

Report Prepared for:

Susan Henderson
National Testing Laboratories
6571 Wilson Mills Road
Cleveland OH 44143

**REPORT OF
LABORATORY
ANALYSIS FOR
2,3,7,8-TCDD**

Report Summary:

Enclosed are analytical results of one drinking water sample analyzed for 2,3,7,8-TCDD content. This sample was analyzed according to Method 1613B by High Resolution Gas Chromatography/High Resolution Mass Spectrometry.

The results reported for this sample and the associated quality control samples were all within the criteria described in Method 1613B. If you have any questions or concerns regarding these results, please contact Joanne Richardson, your Pace Project Manager. This report was revised to change Clacier to Glacier.

Pace Project Number:

10329950

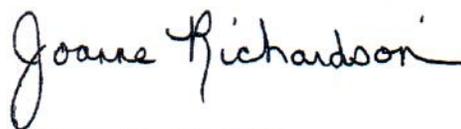
Report Prepared Date:

November 20, 2015

Product Source

Sample ID: 347426
Source Name: Glacier Spring Water
Source Location: Scottsdale AZ
PWS ID: N/A
Laboratory Sample ID: 10329950001
Date Sampled: 11/09/2015 @ 13:22
Date Received: 11/13/2015 @ 09:00

This report has been reviewed by:



November 20, 2015

Joanne Richardson,
(612) 607-6453
(612) 607-6444 (fax)



Report of Laboratory Analysis

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The results relate only to the samples included in this report.



Minnesota Laboratory Certifications

Authority	Certificate #	Authority	Certificate #
A2LA	2926.01	Mississippi	MN00064
Alabama	40770	Montana	92
Alaska	MN00064	Nebraska	
Arizona	AZ0014	Nevada	MN_00064_200
Arkansas	88-0680	New Jersey (NE)	MN002
California	01155CA	New York (NEL)	11647
Colorado	MN00064	North Carolina	27700
Connecticut	PH-0256	North Dakota	R-036
EPA Region 8	8TMS-Q	Ohio	4150
Florida (NELAP)	E87605	Oklahoma	D9922
Georgia (DNR)	959	Oregon (ELAP)	MN200001-005
Guam	959	Oregon (OREL)	MN300001-001
Hawaii	SLD	Pennsylvania	68-00563
Idaho	MN00064	Puerto Rico	MN00064
Illinois	200012	Saipan	MP0003
Indiana	C-MN-01	South Carolina	74003001
Indiana	C-MN-01	Tennessee	TN02818
Iowa	368	Texas	T104704192-08
Kansas	E-10167	Utah (NELAP)	MN00064
Kentucky	90062	Virginia	00251
Louisiana	03086	Washington	C755
Maine	2007029	West Virginia	9952C
Maryland	322	Wisconsin	999407970
Michigan	9909	Wyoming	8TMS-Q
Minnesota	027-053-137		

REPORT OF LABORATORY ANALYSIS

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Reporting Flags

- A = Reporting Limit based on signal to noise
- B = Less than 10x higher than method blank level
- C = Result obtained from confirmation analysis
- D = Result obtained from analysis of diluted sample
- E = Exceeds calibration range
- I = Interference present
- J = Estimated value
- Nn = Value obtained from additional analysis
- P = PCDE Interference
- R = Recovery outside target range
- S = Peak saturated
- U = Analyte not detected
- V = Result verified by confirmation analysis
- X = %D Exceeds limits
- Y = Calculated using average of daily RFs
- * = See Discussion

REPORT OF LABORATORY ANALYSIS

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CHAIN OF CUSTODY

Initiated by: Client National Testing Laboratories, Ltd. Other

10329950

SAMPLE #	COLLECTION		SAMPLE SITE DESCRIPTION	TYPES OF SAMPLES: DRINKING WATER = D SOIL SAMPLE = S GROUND WATER = G SLUDGE/WASTE = W POOL WATER = P OTHER TYPE = O	# OF CONTAINERS	TEST(S) REQUESTED PER SAMPLE (X)
	DATE	TIME				
37426	9-5	3:2	2067541		2	Dioxin
347553	11-11-15	1430	2068859		2	
2			4			5
3						

RECEIVER SIGNATURE CONFIRMS THAT THE BOTTLES RECEIVED ARE CONSISTENT WITH THE REQUIRED TESTING PROTOCOL.		DATE	TIME
SHIPPED BY: (Signature)	RECEIVED BY: (Signature)	DATE	TIME
(2) <i>Jenn L. Ingle</i>	(5) <i>[Signature]</i>	11-12-15	1600
RECEIVED BY: (Signature)	RELINQUISHED BY: (Signature)	DATE	TIME
(3) <i>Emily [Signature]</i>	(6) <i>[Signature]</i>	11/14/15	9:00
	RECEIVED BY: (Signature)	DATE	TIME
	(7) <i>[Signature]</i>		

S in tr to 0 rse side →

Order Number: 2067541

Order Date: 09/21/2015

347426

Sample Number:



Product: 50 DDBP

Paid: Yes Method: MasterCard

P.O.:

TSR: SBW

Scottsdale

AZ 85255

Date Sampled: 11/9/2015

Time Sampled: 11:22 Please Use Military Time, e.g. 3:00pm = 15:00

Check Time Zone: EST CST MST PST

Source Water Information:

PWS ID# (if applicable): _____

Source Name: GLADES SPRING WATER

City & State: _____

Sample Collected By: [Signature]
(If Different than Above)
(Signature)

Sample Collected By: Dr. Sean Southland
(Please Print)

Sample Temperature: 72° F Field pH: 8.2

Measured at Source By: [Signature]

Form Completed By: [Signature]

Additional Comments: Dr. Sean Southland

For Laboratory Use ONLY	
Lab Accounting Information:	
Payment \$:	_____
Check #:	_____
Lab Comments/Special Instructions:	
2015 Source Water Annual	
State Forms:	
5°	
Lab Sample Information:	
Date Received:	<u>11/10/15</u>
Time Received:	<u>10:20</u>
Received By:	<u>AP</u>
<input checked="" type="checkbox"/> Sample receipt criteria checked & acceptable. <input type="checkbox"/> Deviations from acceptable sample receipt criteria noted on PSA form.	

INCOMPLETE INFORMATION MAY DELAY ANALYSIS AND/OR INVALIDATE RESULTS

Sample Condition Upon Receipt Client Name: National Technology Laboratories Project #: _____
 Courier: Fed Ex UPS USPS Client
 Commercial Pace Speedee Other: _____
 Tracking Number: 1Z AW 921 01 8633 2268

WO#: 10329950

 10329950

Custody Seal on Cooler/Box Present? Yes No
 Packing Material: Bubble Wrap Bubble Bags
 Thermometer Used: 888A9130516413 888A912167504
 888A0143310098
 Cooler Temp Read (°C): 3.2 Cooler Temp Corrected Correction Factor: 0
 Temp should be above freezing to 6°C
 USDA Regulated Soil (N/A, water sample)
 Did samples originate in a quarantine zone within the United States: A MS, NC, NM, NY, OK, OR, SC, TN, TX or WA (check maps)?
 If Yes to either question, fill out a Regulated

	M	i	h	UR	pp	COMMENTS:
Chain of Custody Present?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	1.		
Chain of Custody Filled Out?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	2.		
Chain of Custody Relinquished?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	3.		
Sampler Name and/or Signature on COC?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	4.		
Samples Arrived within Hold Time?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	5.		
Short Hold Time Analysis (<72 hr)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A	6.		
Rush Turn Around Time Requested?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A	7.		
Sufficient Volume?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	8.		
Correct Containers Used?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	9.		
-Pace Containers Used?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A			
Containers Intact?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	10.		
Filtered Volume Received for Dissolved Tests?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	11.		Note if sediment is visible in the dissolved container
Sample Labels Match COC? -Includes Date/Time/ID/Analysis Matrix:	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> N/A	12.		No Date/Time
All containers needing acid/base preservation have been checked? All containers needing preservation are found to be in compliance with EPA recommendation? (HNO ₃ , H ₂ SO ₄ , HCl<2; NaOH>9 Sulfide, NaOH>12 Cyanide) Exceptions: VOA, Coliform, TOC, Oil and Grease, DRO/8015 (water) DOC	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	13.		<input type="checkbox"/> HNO ₃ <input type="checkbox"/> H ₂ SO ₄ <input type="checkbox"/> NaOH <input type="checkbox"/> HCl
Headspace in VOA Vials (>6mm)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	14.		Initial when completed: Lot # of added preservative:
Trip Blank Present?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	15.		
Trip Blank Custody Seals Present?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A			
Pace Trip Blank Lot # (if purchased):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A			

CLIENT NOTIFICATION/RESOLUTION
 Person Contacted: _____
 Comments/Resolution: _____

Project Manager Review: [Signature]
 Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy hold, incorrect preservative, out of temp, incorrect containers.)

11 13 15

ANALYTICAL RESULTS - RADIOCHEMISTRY

Project: 2067541
Pace Project No.: 30164919

Sample: 347426 **Lab ID: 30164919001** Collected: 11/09/15 13:22 Received: 11/11/15 10:00 Matrix: Drinking Water
PWS: Site ID: Sample Type:

Comments: • Sample collection dates and times were not present on the sample containers.
• Upon receipt at the laboratory, 6 mls of nitric acid were added to the samples to meet the sample preservation requirement of pH <2 for radiological analyses.

Parameters	Method	Act ± Unc (MDC) Carr Trac	Units	Analyzed	CAS No.	Qual
Gross Alpha	EPA 900.0	1.86 ± 0.813 (1.18) C:NA T:NA	pCi/L	12/01/15 07:18	12587-46-1	
Gross Beta	EPA 900.0	1.17 ± 0.666 (1.18) C:NA T:NA	pCi/L	12/01/15 07:18	12587-47-2	
Radium-226	EPA 903.1	-0.119 ± 0.402 (0.890) C:NA T:90%	pCi/L	12/01/15 20:59	13982-63-3	
Radium-228	EPA 904.0	0.433 ± 0.308 (0.617) C:85% T:83%	pCi/L	12/01/15 18:35	15262-20-1	

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ANALYTICAL RESULTS - RADIOCHEMISTRY

Project: 2067541
Pace Project No.: 30165088

Sample: 347426 Lab ID: 30165088001 Collected: 11/09/15 13:22 Received: 11/13/15 10:00 Matrix: Drinking Water
PWS: Site ID: Sample Type:

Comments: • Sample collection dates and times were not present on the sample containers.
• The sample was received outside the recommended holding time for radon.

Parameters	Method	Act ± Unc (MDC) Carr Trac	Units	Analyzed	CAS No.	Qual
Radon	SM 7500Rn-B	15.6 ± 46.6 (80.0) C:NA T:NA	pCi/L	11/14/15 05:53	10043-92-2	

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