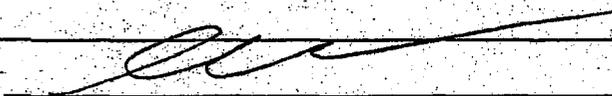
To be filled out by laboratory personnel

SPECIMEN NUMBER

[0309-08389-005]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: [_____]

Authorized Signature: []

Date Public Water System Notified: [_____]

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[0171-151014] American Water / Anthem
System ID System Name

[9/8/03] [17:39] (24 hr clock) Richard Moore
Sample Date Sample Time Owner/Contact Person

623-445-3001 623-445-2474
Owner/Contact Fax Number Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN2-2 40937 Wild West Trail
SAMPLING SITE ID

<p align="center">USE IF INITIAL SAMPLE WAS POSITIVE</p> <p>[]</p> <p>Original Violating Specimen Number</p> <p><input type="checkbox"/> Repeat, Original Location</p> <p><input type="checkbox"/> Repeat, Other Location</p> <p><input type="checkbox"/> Repeat, Downstream Location</p> <p><input type="checkbox"/> Repeat, Upstream Location</p> <p><input type="checkbox"/> 400 ml Repeat (Single Tap Only)</p> <p><input type="checkbox"/> 300 ml Repeat (Single Tap Only)</p>

*** MICROBIOLOGICAL ANALYSIS ***

>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	<u>9/8/03 1650</u>	<u>9/9/03 1650</u>	<u>Ø</u>
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

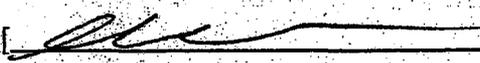
>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

[0309-08289 000]
ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: [_____]

Authorized Signature: []

Date Public Water System Notified: [_____]

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

10/71-15/0/4
System ID

American Water / Anthem
System Name

9/8/03
Sample Date

12:20 (24 hr clock)
Sample Time

Richard Moore
Owner/Contact Person

623-445-
Owner/Contact Fax Number

623-445-2474
Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN2-3 42520 Cross Timbers Ct
SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

- Original Violating Specimen Number
- Repeat, Original Location
- Repeat, Other Location
- Repeat, Downstream Location
- Repeat, Upstream Location
- 400 ml Repeat (Single Tap Only)
- 300 ml Repeat (Single Tap Only)

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/8/03 1450	9/9/03 1450	⊘
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

0207-03389-001

ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments:

Authorized Signature:

Date Public Water System Notified:

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[0, 7, 1, 5, 0, 4]

American Water / Anthem

System ID

System Name

[9, 8, 1, 0, 3]

[12 : 48] (24 hr clock)

Richard Moore

Sample Date

Sample Time

Owner/Contact Person

623-465-3081

623-445-2474

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN3-1 40717 Capital Ct

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/8/03 1050	9/9/03 1050	0
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

[0307-08389-008]

ID Number [AZ 0/0/0/4]

Name:

Legend Technical Services of Arizona, Inc.

Comments:

Authorized Signature:

Date Public Water System Notified:

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***
>>>> PUBLIC WATER SYSTEM INFORMATION <<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[10/71-1510/4]
System ID

American Water / Anthem
System Name

[9/8/03] [13:30] (24 hr clock)
Sample Date Sample Time

Richard Moore
Owner/Contact Person

623-465-3001
Owner/Contact Fax Number

623-445-2474
Owner/Contact Person Phone Number

SAMPLE TYPE
 Compliance Monitoring

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

SAMPLE COLLECTION POINT/ID
 Zone

AN3-2 42017 Emerald Lake Ct
SAMPLING SITE ID

*** MICROBIOLOGICAL ANALYSIS ***
>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/8/03 1650	9/9/03 1650	SB
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			SB

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013	9-8-03 1650	9-9-03 1650	∅
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

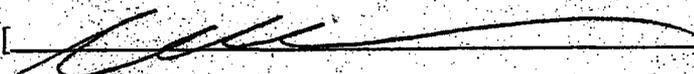
>>>> LABORATORY INFORMATION <<<<
To be filled out by laboratory personnel

SPECIMEN NUMBER

[0309 08339-009]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: []

Authorized Signature: []

Date Public Water System Notified: [9-9-03 Verbal SB]

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

071-15104

American Water / Anthem

System ID

System Name

9/8/03

13:00 (24 hr clock)

Richard Moore

Sample Date

Sample Time

Owner/Contact Person

623-465-3001

623-445-2474

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

USE IF INITIAL SAMPLE WAS POSITIVE

- Original Violating Specimen Number
- Repeat, Original Location
- Repeat, Other Location
- Repeat, Downstream Location
- Repeat, Upstream Location
- 400 ml Repeat (Single Tap Only)
- 300 ml Repeat (Single Tap Only)

SAMPLE COLLECTION POINT/ID

Zone

AN3-3 2915 W Plum Hollow

SAMPLING SITE ID

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/8/03 1650	9/9/03 1650	+
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

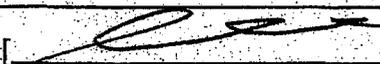
To be filled out by laboratory personnel

SPECIMEN NUMBER

0309-08389-010

ID Number [AZ 0/0/0/4] Name: **Legend Technical Services of Arizona, Inc.**

Comments: []

Authorized Signature: []

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***
 >>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
 >>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

10/7/15/014
System ID

American Water / Anthem
System Name

9/10/03 10:13 (24 hr clock)
Sample Date Sample Time

Richard Moore
Owner/Contact Person

623-465-3001
Owner/Contact Fax Number

623-445-2474
Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN3-2 42017 Emerald Lake Ct
SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

0309-08389-009
Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

C. Donet
10-1-03

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/10/03 11:50	9/11/03 11:50	<input checked="" type="checkbox"/>
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

0309-08557-004

ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments: _____

Authorized Signature: _____

Date Public Water System Notified: _____

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[0,7,-,5,0,4]

American Water / Anthem

System ID

System Name

[9,10,03] [10:24] (24 hr clock)

Richard Moore

Sample Date Sample Time

Owner/Contact Person

623-465-3001

623-445-2474

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

41917 Emerald Lake Ct

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

[0309-08389-009]

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

C. Donet
10-1-03

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/10/03 1050	9/11/03 1050	
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

[0309-08557-006]

ID Number [AZ.0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: []

Authorized Signature: []

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***
>>>> PUBLIC WATER SYSTEM INFORMATION <<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

10/7/15/0/4
System ID

American Water / Anthem
System Name

9/10/03
Sample Date

10:19 (24 hr clock)
Sample Time

Richard Moore
Owner/Contact Person

623 465 3001
Owner/Contact Fax Number

623 465 3474
Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

42035 Emerald Lake Ct
SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

0309-08329-009
Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location C. Dant
10-1-03

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	9/10/03 1050	9/11/03 1050	+
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

0309-08557-005

ID Number [AZ 0/0/0/4] Name: **Legend Technical Services of Arizona, Inc.**

Comments: []

Authorized Signature: []

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

1071-15104

AMERICAN WATER / ANTHEM

System ID

System Name

10/1/03

11:17 (24 hr clock)

Richard Moore

Sample Date

Sample Time

Owner/Contact Person

623-465-3001

623-445-2474

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

ANI-1 40145 Gershwin

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/1/03 1700	10/2/03 1700	PD
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

10310-09335-001

ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments:

Authorized Signature:

Date Public Water System Notified:

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

[0, 7, -1 S, 0, 4]

American Water / Anthem

System ID

System Name

[10, 1, 103]

[11 : 24] (24 hr clock)

Richard Moore

Sample Date

Sample Time

623-465-3005

Owner/Contact Person

623-445-2474

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

ANI-2 40104 Integrity

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/1/03 1700	10/2/03 1700	Ø
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<

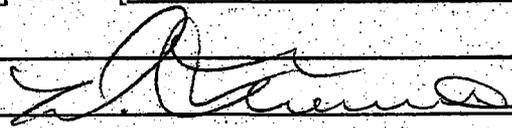
To be filled out by laboratory personnel

SPECIMEN NUMBER

[0310-09335-002]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: [_____]

Authorized Signature: []

Date Public Water System Notified: [_____]

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

10/7/15/0/4

System ID

American Water / Anthem

System Name

10/1/03

Sample Date

11:39 (24 hr clock)

Sample Time

Richard Moore

Owner/Contact Person

623-445-3001

Owner/Contact Fax Number

623-445-2474

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AW-3 3527 Plymouth
SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/1/03 1700	10/1/03 1700	Ø
9222B	Present/1	Total Coliform	3000	10/1/03 1700	10/1/03 1700	Ø
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

0310-09335 003

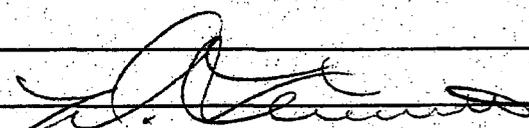
ID Number [AZ 0/0/0/4]

Name:

Legend Technical Services of Arizona, Inc.

Comments:

Authorized Signature:



Date Public Water System Notified:

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

[07, 15, 04]

AMERICAN WATER / ANTHEM

System ID [10, 1, 03] [11 : 57] (24 hr clock)

System Name Richard Moore

Sample Date 623 465 Sample Time 3001

Owner/Contact Person 423-995-2474

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

<p align="center">USE IF INITIAL SAMPLE WAS POSITIVE</p> <p>Original Violating Specimen Number []</p> <p><input type="checkbox"/> Repeat, Original Location</p> <p><input type="checkbox"/> Repeat, Other Location</p> <p><input type="checkbox"/> Repeat, Downstream Location</p> <p><input type="checkbox"/> Repeat, Upstream Location</p> <p><input type="checkbox"/> 400 ml Repeat (Single Tap Only)</p> <p><input type="checkbox"/> 300 ml Repeat (Single Tap Only)</p>
--

SAMPLE COLLECTION POINT/ID

Zone

AN1-4 42413 CrossWater

SAMPLING SITE ID

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/1/03 1700	10/2/03 1700	0
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

[0310-09335-004]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: [_____]

Authorized Signature: [[Signature]]

Date Public Water System Notified: [_____]

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[0171-151014]

AZ AMERICAN

System ID

[1019103]

[10:13] (24 hr clock)

System Name

R. MOORE

Sample Date

623-465-3001

Sample Time

Owner/Contact Person

623-465-2400

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN2-2 40937 Wild West TR.

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

***** MICROBIOLOGICAL ANALYSIS *****

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/9/03 1000	10/10/03 1635	0
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

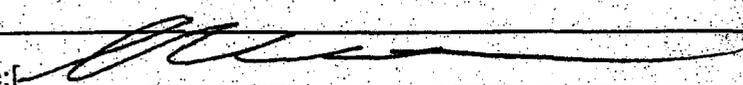
To be filled out by laboratory personnel

SPECIMEN NUMBER

[0310-09688-002]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: []

Authorized Signature: []

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

10171-151014 AZ AMERICAN
System ID System Name

1019103 9:08 (24 hr clock) R. MOORE
Sample Date Sample Time Owner/Contact Person

623-465-3001 623-465-2100
Owner/Contact Fax Number Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

AN2-3 42520 CROSS TIMBERS CT.
SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

[]
Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/9/03 1600	10/10/03 11035	<i>[Signature]</i>
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

0310 09688 003
ID Number [AZ-0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments: []

Authorized Signature: [*[Signature]*]

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

0171-15104
System ID

Arizona American Water Company
System Name

10/15/03 10:45 (24 hr clock)
Sample Date Sample Time

R Moore
Owner/Contact Person

623-465-3001
Owner/Contact Fax Number

623-445-2400
Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

<p align="center">USE IF INITIAL SAMPLE WAS POSITIVE</p> <p>Original Violating Specimen Number</p> <p><input type="checkbox"/> Repeat, Original Location</p> <p><input type="checkbox"/> Repeat, Other Location</p> <p><input type="checkbox"/> Repeat, Downstream Location</p> <p><input type="checkbox"/> Repeat, Upstream Location</p> <p><input type="checkbox"/> 400 ml Repeat (Single Tap Only)</p> <p><input type="checkbox"/> 300 ml Repeat (Single Tap Only)</p>
--

SAMPLE COLLECTION POINT/ID

Zone

AN3-1 40717 Capital CT
SAMPLING SITE ID

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/15/03 1655	10/16/03 1655	Ø
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<

To be filled out by laboratory personnel

SPECIMEN NUMBER

0310-09836-001

ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments: _____

Authorized Signature: [Signature]

Date Public Water System Notified: _____

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

07504
1-1-1-1-1

Arizona American Water Company

System ID: 101503
Sample Time: 11:05 (24 hr clock)

System Name: R. Moore

Sample Date: 6-23-465-3001

Owner/Contact Person: 623-445-2400

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE
X Compliance Monitoring

SAMPLE COLLECTION POINT/ID
Zone: AN3-2
42017 Emerald Ct

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number []

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

SAMPLING SITE ID

*** MICROBIOLOGICAL ANALYSIS ***
>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/15/03 1655	10/16/03 1635	0
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<
To be filled out by laboratory personnel

SPECIMEN NUMBER

0310-09878-002

ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments: [Signature]

Authorized Signature: [Signature]

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<<
>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<<

017-15104 Arizona American Water
 System ID System Name
 10/15/03 11:35 (24 hr clock) R. Moore
 Sample Date Sample Time Owner/Contact Person
 623-445-3001 623-445-2400
 Owner/Contact Fax Number Owner/Contact Person Phone Number

SAMPLE TYPE
 Compliance Monitoring

SAMPLE COLLECTION POINT/ID
 Zone 2915 W Plum Hollow
AW3-3
 SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number []

Repeat, Original Location
 Repeat, Other Location
 Repeat, Downstream Location
 Repeat, Upstream Location
 400 ml Repeat (Single Tap Only)
 300 ml Repeat (Single Tap Only)

*** MICROBIOLOGICAL ANALYSIS ***
 >>>> To be filled out by laboratory personnel <<<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/15/03 11:35	10/16/03 11:35	⊕
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<<
 To be filled out by laboratory personnel

SPECIMEN NUMBER

[0310-09878-003]
 ID Number [AZ 0/0/0/4] Name: Legend Technical Services of Arizona, Inc.

Comments: []

Authorized Signature: [[Signature]]

Date Public Water System Notified: []

**ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT**

*** SAMPLES MUST BE TAKEN IN DISTRIBUTION SYSTEM ONLY ***

>>>> PUBLIC WATER SYSTEM INFORMATION <<<<

>>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[0171-151014]

AZ AMERICAN

System ID

System Name

[10/9/03]

[8:33] (24 hr clock)

R. MOORE

Sample Date

Sample Time

Owner/Contact Person

623-465-3001

623-465-2400

Owner/Contact Fax Number

Owner/Contact Person Phone Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

3709 GLACIER CT.

SAMPLING SITE ID

USE IF INITIAL SAMPLE WAS POSITIVE

Original Violating Specimen Number

Repeat, Original Location

Repeat, Other Location

Repeat, Downstream Location

Repeat, Upstream Location

400 ml Repeat (Single Tap Only)

300 ml Repeat (Single Tap Only)

*** MICROBIOLOGICAL ANALYSIS ***

>>>> To be filled out by laboratory personnel <<<<

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	Total Coliform	3000	10/9/03 1600	10/10/03 1635	Ø
9222B	Present/1	Total Coliform	3000			
9221D	Present/1	Total Coliform	3000			

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contaminant Name	Cont. Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1	E. Coli	3013			
9222B	Present/1	Fecal Coliform	3013			
9221D	Present/1	Fecal Coliform	3013			

>>>> LABORATORY INFORMATION <<<<

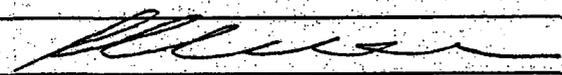
To be filled out by laboratory personnel

SPECIMEN NUMBER

[0310-00688-004]

ID Number [AZ 0/0/0/4] Name: [Legend Technical Services of Arizona, Inc.]

Comments: [_____]

Authorized Signature: []

Date Public Water System Notified: [_____]

LEGEND

Technical Services of Arizona, Inc.

17631 North 25th Avenue • Phoenix, AZ • 85023
(602) 324-6100 • F (602) 324-6101 • ADHS# AZ0004

4837 East 5th St., Ste 103 • Tucson, AZ • 85711
(520) 327-1234 • F (520) 327-0518 • ADHS# AZ0004

Arizona-American Water Company
19820 N. 7th Street, Suite 201
Phoenix, AZ 85024

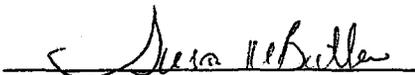
Received: 9/08/03
Reported: 9/24/03
Invoice No: 101132

Attn: Charles Donat

Project Name: Surface Water Analysis

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
Matrix:	Surface Water				
Sample No:	0309-08398-001				
Sample ID:	ANRAW (CAP INF Pipe)				
					Time Sampled: 15:00
					Date Sampled: 9/08/2003
Chloride	SM 4500-CL B	81.	mg/L	5.	9/09/03
Color	SM 2120 B	20.	C.U.	1.	9/09/03
Fluoride	SM 4500-F C	0.3	mg/L	0.1	9/10/03
Sulfate	EPA 375.4	228.	mg/L	50.	9/09/03
Total Dissolved Solids	SM 2540C	588.	mg/L		9/10/03
Dissolved Oxygen	EPA 360.1	8.90	mg/L	0.01	9/09/03
pH	EPA 150.1	8.3	Std Unit		9/10/03
Temperature	EPA 170.1	20.4	Degrees C		9/10/03
Total Alkalinity (as CaCO3)	SM 2320B	144.	mg/L	10.	9/11/03
Aluminum	EPA 200.7	<0.2	mg/L	0.2	9/08/03
Arsenic	EPA 200.9	0.002	mg/L	0.002	9/08/03
Calcium	EPA 200.7	72.	mg/L	1.	9/08/03
Copper	EPA 200.7	<0.01	mg/L	0.01	9/08/03
Iron	EPA 200.7	0.07	mg/L	0.05	9/08/03
Magnesium	EPA 200.7	29.	mg/L	1.	9/08/03
Manganese	EPA 200.7	0.27	mg/L	0.02	9/08/03
Silver	EPA 200.7	<0.04	mg/L	0.04	9/08/03
Zinc	EPA 200.7	<0.02	mg/L	0.02	9/08/03
Hardness, Calcium	SM 2340B	180.	mg/L	2.5	9/08/03
Hardness, Total (Ca & Mg)	SM 2340B	299.	mg/L	7.	9/08/03
Langlier Index	CALCULATION	0.753		-5	9/12/03
Methyl Isoborneol	GC/MS	<5.0 T5	ng/L	5.0	9/12/03
Geosmin	GC/MS	<5.0 T5	ng/L	5.0	9/12/03

MIB and Geosmin analyzed by Environmental Health Labs, South Bend, IN; ADHS No. AZ#0432.



Authorized Signatory

LEGEND

Technical Services of Arizona, Inc.

17631 North 25th Avenue • Phoenix, AZ • 85023
(602) 324-6100 • F (602) 324-6101 • ADHS# AZ0004

4837 East 5th St., Ste 103 • Tucson, AZ • 85711
(520) 327-1234 • F (520) 327-0518 • ADHS# AZ0004

Arizona-American Water Company
19820 N. 7th Street, Suite 201
Phoenix, AZ 85024

Received: 9/09/03
Reported: 9/30/03
Invoice No: 101340

Attn: Charles Donat

Project Name: Arizona-American Water Co.

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
Matrix:	Surface Water				
Sample No:	0309-08473-001			Time Sampled: 12:00	
Sample ID:	WACANAL (Anthem Turnout)			Date Sampled: 9/09/2003	
Chloride	SM 4500-CL B	80.	mg/L	5.	9/11/03
Color	SM 2120 B	15.	C.U.	1.	9/10/03
Fluoride	SM 4500-F C	0.3	mg/L	0.1	9/10/03
Sulfate	EPA 375.4	228.	mg/L	50	9/10/03
Total Dissolved Solids	SM 2540C	603.	mg/L		9/10/03
Dissolved Oxygen	EPA 360.1	8.86	mg/L	0.01	9/10/03
pH	EPA 150.1	7.8	Std Unit		9/10/03
Temperature	EPA 170.1	20.8	Degrees C		9/10/03
Total Alkalinity (as CaCO3)	SM 2320B	142.	mg/L	10.	9/19/03
Aluminum	EPA 200.7	<0.2	mg/L	0.2	9/12/03
Arsenic	EPA 200.9	0.002	mg/L	0.002	9/12/03
Calcium	EPA 200.7	66.	mg/L	1.	9/12/03
Copper	EPA 200.7	<0.01	mg/L	0.01	9/12/03
Hardness, Calcium	SM 2340B	165	mg/L	2.5	9/12/03
Hardness, Total (Ca & Mg)	SM 2340B	276.	mg/L	7.	9/12/03
Iron	EPA 200.7	0.08	mg/L	0.05	9/12/03
Langlier Index	CALCULATION	0.209		-5.	9/30/03
Magnesium	EPA 200.7	27.	mg/L	1.	9/12/03
Manganese	EPA 200.7	0.18	mg/L	0.02	9/12/03
Silver	EPA 200.7	<0.04	mg/L	0.04	9/12/03
Zinc	EPA 200.7	<0.02	mg/L	0.02	9/12/03



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Arizona-American Water Company
19820 N. 7th Street, Suite 201
Phoenix, AZ 85024

Received: 9/15/03
Reported: 9/25/03
Invoice No: 101186

Attn: Charles Donat

Project Name: AN Water Special Sampling

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
Matrix:	Drinking Water				
Sample No:	0309-08722-001			Time Sampled: 15:45	
Sample ID:	ANPOE1			Date Sampled: 9/15/2003	
pH	EPA 150.1	8.1	Std Unit		9/16/03
Temperature	EPA 170.1	20.7	Degrees C		9/16/03
Color	SM 2120 B	5.	C.U.	1.	9/16/03
Sulfate	EPA 300.0	238.	mg/L	25.	9/17/03
Total Dissolved Solids	SM 2540C	560.	mg/L		9/22/03
Calcium	EPA 200.7	69.	mg/L	1.	9/24/03
Iron	EPA 200.7	0.05	mg/L	0.02	9/24/03
Langlier Index	CALCULATION	0.535		-5.	9/24/03
Manganese	EPA 200.7	0.04	mg/L	0.02	9/24/03
Filtration for Diss Metals					
Iron, Dissolved	EPA 200.7	0.05	mg/L	0.02	9/24/03
Manganese, Dissolved	EPA 200.7	0.02	mg/L	0.02	9/24/03
Total Alkalinity (as CaCO3)	SM 2320B	144.	mg/L	10.	9/19/03

Matrix: Surface Water
Sample No: 0309-08722-002
Sample ID: ANRAWCAP

Time Sampled: 15:55
Date Sampled: 9/15/2003

pH	EPA 150.1	7.6	Std Unit		9/16/03
Temperature	EPA 170.1	20.3	Degrees C		9/16/03
Color	SM 2120 B	25.	C.U.	1.	9/16/03
Total Dissolved Solids	SM 2540C	520.	mg/L		9/22/03
Filtration for Diss Metals					
Iron, Dissolved	EPA 200.7	0.05	mg/L	0.02	9/24/03
Manganese, Dissolved	EPA 200.7	0.07	mg/L	0.02	9/24/03
Sulfate	EPA 300.0	231.	mg/L	25.	9/17/03
Total Alkalinity (as CaCO3)	SM 2320B	143.	mg/L	10.	9/19/03
Calcium	EPA 200.7	66.	mg/L	1.	9/24/03
Hardness, Calcium	SM 2340B	165	mg/L	2.5	9/24/03
Hardness, Total (Ca & Mg)	SM 2340B	272.	mg/L	7.	9/24/03
Iron	EPA 200.7	0.10	mg/L	0.02	9/24/03

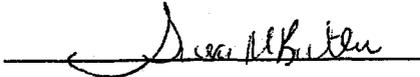
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PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
Matrix:	Surface Water				
Sample No:	0309-08722-002			Time Sampled: 15:55	
Sample ID:	ANRAWCAP			Date Sampled: 9/15/2003	
Langlier Index	CALCULATION	0.012		-5.	9/24/03
Magnesium	EPA 200.7	26.	mg/L	1.	9/24/03
Manganese	EPA 200.7	0.26	mg/L	0.02	9/24/03



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Arizona-American Water Company
19820 N. 7th Street, Suite 201
Phoenix, AZ 85024

Received: 10/02/03
Reported: 0/00/00
Invoice No: 000000

Attn: Troy Day

Project Name: Waddell Canal

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
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Matrix: Surface Water
Sample No: 0310-09352-001
Sample ID: WC 2

Time Sampled: 8:10
Date Sampled: 10/02/2003

Filtration for Diss Metals					
Iron, Dissolved	EPA 200.7	0.07	mg/L	0.05	10/04/03
Manganese, Dissolved	EPA 200.7	0.31	mg/L	0.02	10/04/03
Iron	EPA 200.7	0.13	mg/L	0.05	10/04/03
Manganese	EPA 200.7	0.31	mg/L	0.02	10/04/03
Methyl Isoborneol	GC/MS	<5.0	ng/L	5.0	10/06/03
Geosmin	GC/MS	11.	ng/L	5.0	10/06/03

MIB and Geosmin analyzed by Environmental Health Labs, South Bend, IN; ADHS No. AZ#0432.

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Arizona-American Water Company
19820 N. 7th Street, Suite 201
Phoenix, AZ 85024

Received: 10/03/03
Reported: 0/00/00
Invoice No: 000000

Attn: Troy Day

Project Name: Waddell Canal

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
Matrix:	Surface Water				
Sample No:	0310-09401-001				
Sample ID:	WC3				
					Time Sampled: 8:55
					Date Sampled: 10/03/2003
Metals Digestion for ICP	EPA 200.7				10/06/03
Iron	EPA 200.7	0.12	mg/L	0.05	10/04/03
Manganese	EPA 200.7	0.35	mg/L	0.02	10/04/03
Filtration for Diss Metals					
Iron, Dissolved	EPA 200.7	0.07	mg/L	0.05	10/04/03
Manganese, Dissolved	EPA 200.7	0.33	mg/L	0.02	10/04/03
Methyl Isoborneol	GC/MS	5.8	ng/L	5.0	10/06/03
Geosmin	GC/MS	7.	ng/L	5.0	10/06/03

MIB and Geosmin analyzed by Environmental Health Labs, South Bend, IN; ADHS No. AZ#0432.

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Arizona-American Water Company
19820 N. 7th Street, Suite 201
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Received: 9/08/03
Reported: 9/11/03
Invoice No: 100660

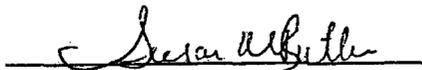
Attn: Charles Donat

Project Name: Anthem Bactis

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
Matrix: Drinking Water					
Sample No: 0309-08395-001				Time Sampled: 15:37	
Sample ID: Anthem 1 (Anthem Elementary)				Date Sampled: 9/08/2003	
Colilert	SM 9223B	0	P/A		9/08/03
Matrix: Drinking Water					
Sample No: 0309-08395-002				Time Sampled: 15:48	
Sample ID: Anthem 2 (Gavilan Peak School)				Date Sampled: 9/08/2003	
Colilert	SM 9223B	0	P/A		9/08/03

NOTE: Interpretation of Colilert Results

- 0 = Negative for Coliform bacteria
- 1 = Positive for Coliform bacteria and Negative for E.coli (fecal bacteria)
- 2 = Positive for Coliform bacteria and Positive for E.coli (fecal bacteria)



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Arizona-American Water Company
Anthem
19820 N. 7th Street, Suite 201
Phoenix, AZ 85024
Attn: Troy Day

Received: 9/15/03
Reported: 9/17/03
Invoice No: 100885

Project Name: Anthem Microbiological Analysis

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
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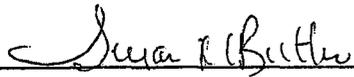
Matrix: Drinking Water
Sample No: 0309-08717-001
Sample ID: 2470 W. Warren Ln.

Time Sampled: 13:30
Date Sampled: 9/15/2003

Colilert	SM 9223B	0	P/A		9/15/03
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NOTE: Interpretation of Colilert Results

- 0 = Negative for Coliform bacteria
- 1 = Positive for Coliform bacteria and Negative for E.coli (fecal bacteria)
- 2 = Positive for Coliform bacteria and Positive for E.coli (fecal bacteria)



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Arizona-American Water Company
Anthem
19820 N. 7th Street, Suite 201
Phoenix, AZ 85024
Attn: Troy Day

Received: 9/22/03
Reported: 9/25/03
Invoice No: 101200

Project Name: Anthem

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
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Matrix: Drinking Water
Sample No: 0309-08986-001
Sample ID: 3709 W. Glacier Ct.

Time Sampled: 14:30
Date Sampled: 9/22/2003

Colilert	SM 9223B	0	P/A		9/22/03
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NOTE: Interpretation of Colilert Results

- 0 = Negative for Coliform bacteria
- 1 = Positive for Coliform bacteria and Negative for E.coli (fecal bacteria)
- 2 = Positive for Coliform bacteria and Positive for E.coli (fecal bacteria)



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Arizona-American Water Company
19820 N. 7th Street, Suite 201
Phoenix, AZ 85024

Received: 9/23/03
Reported: 9/25/03
Invoice No: 101217

Attn: Charles Donat

Project Name: AN Special Bacti.

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
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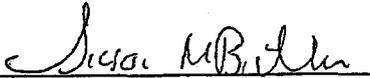
Matrix: Drinking Water
Sample No: 0309-09038-001
Sample ID: 42812 Courage Tr.

Time Sampled: 10:35
Date Sampled: 9/23/2003

Colilert	SM 9223B	0	P/A		9/23/03
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NOTE: Interpretation of Colilert Results

- 0 = Negative for Coliform bacteria
- 1 = Positive for Coliform bacteria and Negative for E.coli (fecal bacteria)
- 2 = Positive for Coliform bacteria and Positive for E.coli (fecal bacteria)



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Arizona-American Water Company
19820 N. 7th Street, Suite 201
Phoenix, AZ 85024

Received: 9/25/03
Reported: 9/30/03
Invoice No: 101374

Attn: Troy Day

Project Name: Anthem-Waddell

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
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Matrix: Surface Water
Sample No: 0309-09137-001
Sample ID: WC

Time Sampled: 8:20
Date Sampled: 9/25/2003

Filtration for Diss Metals

Iron, Dissolved	EPA 200.7	0.06	mg/L	0.02	9/30/03
Manganese, Dissolved	EPA 200.7	0.22	mg/L	0.02	9/30/03
Methyl Isoborneol	GC/MS	ND	ng/L	5.0	9/26/03
Geosmin	GC/MS	11	ng/L	5.0	9/26/03
Iron	EPA 200.7	0.11	mg/L	0.02	9/30/03
Manganese	EPA 200.7	0.25	mg/L	0.02	9/30/03

Geosmin & 2-Methylisoborneol (MIB) analyzed by Environmental Health Labs, South Bend, IN;
ADHS No. AZ#0432.



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Arizona-American Water Company
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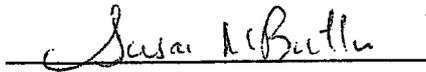
Received: 10/02/03
Reported: 10/13/03
Invoice No: 101721

Attn: Troy Day

Project Name: Waddell Canal

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
Matrix:	Surface Water				
Sample No:	0310-09352-001			Time Sampled: 8:10	
Sample ID:	WC 2			Date Sampled: 10/02/2003	
Filtration for Diss Metals					
Iron, Dissolved	EPA 200.7	0.07	mg/L	0.05	10/04/03
Manganese, Dissolved	EPA 200.7	0.31	mg/L	0.02	10/04/03
Iron	EPA 200.7	0.13	mg/L	0.05	10/04/03
Manganese	EPA 200.7	0.31	mg/L	0.02	10/04/03
Methyl Isoborneol	GC/MS	<5.0	ng/L	5.0	10/06/03
Geosmin	GC/MS	11.	ng/L	5.0	10/06/03

MIB and Geosmin analyzed by Environmental Health Labs, South Bend, IN; ADHS No. AZ#0432.



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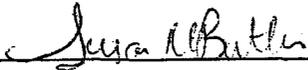
Received: 10/03/03
Reported: 10/13/03
Invoice No: 101726

Attn: Troy Day

Project Name: Waddell Canal

PARAMETER	METHOD	RESULTS	UNITS	PQL	DATE ANALYZED
Matrix:	Surface Water				
Sample No:	0310-09401-001			Time Sampled: 8:55	
Sample ID:	WC3			Date Sampled: 10/03/2003	
Metals Digestion for ICP	EPA 200.7				10/06/03
Iron	EPA 200.7	0.12	mg/L	0.05	10/04/03
Manganese	EPA 200.7	0.35	mg/L	0.02	10/04/03
Filtration for Diss Metals					
Iron, Dissolved	EPA 200.7	0.07	mg/L	0.05	10/04/03
Manganese, Dissolved	EPA 200.7	0.33	mg/L	0.02	10/04/03
Methyl Isoborneol	GC/MS	5.8	ng/L	5.0	10/06/03
Geosmin	GC/MS	7.	ng/L	5.0	10/06/03

MIB and Geosmin analyzed by Environmental Health Labs, South Bend, IN; ADHS No. AZ#0432.



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