

ORIGINAL



0000076837

SERVICEBERRY WATER CO.

P.O. BOX 1270 SHOW LOW, AZ 85902/PHONE 928-537-8739/FAX 928-537-1245

57

August 20, 2007

ACC Docket Control: DOCKET NUMBER W-02481A-05-0446

Attached are the monthly lab results for the total coliform analysis, applicable to the month of July 2007 for the Serviceberry Water System. This is in accordance with decision number 68335. If this information is not sufficient, you may contact me by any of the methods mentioned in the header of this letter. Thank you.

Sincerely,

Thomas Grapp

RECEIVED

2007 SEP 10 A 11: 36

AZ CORP COMMISSION
DOCKET CONTROL

Arizona Corporation Commission
DOCKETED

SEP 10 2007

DOCKETED BY	nr
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ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY
DRINKING WATER MICROBIOLOGICAL ANALYSIS REPORT

SAMPLES TO BE TAKEN IN DISTRIBUTION SYSTEM ONLY

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

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

011-1054

Serviceberry

System ID

System Name

7/31/07

17:22

Sample Date

Sample Time

Mark Grapp

Owner / Contact Person Name

928 537-8739

Owner / Contact Person Phone Number

()

Owner / Contact Fax Number

SAMPLE TYPE

Compliance Monitoring

SAMPLE COLLECTION POINT/ID

Zone

MIL 1

SAMPLE SITE ID

Report to ADEQ

Do not Rpt to ADEQ

Report to EPA

Initial _____

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	Contamination Name	Cont Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1 1 or more Coliform	Total Coliform	3000	8/1/07 0920	8/2/07 0920	0

ONLY REPORT FECAL RESULT IF TOTAL COLIFORM RESULT IS POSITIVE

Analysis Method	MCL Value	Contamination Name	Cont Code	Test Start Date/Time	Analysis Run Date/Time	Result
9223B	Present/1 1 or more Coliform	E. Coli or Fecal Coliform	3013			

>>>>LABORATORY INFORMATION<<<<

To Be filled out by laboratory personnel

SPECIMEN NUMBER

CH7-1409

Received Temp.

3 °C

Date / Time Received

8/1/07 0910

ID Number: AZ 0037

Mohave Environmental Lab - 200 N. 2nd St. Ste. B - Holbrook, AZ 86025

Comments: [_____]

Authorized Signature: [_____]

Date Public Water System Notified: [_____]

*All units must be reported in milligrams per liter.