



**Exact Scientific Services, Inc.**

1355 Pacific Place  
Suite 101  
Ferndale, WA 98248

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

## Water Bacteriological Analysis

**174 14714**

**Sample:** 7377 Scott Pl.  
**Client:** Glacier Springs Water System  
PO Box 126  
Maple Falls, WA 98226

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

**Invoice Number:** 25-04477  
**PO Number:**  
**Project Name:**  
**Report Date:** 3/19/2025

**Approved By:**

### Sample Information

Date Collected:	3/18/2025	Date Received:	3/18/2025
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 #: 14714		Sample: 7377 Scott Pl.					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025



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## Water Bacteriological Analysis

**174 14715**

**Sample:** 7457 Canyon View Dr.  
**Client:** Glacier Springs Water System  
PO Box 126  
Maple Falls, WA 98226

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

**Invoice Number:** 25-04477  
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**Report Date:** 3/19/2025

**Approved By:**

### Sample Information

Date Collected:	3/18/2025	Date Received:	3/18/2025
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 #: 14715		Sample: 7457 Canyon View Dr.					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025



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## Water Bacteriological Analysis

**174 14716**

**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:** 25-04477  
**PO Number:**  
**Project Name:**  
**Report Date:** 3/19/2025

**Approved By:**

### Sample Information

Date Collected:	3/18/2025	Date Received:	3/18/2025
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 #: 14716		Sample: West Reservoir Out					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025



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## Water Bacteriological Analysis

**174 14717**

**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:** 25-04477  
**PO Number:**  
**Project Name:**  
**Report Date:** 3/19/2025

**Approved By:**

### Sample Information

Date Collected:	3/18/2025	Date Received:	3/18/2025
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 #: 14717		Sample: East Reservoir Out					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025



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## Water Bacteriological Analysis

**174 14718**

**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:** 25-04477  
**PO Number:**  
**Project Name:**  
**Report Date:** 3/19/2025

**Approved By:**

### Sample Information

Date Collected:	3/18/2025	Date Received:	3/18/2025
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 #: 14718		Sample: Reservoir In					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025



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## Water Bacteriological Analysis

**174 14719**

**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:** 25-04477  
**PO Number:**  
**Project Name:**  
**Report Date:** 3/19/2025

**Approved By:**

### Sample Information

Date Collected:	3/18/2025	Date Received:	3/18/2025
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 #: 14719		Sample: 7554 Olsen Dr.					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025



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## Water Bacteriological Analysis

**174 14720**

**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:** 25-04477  
**PO Number:**  
**Project Name:**  
**Report Date:** 3/19/2025

**Approved By:**

### Sample Information

Date Collected:	3/18/2025	Date Received:	3/18/2025
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 #: 14720		Sample: 7481 Miller Way					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025



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## Water Bacteriological Analysis

**174 14721**

**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:** 25-04477  
**PO Number:**  
**Project Name:**  
**Report Date:** 3/19/2025

**Approved By:**

### Sample Information

Date Collected:	3/18/2025	Date Received:	3/18/2025
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 #: 14721		Sample: 7480 Glacier Springs Dr.					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	3/19/2025	3/19/2025