Phone: (360) 733-1205 Fax: (888) 818-2978

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 54895

Sample: 7377 Scott Pl.

Client:

Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Email: john@watersystemservices.net

Invoice Number: 25-15547

PO Number:

Project Name:

Approved By:

Report Date: 8/27/2025

Sample Information

Date Collected: 8/25/2025 Date Received: 8/26/2025

Sample Collected by: IC Source Number:

Sample Purpose: Investigative

Sample Type: Post Treatment/Finished Water Sample Chlorine Res:

Sample Composition: Coliform Samples

Sample Collection: Flowing
Suitability: Yes

System Number: 27755

Lab #: 54895		Sample: 7377 Scott Pl.								
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved			
TOTAL COLIFORM	Satisfactory	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			
E. COLI	Absent	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			

Phone: (360) 733-1205 Fax: (888) 818-2978

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 54896

Sample: 7457 Canyon View Dr.

Client: Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Email: john@watersystemservices.net

Invoice Number: 25-15547

PO Number:

Project Name:

Approved By:

Report Date: 8/27/2025

Sample Information

Date Collected: 8/25/2025 Date Received: 8/26/2025

Sample Collected by: IC Source Number:

Sample Purpose: Investigative

Sample Type: Post Treatment/Finished Water Sample Chlorine Res:

Sample Composition: Coliform Samples

Sample Collection: Flowing
Suitability: Yes

System Number: 27755

Lab #: 54896		Sample: 7457 Canyon View Dr.							
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved		
TOTAL COLIFORM	Satisfactory	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025		
E. COLI	Absent	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025		

Phone: (360) 733-1205 Fax: (888) 818-2978

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 54897

Sample: West Reservoir Out

Client: Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Email: john@watersystemservices.net

Invoice Number: 25-15547

PO Number:

Project Name:

Approved By:

Report Date: 8/27/2025

Sample Information

Date Collected: 8/25/2025 Date Received: 8/26/2025

Sample Collected by: IC Source Number:

Sample Purpose: Investigative

Sample Type: Post Treatment/Finished Water Sample Chlorine Res:

Sample Composition: Coliform Samples

Sample Collection: Flowing
Suitability: Yes

System Number: 27755

Lab #: 54897		Sample:	Sample: West Reservoir Out							
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved			
TOTAL COLIFORM	Satisfactory	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			
E. COLI	Absent	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			

Phone: (360) 733-1205 Fax: (888) 818-2978

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 54898

Sample: East Reservoir Out

Client:

Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Email: john@watersystemservices.net

Invoice Number: 25-15547

PO Number:

Project Name:

Approved By:

Report Date: 8/27/2025

Sample Information

Date Collected: 8/25/2025 Date Received: 8/26/2025

Sample Collected by: IC Source Number:

Sample Purpose: Investigative

Sample Type: Post Treatment/Finished Water Sample Chlorine Res:

Sample Composition: Coliform Samples

Sample Collection: Flowing
Suitability: Yes

System Number: 27755

Lab #: 54898		Sample:	Sample: East Reservoir Out							
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved			
TOTAL COLIFORM	Satisfactory	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			
E. COLI	Absent	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			

Phone: (360) 733-1205 Fax: (888) 818-2978

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 54899

Sample: Reservoir In

Client:

Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Email: john@watersystemservices.net

Invoice Number: 25-15547

PO Number:

Project Name:

Approved By:

Report Date: 8/27/2025

Sample Information

Date Collected: 8/25/2025 Date Received: 8/26/2025

Sample Collected by: IC Source Number:

Sample Purpose: Investigative

Sample Type: Post Treatment/Finished Water Sample Chlorine Res:

Sample Composition: Coliform Samples

Sample Collection: Flowing
Suitability: Yes

System Number: 27755

Lab #: 54899		Sample: Reservoir In							
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved		
TOTAL COLIFORM	Satisfactory	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025		
E. COLI	Absent	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025		

Phone: (360) 733-1205 Fax: (888) 818-2978

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 54900

Sample: 7554 Olsen Dr.

Client: Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Email: john@watersystemservices.net

Invoice Number: 25-15547

PO Number:

Project Name:

Approved By:

Report Date: 8/27/2025

Sample Information

Date Collected: 8/25/2025 Date Received: 8/26/2025

Sample Collected by: IC Source Number:

Sample Purpose: Investigative

Sample Type: Post Treatment/Finished Water Sample Chlorine Res:

Sample Composition: Coliform Samples

Sample Collection: Flowing
Suitability: Yes

System Number: 27755

Lab #: 54900	554 Olsen Dr.						
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	Unsatisfactory	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025
E. COLI	Absent	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025

Phone: (360) 733-1205 Fax: (888) 818-2978

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 54901

Sample: 7481 Miller Way

Client:

Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Email: john@watersystemservices.net

Invoice Number: 25-15547

PO Number:

Project Name:

Approved By:

Report Date: 8/27/2025

Sample Information

Date Collected: 8/25/2025 Date Received: 8/26/2025

Sample Collected by: IC Source Number:

Sample Purpose: Investigative

Sample Type: Post Treatment/Finished Water Sample Chlorine Res:

Sample Composition: Coliform Samples

Sample Collection: Flowing
Suitability: Yes

System Number: 27755

Lab #: 54901		Sample: 7481 Miller Way								
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved			
TOTAL COLIFORM	Satisfactory	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			
E. COLI	Absent	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			

Phone: (360) 733-1205 Fax: (888) 818-2978

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 54902

Sample: 7480 Glacier Springs Dr.

Client: Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Email: john@watersystemservices.net

Invoice Number: 25-15547

PO Number:

Project Name:

Approved By:

Report Date: 8/27/2025

Sample Information

Date Collected: 8/25/2025 Date Received: 8/26/2025

Sample Collected by: IC Source Number:

Sample Purpose: Investigative

Sample Type: Post Treatment/Finished Water Sample Chlorine Res:

Sample Composition: Coliform Samples

Sample Collection: Flowing
Suitability: Yes

System Number: 27755

Lab #: 54902		Sample:	Sample: 7480 Glacier Springs Dr.							
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved			
TOTAL COLIFORM	Satisfactory	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			
E. COLI	Absent	/100ml	1	SM_9223B	KR	8/27/2025	8/27/2025			