



Building 535A
P.O. Box 5000
Upton, NY 11973-5000
Phone 631 344-4225
Fax 631 344-5812
zimmerman@bnl.gov

managed by Brookhaven Science Associates
for the U.S. Department of Energy

www.bnl.gov

May 10, 2000

Ms. Kathleen Newcomer
Suffolk County Department of Health Services
Drinking Water Supply Section
220 Rabro Drive East
Hauppauge, New York 11788

Dear Ms. Newcomer:

SUBJECT: Monthly Water Treatment Plant Reports

Reference: Suffolk County Minimum Monitoring Requirements for April 2000

In accordance with the requirements of the BNL Potable Water System Sampling Plan and the 2000 SCDHS Minimum Monitoring Requirements for the BNL Potable Water Supply, included please find the following attachments for your records:

- Attachment I: BNL Potable Water Monthly Bacteriological and Operational Reports for April 2000;
- Attachment II: April 2000 Biweekly Water Quality Monitoring Data for BNL Potable Water Wells and Quarterly Water Quality Data for the BNL Distribution System;
- Attachment III: 2000 Second Quarter Principal Organic Compound Analyses for BNL Potable Water Wells.

May 10, 2000

All analytical results have been reviewed and have been found to be within New York State Department of Health Drinking Water Standards (NYSDOH DWS). Collection and analysis of these samples are performed in accordance with the guidelines of the BNL Quality Assurance (QA) program, the SCDHS Community Water Supply Monitoring Requirements, and the BNL Potable Water System Sampling Plan. Routine monitoring samples are collected by Plant Engineering Division (PE) personnel using standard operating procedures and analyses are performed by a contractor laboratory using standard methods of analysis. The QA documentation is available from the Environmental Services Division (ESD) and PE Divisions. Based on this information, we believe the values contained in these reports are representative of the BNL potable water system.

Should there be any questions regarding this report or the analytical or operational data contained herein, please call either R. Lee (ESD) at (631) 344-3148, M. Allocco (ESD) at (631) 344-3166, or W. Chaloupka (PE) at (631) 344-7136.

Sincerely,



E. A. Zimmerman, CEP, REM, CEA, CESM
Division Manager

EAZ/MA:rt

Attachments: As noted

cc: K. Brog w/o attachments
W. Chaloupka w/attachments
R. Lee w/attachments
E. Murphy w/attachments
P. Ponturo, SCDHS, w/o attachments
L. Ross w/o attachments
R. Simeone w/attachments

EC4120.00



ATTACHMENT I

**Brookhaven National Laboratory
Potable Water Supply**

**Monthly Bacteriological and Operational
Reports for April 2000**

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169

STATION 11515100

SUFFOLK COUNTY

REPORTING PERIOD :

APRIL 2000

LOCATION: WATER TREATMENT PLANT

Did an emergency occur in any part of the water system? yes no

Source: Ground Water

Does the system have a chlorination waiver? yes no

Day of month	CHLORINATION				pH		Totalizer Daily Totalizer 11771632
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl ₂ Residual mg/l	Lime Sodium Hydroxide		
		Gallons	Cl ₂ use per 24hrs				
1	0						
2	0						
3	66	200/110	1	0.8	7.9	11771698	
4	1,655	200/99	11	0.7	7.9	11773353	
5	1,663	200/82	17	0.6	7.9	11775016	
6	1,643	200/63	19	0.6	8	11776659	
7	1,721	200/50+10	13	0.4	7.8	11778380	
8	0						
9	0						
10	502	60/185	15	0.3	7.2	11778882	
11	1,600	60/170	15	0.59	7.2	11780482	
12	1,588	60/152	18	0.6	7.4	11782070	
13	1,088	60/142	10	0.74	7.5	11783158	
14	1,392	60/122	20	0.77	7.5	11784550	
15	0						
16	0						
17	3,909	60/80	42	0.5	7.3	11788459	
18	1,586	60/60	20	0.8	7.5	11790045	
19	1,624	60/45+155	15	0.56	7.5	11791669	
20	1,593	60/190	10	0.74	7.5	11793262	
21	1,606	60/175	15	0.82	7.4	11794868	
22	0						
23	0						
24	4,358	60/135	40	0.5	7.5	11799226	
25	1,556	60/120	15	0.83	7.6	11800782	
26	1,549	60/105	15	0.8	7.7	11802331	
27	1,581	60/95	10	0.8	7.7	11803912	
28	1,558	60/82	13	1.2	7.8	11805470	
29	0						
30	0						
31	4,766	60/40	42	0.7	7.4	11810236	
TOT	38,604		376				
AVG	1286.80		12.53	No. Days	30		

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes No

If yes, check reason's below.

___ Actual number of samples fewer than required.

___ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

___ Failure to analyze repeat samples.

Does an MCL violation exist? no

If yes, check reason(s) below.

___ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

___ Positive E. Coli result followed by a positive total coliform repeat sample.

___ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: J. A. Barr

Date: 5-8-00

Title: WATER SYSTEMS SUPERVISOR

Cert. #: 05650

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169 STATION 11515100 SUFFOLK COUNTY REPORTING PERIOD : APRIL 2000

LOCATION: WELL NO. 6

Did an emergency occur in any part of the water system? yes _____ no ✓
 Does the system have a chlorination waiver? yes _____ no ✓

Source: Ground Water

Day of month	CHLORINATION				pH		Totalizer Daily Totalizer
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl ₂ Residual	___ Lime ___ Sodium Hydroxide	Totalizer	
		Gallons	Cl ₂ use per 24hrs	mg/l			
		125					8044
1	0						
2	0						
3	0	125	0	0.2	6.3		8044
4	489	120	5	0.2	6.3		8533
5	694	114	6	0.2	6.2		9227
6	635	110	4	0.2	6.2		9862
7	1,193	94	16	0	6.3		11055
8	0						
9	0						
10	965	82	12	0	6.3		12020
11	919	52	30	0	5.9		12939
12	998	40+80	12	0.07	5.9		13937
13	754	110	10	0.01	5.9		14691
14	541	100+80	10	0.01	5.9		15232
15	0						
16	0						
17	1,730	151	29	0.9	6		16962
18	630	141	10	0.1	6		17592
19	581	131+37	10	0.07	6		18173
20	693	160	8	0.07	6		18866
21	635	143	17	0.06	5.9		19501
22	0						
23	0						
24	870	130	13	0	5.9		20371
25	247	125	5	0.09	5.9		20618
26	286	120	5	0	6.1		20904
27	409	110	10	0	5.9		21313
28	493	100	10	0	5.9		21806
29	0						
30	0						
31	1,570	72	28	0	5.8		23376
TOT	15,332		250				0
AVG.	511.07		8.33	No. Days	30		

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes _____ No ✓

If yes, check reason's below.

___ Actual number of samples fewer than required.

___ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

___ Failure to analyze repeat samples.

Does an MCL violation exist? NO

If yes, check reason(s) below.

___ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

___ Positive E. Coli result followed by a positive total coliform repeat sample.

___ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: J.R. Rosa

Date: 5-8-00

Title: WATER SYSTEMS SUPERVISOR

Cert. #: 05650

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169 STATION 11515100 SUFFOLK COUNTY REPORTING PERIOD : APRIL 2000

LOCATION: WELL NO. 4

Did an emergency occur in any part of the water system? yes no
 Does the system have a chlorination waiver? yes no

Source: Ground Water

Day of Month	CHLORINATION				pH		Totalizer Daily Totalizer 1324835
	Treated Water	Liquid Sodium Hypochlorite		Free Cl ₂	Lime	Totalizer	
		Gallons	Cl ₂ use per 24hrs	Residual mg/l	Sodium Hydroxide		
1	0						
2	0						
3	0	145	0	NR	NR		1324835
4	223	145	0	0	6.3		1325058
5	51	145	0	0	6.3		1325109
6	258	145	0	0	6.3		1325367
7	108	145	0	0	6.3		1325475
8	0						
9	0						
10	126	145	0	0	6.3		1325601
11	293	145	0	0	5.9		1325894
12	258	145	0	0	5.9		1326152
13	468	145	0	0	5.9		1326620
14	177	145	0	0	5.9		1326797
15	0						
16	0						
17	1,428	60	0	0.9	6		1328225
18	454	60	0	0.1	6		1328679
19	491	60	0	0.07	6		1329170
20	604	60	0	0.07	5.9		1329774
21	482	60	0	0.06	5.9		1330256
22	0						
23	0						
24	1,891	60	0	0	5.9		1332147
25	477	60	0	0	5.9		1332624
26	780	60	0	0	6.1		1333404
27	692	60	0	0	5.9		1334096
28	746	60	0	0	5.9		1334842
29	0						
30	0						
31	1,980	60	0	0	5.8		1336822
TOT	11,987		0				
Avg	399.57		0.00	No. Days:	30		

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes No

If yes, check reason's below.

Actual number of samples fewer than required.

Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

Failure to analyze repeat samples.

Does an MCL violation exist? no

If yes, check reason(s) below.

Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

Positive E. Coli result followed by a positive total coliform repeat sample

Positive total coliform result followed by a positive E. Coli repeat sample.

Recorded by: [Signature]

Date: 5-8-00

Title: WATER SYSTEMS SUPERVISOR

Cert. #: 05650

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169 STATION 11515100 SUFFOLK COUNTY REPORTING PERIOD : **APRIL 2000**

LOCATION: WELL NO. 7

Did an emergency occur in any part of the water system? yes _____ no
 Does the system have a chlorination waiver? yes _____ no

Source: Ground Water

Day of Month	CHLORINATION				pH		Totalizer Daily Totalizer
	Treated Water K. Gals	Liquid Sodium Hypochlorite		Free Cl ₂ Residual mg/l	Lime	Sodium Hydroxide	
		Gallons	Cl ₂ use per 24hrs		Sodium		
1	0						14670
2	0						
3	70	170	0	0.2	6.3		14740
4	1,272	155	15	0.2	6.3		16012
5	1,429	140	15	0.2	6.1		17441
6	993	121	19	0.2	6.1		18434
7	476	120	1	0	6.3		18910
8	0						
9	0						
10	135	102	18	0	6.3		19045
11	34	83	19	0	5.9		19079
12	630	48+60	35	0	5.9		19709
13	1,043	88	20	0	5.9		20752
14	824	60+125	28	0	5.9		21576
15	0						
16	0						
17	3,660	120	65	0.9	6		25236
18	1,100	90	30	0.1	6		26336
19	1,061	139+61	29	0.07	6		27397
20	1,108	179	29	0.07	6		28505
21	863	150	29	0.06	5.9		29368
22	0						
23	0						
24	3,382	60+125	90	0	5.9		32750
25	1,028	160	25	0.09	5.9		33778
26	1,426	125	35	0	6.1		35204
27	1,102	95	35	0	5.9		36306
28	1,088	65+75	30	0	5.9		37394
29	0						
30	0						
31	2,032	60	80	0	5.8		39426
TOT	24,756		647				0
Avg	825.20		21.57	No. Days:	30		

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes _____ No

If yes, check reason's below.

_____ Actual number of samples fewer than required.

_____ Failure to analyze for E. Coli: if there was a positive result for total coliform from routine, repeat of high turbidity sample.

_____ Failure to analyze repeat samples.

Does an MCL violation exist? no

If yes, check reason(s) below.

_____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

_____ Positive E. Coli result followed by a positive total coliform repeat sample.

_____ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: JL Ross

Date: 5-8-00

Title: WATER SYSTEMS SUPERVISOR

Cert #: 05650

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169 STATION 11515100 SUFFOLK COUNTY REPORTING PERIOD : APRIL 2000

LOCATION: WELL NO. 10

Source: Ground Water

Did an emergency occur in any part of the water system? yes _____ no ✓
 Does the system have a chlorination waiver? yes _____ no ✓

Day of month	CHLORINATION					pH	Totalizer Daily Totalizer 763512
	Treated Water	Liquid Sodium Hypochlorite		Free Cl ₂ Residual	Lime Sodium Hydroxide		
	K Gals	Gallons	Cl ₂ use per 24hrs	mg/l			
1	0						
2	0						
3	0	185	0	NR	NR	763512	
4	0	185	0	NR	NR	763512	
5	0	185	0	NR	NR	763512	
6	0	185	0	NR	NR	763512	
7	0	185	0	NR	NR	763512	
8	0						
9	0						
10	0	185	0	NR	NR	763512	
11	0	185	0	NR	NR	763512	
12	0	185	0	NR	NR	763512	
13	0	185	0	NR	NR	763512	
14	0	185-125	0	NR	NR	763512	
15	0						
16	0						
17	0	60	0	NR	NR	763512	
18	0	60	0	NT	NR	763512	
19	0	60	0	NR	NR	763512	
20	0	60	0	NR	NR	763512	
21	0	60	0	NR	NR	763512	
22	0						
23	0						
24	0	60	0	NR	NR	763512	
25	0	60	0	NR	NR	763512	
26	0	60	0	NR	NR	763512	
27	0	60	0	NR	NR	763512	
28	0	60	0	NR	NR	763512	
29	0						
30	0						
31	0	60	0	NR	NR	763512	
TOT	0		0				0
AVG	0.00		0.00	No Days:	30		

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes _____ No ✓

If yes, check reason's below.

_____ Actual number of samples fewer than required.

_____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

_____ Failure to analyze repeat samples.

Does an MCL violation exist? NO

If yes, check reason(s) below.

_____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or turb) per month.

_____ Positive E. Coli result followed by a positive total coliform repeat sample

_____ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by JR [Signature]

Date: 9-8-00

Title: WATER SYSTEMS SUPERVISOR

Cert. # 05050

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169 STATION 11515100 SUFFOLK COUNTY REPORTING PERIOD : APRIL 2000

LOCATION: WELL NO. 11

Source: Ground Water

Did an emergency occur in any part of the water system? yes ___ no ✓
 Does the system have a chlorination waiver? yes ___ no ✓

Day of month	CHLORINATION				pH		Totalizer Daily Totalizer
	Treated Water	Liquid Sodium Hypochlorite Gallons	Free Cl ₂ Residual	Free Cl ₂ Residual	Lime Sodium	Totalizer	
	K Gals	Cl ₂ use per 24hrs	mg/l	Hydroxide			
1	0						
2	0						
3	1,701	198	0	NR	NR		303301
4	25	197	1	NR	NR		303326
5	47	197	0	NR	7.3		303373
6	234	190	7	0.7	7.3		303607
7	419	190	0	0.5	7.2		304026
8	0						
9	0						
10	4,660	170	20	0.5	7.8		308686
11	165	170	0	0.5	7.8		308851
12	401	169	1	0.5	8		309252
13	178	169	0	0.5	8		309430
14	157	169	0	0.6	8		309587
15	0						
16	0						
17	514	169	0	0.69	7.7		310101
18	6	169	0	0.77	7.1		310107
19	4	169	0	0.69	7.6		310111
20	0	168	1	1.1	7		310111
21	3	168	0	0.71	7.6		310114
22	0						
23	0						
24	2	168	0	0.76	7.5		310116
25	2	168	0	0.9	7.5		310118
26	4	168	0	1	7.5		310122
27	2	168	0	0.6	7.4		310124
28	7	168	0	0.6	7.4		310131
29	0						
30	0						
31	2	168	0	0.9	7.9		310133
TOT	8,533		30				
AVG.	284.43		1.00	No. Days	30		

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes ___ No ✓

If yes, check reason's below.

___ Actual number of samples fewer than required.

___ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

___ Failure to analyze repeat samples.

Does an MCL violation exist? NO

If yes, check reason(s) below.

___ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

___ Positive E. Coli result followed by a positive total coliform repeat sample.

___ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: [Signature]

Date: 5-8-00

Title: WATER SYSTEM SUPERVISOR

Cert. #: 25650

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169 STATION 11515100 SUFFOLK COUNTY REPORTING PERIOD : **APRIL 2000**

LOCATION: WELL NO. 12

Did an emergency occur in any part of the water system? yes ___ no
 Does the system have a chlorination waiver? yes ___ no

Source: Ground Water

Day of month	CHLORINATION				pH		Totalizer Daily Totalizer 212584
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide		
		Gallons	Cl2 use per 24hrs				
1	0						
2	0						
3	4,381	165	25	1	8	216965	
4	3	165	0	0.8	8.1	216968	
5	449	161	4	0.6	8	217417	
6	282	160	1	0.5	8	217699	
7	323	158	2	0.7	8.1	218022	
8	0						
9	0						
10	1,401	148	10	0.5	7.9	219423	
11	339	145	3	0	8	219762	
12	308	142	3	0.6	8	220070	
13	1,166	138	4	0.6	8	221236	
14	476	133	5	0.6	8	221712	
15	0						
16	0						
17	0	133	0	0.67	8	221712	
18	200	132	1	0.61	7.6	221912	
19	610	130	2	0.65	7.9	222522	
20	291	125	5	0.67	7.8	222813	
21	236	125	0	0.6	7.8	223049	
22	0						
23	0						
24	421	121	4	0.7	7.7	223470	
25	4	120	1	0.73	7.9	223474	
26	4	120	0	0.9	7.9	223478	
27	449	119	1	0.7	7.8	223927	
28	245	115	4	0.5	7.8	224172	
29	0						
30	0						
31	425	110	5	0.7	7.9	224597	
TOT	12,013		80				
AVG.	400.43		2.67	No Days:	30		

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection).

Number of actual routine samples 7

Does a M&AR violation exist? yes ___ No

If yes, check reason's below.

___ Actual number of samples fewer than required.

___ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

___ Failure to analyze repeat samples.

Does an MCL violation exist? NO

If yes, check reason(s) below.

___ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

___ Positive E. Coli result followed by a positive total coliform repeat sample

___ Positive total coliform result followed by a positive E. Coli repeat sample

Reported by NO PARK

Date: 5-8-00

Title: WATER SYSTEMS SUPERVISOR

Cert. # 05650



15 Broad Hollow Road, Melville, NY 11747-5076
 531694-3040 . FAX: (631)420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Received : 06-APR-2000 14:50
 Collected By : TB99
 Sample Type : Potable Water

BROOKHAVEN NATIONAL LAB.-BNLM
 70 BELL AVE.
 UPTON, NY 11973
 Federal ID : 5111891

Copies To : SCHD

Lab Number	Collected	Location	Units Method Limits	I. COLI, BACT.	E. COLI	CHLORINE RESIDUAL
20000406-158 ROUTINE DISTRIBUTION	06-APR-2000 10:30	B-49 WATER TOWER	NEGATIVE 06-APR-2000 17:15	NONE SM#9223 NEGATIVE	NONE SM#9223 ABSENT 06-APR-2000 17:15	mg/L SM#4500-C1G N/A 0.5 06-APR-2000
20000406-159 ROUTINE DISTRIBUTION	06-APR-2000 10:15	B-640 WATER TOWER	NEGATIVE 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	0.6 06-APR-2000
20000406-160 ROUTINE DISTRIBUTION	06-APR-2000 07:50	B-1005-RHIC	NEGATIVE 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	0.5 06-APR-2000
20000406-161 ROUTINE DISTRIBUTION	06-APR-2000 08:10	B-363 APARTMENT LAUNDRY	NEGATIVE 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	0.4 06-APR-2000
20000406-162 ROUTINE DISTRIBUTION	06-APR-2000 09:15	B-725 NSLS	NEGATIVE 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	0.6 06-APR-2000
20000406-163 ROUTINE DISTRIBUTION	06-APR-2000 08:42	B-490 BLOCK-1 ACF	NEGATIVE 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	0.5 06-APR-2000
20000406-164 ROUTINE DISTRIBUTION	06-APR-2000 08:55	B-490 BLOCK-4 MRC	NEGATIVE 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15	0.5 06-APR-2000

Date Issued : 04/11/2000

ORIGINAL
 Report for client information only

Jean H. Slavin
 Laboratory Director

LABORATORY RESULTS

Received : 06-APR-2000 14:50
Collected By : TB99
Sample Type : Potable Water

Copies To : SCHD

BROOKHAVEN NATIONAL LAB.-BNLNM
70 BELL AVE.
UPTON, NY 11973
Federal ID : 5111891

Lab Number	Collected	Location	Units Method Limits	T. COLI. BACT.	E. COLI.	CHLORINE RESIDUAL
20000406-165	06-APR-2000	DUPLICATE	NONE SM#9223 NEGATIVE	NONE SM#9223 ABSENT	NONE SM#4500-C1G N/A	0.6 06-APR-2000
ROUTINE DISTRIBUTION			NEGATIVE 06-APR-2000 17:15	ABSENT 06-APR-2000 17:15		

Result(s) reported meet(s) NEW YORK STATE/USEPA limits for Potable Water.