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| | | | | | | | | | | |
|--|-----------------|-------------|-------------------------|------------|-----------------------|-------------------|------------------|----------------------|----------------|--|
| Lab Sample#: 1711158-01 | Sample Address: | | Sample Point: | | Surface: | | | | | |
| Sample Matrix: DW-H20 | | | | | | | | | | |
| Description: 327 WILLIAMS POND ROAD KITCHEN FAUCET | | | Sample Date: 08/14/2017 | | Sample Time: 12:40:00 | | | | | |
| Test (Method)/Analyte | Result | Unit | Qualifiers | MCL | RL | High Limit | Low Limit | Analysis Date | Analyst | |
| <i>DW_Anions_IC (300.0)</i> | | | | | | | | | | |
| Nitrite Nitrogen | <0.05 | mg/L | | 1 | 0.05 | | | 08/15/2017 15:55:00 | T.J. | |
| Nitrate Nitrogen | 0.09 | mg/L | | 10 | 0.05 | | | 08/15/2017 15:55:00 | T.J. | |
| E. coli (9223 B) | Negative | | | | | | | 08/15/2017 12:22:00 | J.C. | |
| Coliform, Total (9223 B) | Negative | | | | | | | 08/15/2017 12:22:00 | J.C. | |



Your water is considered satisfactory for all tests analyzed and listed above.

(Does not apply to unanalyzed or rejected samples - See results column and any comments)

The term 'Satisfactory' is based on the Maine Drinking Water Regulations, State Toxicologist's Guidelines and/or the Federal Safe Drinking Water Act

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Units & Measurement

"mg/L" = Milligrams per liter;

"ug/L" = Micrograms per Liter;

"mg/Kg" = Milligrams per Kilogram;

"ug/Kg" = Micrograms per Kilogram;

"NTU" = Nephelometric Turbidity Units;

"pCi/L" = Picocuries per Liter;

The MCL, Maximum Contaminant Level is listed for comparing your results with recommended levels.

In the "Qualifier" column, an " ** " is placed to indicate any results that **exceed** this MCL.

If there are no " * " in the "Qualifier" column, your water is considered satisfactory for those tests.

All solid results are reported on a "Dry Weight" basis.

RL-Reporting Limit is the lowest concentration which can be reliably reported on a routine basis.

"<" = Less than ">" = Greater than

MCL - Maximum Contaminant Level is the highest level allowed by EPA for public water supplies. Also used here as the maximum advisory limit set by the Maine Centers for Disease Control and Prevention.

Note: Results below the advisory limit, including < and J are considered satisfactory for that parameter.

Disclaimer

Your report consists of the number of pages listed on the cover page. Any attachments after the last numbered page are for informational purposes only and not part of the formal report.

The results in this report are for the submitted sample(s) only.

This report shall not be reproduced, except in full, without written permission from the Maine Health and

Qualifiers Legend:

User selectable

| Code | Description |
|------|------------------------------------|
| * | > Secondary Limit |
| ** | > MCL |
| ~ | Approximately |
| Ach | Above Calibration Curve |
| B | Blank Contamination |
| Hi | |
| J | <RL>MDL |
| Lo | |
| Nan | Not Analyzed |
| Nc | Not Confirmed |
| Nt | NonTarget Compound |
| R | Rejected |
| Rec | Recovery |
| T | Temperature does not meet criteria |
| U | Undetected |



Maine Center for Disease
Control and Prevention
An Office of the
Department of Health and Human Services

DEPARTMENT OF HEALTH & HUMAN SERVICES
HEALTH & ENVIRONMENTAL TESTING LABORATORY
TEL: (207) 287-1716 FAX: (207) 287-1884

PAID

WILLIAMS POND LODGE
PO BOX 461
BUCKSPORT, ME 04446
TSA
1711158
WALK-IN W
A-02
This kit expires on: 7/10/2018

DATE REC'D @ LAB **AUG 15 2017 AM 11:29**

Kit contains evidence of Thermal Preservation: Y N
TEMP UPON ARRIVAL @ LAB 21.5 °C
() NAME AND ADDRESS (IF NOT ON LABEL)
() CHANGE OF NAME OR ADDRESS
() SEND ADDITIONAL COPY

NAME: David A. Weeda
STREET: 327 Williams Pond Road
TOWN: Bucksport
ZIP CODE: 04416
PHONE (EVE): (207) 460-6064
E-MAIL: _____

DO NOT REMOVE THIS LABEL

PHONE (DAY): _____

() PLEASE CHECK HERE IF YOU WOULD LIKE A SIMPLIFIED FINAL REPORT

Date Collected: 8-14-2017 Collector's Name: David Weeda

Time Collected: 12:40 P.M. (circle one)

Test Address: 327 Williams Pond Road City: Bucksport zip: 04416

Chlorine Treatment: None () Bleach () Chlorinator () Other

Location: (Kitchen faucet, Outside Spigot, Pressure Tank, etc...) Kitchen faucet

Sample Source: (Circle one) Drilled Well Dug Well, Spring, Lake, Other

Comments: _____

COLLECTION PROCEDURE

- Whenever possible, collect the sample from a faucet. It is difficult to obtain a satisfactory sample directly from the well or spring or from a hand pump. If the faucet is equipped with a strainer or aerator, remove before collecting sample.
- Disinfect the faucet by dipping the end in a capful of bleach before turning on water. {This is optional, but a good idea.}
- Allow water to run 5 minutes to clear pipes.
- All bottles must be filled to the shoulder and filled from the same sample point. Do not rinse out bottles.
- Fill in all requested information above especially the date and time collected.
- Without the sample date and time we will have to reject your sample(s) and mail you a replacement kit.
- We must receive your sample within 30 hours of collection.
- **DO NOT COLLECT AND MAIL YOUR SAMPLE ON A FRIDAY OR SATURDAY OR THE DAY BEFORE OR ON A HOLIDAY.** Lists of State holidays are on the back of this form.

SEE BACK FOR ADDITIONAL INSTRUCTIONS AND WHEN TO EXPECT LABORATORY RESULTS