

Water Bacteriological Analysis

174 72483

Sample: WEST RESERVOIR OUT
Client: Glacier Springs Water System
 PO Box 126
 Maple Falls, WA 98226
Phone: 360-739-3933
Email: john@watersystems-services.net

Invoice Number: 24-20751
PO Number:
Project Name:
Report Date: 11/5/2024

Approved By: 

Sample Information

Date Collected: 11/4/2024 Date Received: 11/4/2024
 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 **System Name: GLACIER SPRINGS WATER SYSTEM**

Lab #: 72483		Sample: WEST RESERVOIR OUT					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024

Water Bacteriological Analysis

174 72484

Sample: EAST RESERVOIR OUT
Client: Glacier Springs Water System
 PO Box 126
 Maple Falls, WA 98226
Phone: 360-739-3933
Email: john@watersystems-services.net

Invoice Number: 24-20751
PO Number:
Project Name:
Report Date: 11/5/2024

Approved By: 

Sample Information

Date Collected:	11/4/2024	Date Received:	11/4/2024
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
System Name: GLACIER SPRINGS WATER SYSTEM

Lab #: 72484		Sample: EAST RESERVOIR OUT					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024

Water Bacteriological Analysis

174 72485

Sample: RESERVOIR IN
Client: Glacier Springs Water System
PO Box 126
Maple Falls, WA 98226
Phone: 360-739-3933
Email: john@watersystems-services.net

Invoice Number: 24-20751
PO Number:
Project Name:
Report Date: 11/5/2024

Approved By: 

Sample Information

Date Collected: 11/4/2024 Date Received: 11/4/2024
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 **System Name: GLACIER SPRINGS WATER SYSTEM**

Lab #: 72485		Sample: RESERVOIR IN					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	1.0	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024

Water Bacteriological Analysis

174 72486

Sample: 7554 OLSEN DR
Client: Glacier Springs Water System
PO Box 126
Maple Falls, WA 98226

Phone: 360-739-3933
Email: john@watersystems-services.net

Invoice Number: 24-20751
PO Number:
Project Name:
Report Date: 11/5/2024

Approved By:



Sample Information

Date Collected:	11/4/2024	Date Received:	11/4/2024
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

System Name: GLACIER SPRINGS WATER SYSTEM

Lab #: 72486		Sample: 7554 OLSEN DR					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024

Water Bacteriological Analysis

174 72487

Sample: 7457 CANYON VIEW DR
Client: Glacier Springs Water System
 PO Box 126
 Maple Falls, WA 98226

Invoice Number: 24-20751
PO Number:
Project Name:
Report Date: 11/5/2024

Phone: 360-739-3933
Email: john@watersystems-services.net

Approved By: 

Sample Information

Date Collected: 11/4/2024 Date Received: 11/4/2024
 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 **System Name: GLACIER SPRINGS WATER SYSTEM**

Lab #: 72487		Sample: 7457 CANYON VIEW DR					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024

Water Bacteriological Analysis

174 72488

Sample: 7377 SCOTT PLACE
Client: Glacier Springs Water System
 PO Box 126
 Maple Falls, WA 98226
Phone: 360-739-3933
Email: john@watersystems-services.net

Invoice Number: 24-20751
PO Number:
Project Name:
Report Date: 11/5/2024

Approved By: 

Sample Information

Date Collected:	11/4/2024	Date Received:	11/4/2024
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
System Name: GLACIER SPRINGS WATER SYSTEM

Lab #: 72488		Sample: 7377 SCOTT PLACE					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024

Water Bacteriological Analysis

174 72489

Sample: 7481 MILLER WAY
Client: Glacier Springs Water System
 PO Box 126
 Maple Falls, WA 98226
Phone: 360-739-3933
Email: john@watersystems-services.net

Invoice Number: 24-20751
PO Number:
Project Name:
Report Date: 11/5/2024

Approved By: 

Sample Information

Date Collected: 11/4/2024 Date Received: 11/4/2024
 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 **System Name: GLACIER SPRINGS WATER SYSTEM**

Lab #: 72489		Sample: 7481 MILLER WAY					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024

Water Bacteriological Analysis

174 72490

Sample: 7480 GLACIER SPRINGS DR
Client: Glacier Springs Water System
PO Box 126
Maple Falls, WA 98226
Phone: 360-739-3933
Email: john@watersystems-services.net

Invoice Number: 24-20751
PO Number:
Project Name:
Report Date: 11/5/2024

Approved By: 

Sample Information

Date Collected: 11/4/2024 Date Received: 11/4/2024
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

System Name: GLACIER SPRINGS WATER SYSTEM

Lab #: 72490		Sample: 7480 GLACIER SPRINGS DR					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SJ	11/5/2024	11/5/2024