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

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 17773

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: 25-05381

PO Number:

Project Name:

Approved By:

Report Date: 4/2/2025

Sample Information

Date Collected: 4/1/2025 Date Received: 4/1/2025

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 #: 17773	Sample: 7	Sample: 7377 Scott PI							
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved		
TOTAL COLIFORM	5.2	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025		
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025		

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

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 17774

Sample: 7457 Canyon View Dr

Client: Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226 Report Date:

Phone: (360) 739-3933

Email: john@watersystemservices.net

Invoice Number:

PO Number:

Project Name:

25-05381

4/2/2025

Approved By:

Sample Information

Date Collected: 4/1/2025 Date Received: 4/1/2025

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

Lab #: 17774		Sample: 7	ew Dr				
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	2.0	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025

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

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 17775

Sample: West Reservoir Out

Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Client:

Email: john@watersystemservices.net

Invoice Number: 25-05381

PO Number:

Project Name:

Report Date: 4/2/2025

Approved By:

Sample Information

Date Collected: 4/1/2025 Date Received: 4/1/2025

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

Lab #: 17775 Sample: West Reservoir Out							
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	9.8	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025

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

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 17776

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: 25-05381

PO Number:

Project Name:

Approved By:

Report Date: 4/2/2025

Sample Information

Date Collected: 4/1/2025 Date Received: 4/1/2025

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

Lab #: 17776							
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	6.3	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025

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

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 17777

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: 25-05381

PO Number:

Project Name:

Approved By:

Report Date: 4/2/2025

Sample Information

Date Collected: 4/1/2025 Date Received: 4/1/2025

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

Lab #: 17777	Sample: R	Sample: Reservoir In						
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved	
TOTAL COLIFORM	8.6	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025	
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025	

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

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 17778

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: 25-05381

PO Number:

Project Name:

Approved By:

Report Date: 4/2/2025

Sample Information

Date Collected: 4/1/2025 Date Received: 4/1/2025

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

Lab #: 17778	Sample: 7	554 Olsen Dr					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	3.0	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025

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

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174 17779

Water Bacteriological Analysis

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: 25-05381

PO Number:

Project Name:

Approved By:

Report Date: 4/2/2025

Sample Information

Date Collected: 4/1/2025 Date Received: 4/1/2025

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

Lab #: 17779		Sample: 7	Sample: 7481 Miller Way							
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved			
TOTAL COLIFORM	3.0	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025			
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025			

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

Email: lab@exactscientific.com

Water Bacteriological Analysis

174 17780

Sample: 7480 Glacier Springs

Glacier Springs Water System

PO Box 126

Maple Falls, WA 98226

Phone: (360) 739-3933

Client:

Email: john@watersystemservices.net

Invoice Number: 25-05381

PO Number:

Project Name:

Approved By:

Report Date: 4/2/2025

Sample Information

Date Collected: 4/1/2025 Date Received: 4/1/2025

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 #: 17780	Sample: 7	Sample: 7480 Glacier Springs						
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved	
TOTAL COLIFORM	5.2	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025	
E. COLI	<1	/100ml	1	SM_9223B_Q	KR	4/2/2025	4/2/2025	