

Phone: (360) 733-1205 Fax: (888) 818-2978 Email: lab@exactscientific.com

Water Bacteriological Analysis

john@watersystemservices.net

174 14348

Sample:	East Reservoir Out	Invoice Number:	24-04126
Client:	Glacier Springs Water System	PO Number:	
	PO Box 126	Project Name:	
	Maple Falls, WA 98226	Report Date:	3/7/2024
Dhanay	260 720 2022		VnA
Phone:	360-739-3933		

Approved By:

dur tata

Sample Information			
Date Collected:	3/5/2024	Date Received:	3/6/2024
Sample Collected by:	IC	Source Number:	0
Sample Purpose:	Investigative		
Sample Type:	Post Treatment/Finished Water Sample	Chlorine Res:	
Sample Composition:	Coliform Samples		
Sample Collection:	Flowing		
Suitability:	Yes		

System Number: 27755

Email:

Lab #: 14348		Sample: E	Sample: East Reservoir Out				
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	3/7/2024	
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	3/7/2024	



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Sample:	West Reservoir Out	Invoice Number:	24-04126
Client:	Glacier Springs Water System	PO Number:	
	PO Box 126	Project Name:	
	Maple Falls, WA 98226	Report Date:	3/7/2024
			$1 \cap A$
Phone:	360-739-3933		

Approved By:

which takas

Sample Information			
Date Collected:	3/5/2024	Date Received:	3/6/2024
Sample Collected by:	IC	Source Number:	0
Sample Purpose:	Investigative		
Sample Type:	Post Treatment/Finished Water Sample	Chlorine Res:	
Sample Composition:	Coliform Samples		
Sample Collection:	Flowing		
Suitability:	Yes		

System Number: 27755

Email:

Lab #: 14349		Sample: W	Sample: West Reservoir Out				
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	3/7/2024	
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	3/7/2024	



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Water Bacteriological Analysis

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174 14350

Sample:	Reservoir In	Invoice Number:	24-04126
Client:	Glacier Springs Water System	PO Number:	
	PO Box 126	Project Name:	
	Maple Falls, WA 98226	Report Date:	3/7/2024
			$1 \cap 1$
Phone:	360-739-3933		VA A

Approved By:

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Sample Information			
Date Collected:	3/5/2024	Date Received:	3/6/2024
Sample Collected by:	IC	Source Number:	0
Sample Purpose:	Investigative		
Sample Type:	Post Treatment/Finished Water Sample	Chlorine Res:	
Sample Composition:	Coliform Samples		
Sample Collection:	Flowing		
Suitability:	Yes		

System Number: 27755

Email:

Lab #: 14350	Sample: R	Sample: Reservoir In				
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	3/7/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	3/7/2024



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Water Bacteriological Analysis

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174 14351

Sample:	7457 Canyon View Dr.	Invoice Number:	24-04126
Client:	Glacier Springs Water System	PO Number:	
	PO Box 126	Project Name:	
	Maple Falls, WA 98226	Report Date:	3/7/2024
			VADA
Phone:	360-739-3933		\sqrt{n}

Approved By:

durt tata

Sample Information			
Date Collected:	3/5/2024	Date Received:	3/6/2024
Sample Collected by:	IC	Source Number:	0
Sample Purpose:	Routine Compliance		
Sample Type:	Post Treatment/Finished Water Sample	Chlorine Res:	
Sample Composition:	Coliform Samples		
Sample Collection:	Flowing		
Suitability:	Yes		

System Number: 27755

Email:

Lab #: 14351	Sample: 7	Sample: 7457 Canyon View Dr.				
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	3/7/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	3/7/2024