

BROOKHAVEN
NATIONAL LABORATORY

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for the U.S. Department of Energy

May 9, 2003

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

Dear Ms. Kathleen Newcomer:

Subject: Monthly Water Treatment Plant Reports
Reference: Suffolk County Minimum Monitoring Requirements for April 2003

In accordance with the requirements of the BNL Potable Water System Sampling Plan and the 2003 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 Operational and Bacteriological Reports for April.
- Attachment II: April 2003 Biweekly Water Quality Monitoring Data for the BNL Potable Water Wells and Second Quarter Water Quality Data for the BNL Distribution System.
- Attachment III: 2003 Second Quarter Bacteriological Reports for the BNL Potable Water Wells.

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 program, the SCDHS Community Water Supply Monitoring Requirements, and the BNL Potable Water System Sampling Plan. Plant Engineering Division personnel using standard operating procedures collect routine monitoring samples; a contractor laboratory using standard methods of analysis performs the subsequent analyses.



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ISO 14001: 1996

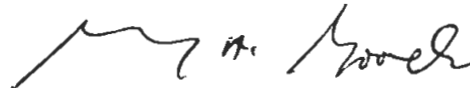


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The Quality Assurance documentation is available from the Environmental Services Division and Plant Engineering Divisions. Based on this information, we believe the values contained in these reports are representative of the BNL potable water system.

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

Sincerely,



George A. Goode
Environmental & Waste Management Services
Division Manager

GAG/MA:car

Attachments: As noted

cc:	M. Allocco	w/attachments
	W. Chaloupka	w/attachments
	J. Granzen	w/attachments
	R. Lee	w/attachments
	E. Murphy	w/attachments
	P. Ponturo, SCDHS	w/o attachments
	L. Ross	w/o attachments
	T. Sheridan	w/o attachments

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ATTACHMENT I

**Brookhaven National Laboratory
Potable Water Supply**

**Monthly Operational and Bacteriological Reports for April 2003
for the BNL Potable Water System**

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: APRIL 2003
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LOCATION: **Water Treatment Facility**

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 12829401
	Treated Water	Liquid Sodium Hypochlorite Gallons	Free Cl2 Residual	Free Cl2 Residual	Lime Sodium Hydroxide	Totalizer	
	K. Gals	190	mg/l	per 24hrs		12830175	
1	774	185	5	0.99	7.8	12830175	
2	654	180+20	5	0.55	8	12830839	
3	644	180	20	0.57	8.2	12831483	
4	696	179	1	0.48	8.1	12832179	
5	0						
6	0						
7	1,782	176	3	0.6	8.6	12833961	
8	590	170	6	0.9	8.2	12834551	
9	596	165+35	5	1	8	12835147	
10	548	194	6	0.82	8.3	12835695	
11	599	190	4	1	7.8	12836294	
12	0						
13	0						
14	1,724	180	10	1.11	7.8	12838018	
15	620	175	5	0.69	7.3	12838638	
16	645	170	5	1.01	9.2	12839283	
17	595	162	8	0.89	8.6	12839878	
18	841	160	2	0.78	7.6	12840719	
19	0						
20	0						
21	3,247	139	21	0.87	7.8	12843966	
22	1,081	130	9	0.84	7.4	12845047	
23	1,093	123	7	0.45	7.4	12846140	
24	1,055	115	8	0.74	7.5	12847195	
25	1,080	102+48	13	0.75	7.3	12848275	
26	0						
27	0						
28	3,215	142	8	0.7	7.4	12851490	
29	774	134+66	8	0.85	7.6	12852264	
30	718	190	10	1	7.6	12852982	
31	0						
TOT	23,581		169				
AVG.	786.03		5.63	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 or high turbidity sample.

Failure to analyze repeat samples

Does an MCL violation exist? YES 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: *J. C. [Signature]*

Date: 5-2-03

Title: Water Systems Supervisor

Certification No NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: APRIL 2003
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LOCATION: WELL NO. 4

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 1554365
	Treated Water K. Gals	Liquid Sodium Hypochlorite		Free Cl ₂ Residual mg/l	Lime Sodium Hydroxide		
		Gallons	Cl ₂ use per 24hrs				
1	269	111	3	0.53	6.1	1554634	
2	265	105+45	6	1.2	6.1	1554899	
3	237	141	9	0.62	6.1	1555136	
4	200	135	6	0.73	6	1555336	
5	0						
6	0						
7	343	132	3	0.02	6	1555679	
8	68	132	0	0.04	6.1	1555767	
9	611	114+36	18	0.24	6	1556578	
10	760	132	18	0.02	6.1	1557338	
11	148	129	3	0.024	6	1557486	
12	0						
13	0						
14	304	125	4	0.22	6.3	1557790	
15	113	123	2	0.41	5.9	1557903	
16	302	117	6	0.4	5.9	1558205	
17	27	116	1	0.4	5.9	1558232	
18	337	111+39	5	0.42	5.9	1558569	
19	0						
20	0						
21	1,695	111	39	0.57	6.1	1560264	
22	458	99	12	0.84	6	1560722	
23	576	90	9	1.2	6.1	1561298	
24	440	90	0	0.46	6	1561738	
25	308	90+60	0	0.21	6	1562046	
26	0						
27	0						
28	563	147	3	0.05	6	1562609	
29	0	147	0	0.017	6.1	1562609	
30	177	138	9	0.02	6.1	1562786	
31	0						
TOT	8,421		156				
AVG.	280.70		5.20	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 or high turbidity sample.

Failure to analyze repeat samples.

Does an MCL violation exist? YES 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]

Title Water Systems Supervisor

Date 5-2-03

Certification No NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169

STATION 11515100

SUFFOLK COUNTY

REPORTING PERIOD:

ARRIL 2003

LOCATION: WELL NO. 6

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
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide	Totalizer	
		Gallons	Cl2 use per 24hrs				
1	211	105	6	0.53	6.1	371809	
2	0	105+45	0	1.2	6.1	372020	
3	72	144	6	0.62	6.1	372092	
4	44	138	6	0.73	6	372136	
5	0						
6	0						
7	0	138	0	NR	NR	372136	
8	0	138	0	NR	NR	372136	
9	103	135	3	NR	NR	372239	
10	25	135	0	NR	NR	372264	
11	21	135	0	NR	NR	372285	
12	0						
13	0						
14	162	131	4	0.22	6.3	372447	
15	0	131	0	0.41	5.9	372447	
16	111	129	3	0.4	5.9	372558	
17	0	129	0	0.4	5.9	372558	
18	95	129	0	0.42	5.9	372653	
19	0						
20	0						
21	377	120	9	0.57	6.1	373030	
22	0	120	0	0.84	6	373030	
23	146	117	3	1.2	6.1	373176	
24	124	114	3	0.46	6	373300	
25	856	90+60	24	0.21	6	374156	
26	0						
27	0						
28	1,398	117	33	0.05	6	375554	
29	146	114	3	0.017	6.1	375700	
30	227	108	6	0.02	6.1	375927	
31	0						
TOT	4,118		109				
AVG.	137.27		3.63	No. Days:	30		

Population Served 3,500

Number of routine samples

cf

(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?

YES 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: *Sieclash*

Date: 5-2-03

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169

STATION 11515100

SUFFOLK COUNTY

REPORTING PERIOD:

APRIL 2003

LOCATION: WELL NO. 7

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
	Treated Water	Liquid Sodium Hypochlorite Gallons	Free Cl2 Residual me/l	Lime Sodium Hydroxide		
1	872	120	15	0.53	6.1	1059292
2	850	102+48	3	1.2	6.1	1061014
3	868	132	18	0.62	6.1	1061882
4	817	117	15	0.73	6	1062699
5	0					
6	0					
7	2,199	81	36	0.02	6	1064898
8	908	66	15	0.04	6.1	1065706
9	124	63+87	3	0.24	6	1065830
10	0	150	0	0.02	6.1	1065830
11	703	129	21	0.024	6	1066533
12	0					
13	0					
14	2,389	90	39	0.22	6.3	1068922
15	800	76	14	0.41	5.9	1069722
16	762	66	10	0.4	5.9	1070484
17	788	53	13	0.4	5.9	1071272
18	1,064	88+112	15	0.42	5.9	1072336
19	0					
20	0					
21	3,446	84	66	0.57	6.1	1075785
22	1,188	63	21	0.84	6	1076973
23	1,207	48	15	1.2	6.1	1078180
24	1,129	27	21	0.46	6	1079309
25	637	70+130	7	0.21	6	1079946
26	0					
27	0					
28	3,754	84	66	0.05	6	1083700
29	952	69+81	15	0.017	6.1	1084652
30	975	132	18	0.02	6.1	1085627
31	0					
TOT	26,325		446			
AVG	877.83		14.87	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?

YES 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:

J.D. Nash

Date:

5-2-03

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169

STATION 11515100

SUFFOLK COUNTY

REPORTING PERIOD:

APRIL 2003

LOCATION: WELL NO. 10

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 764819
	Treated Water K. Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide		
		Gallons	Cl2 use per 24hrs				
1	0	39	0	NR	NR	764819	
2	0	39	0	NR	NR	764819	
3	0	39	0	NR	NR	764819	
4	0	39	0	NR	NR	764819	
5	0						
6	0						
7	0	39	0	NR	NR	764819	
8	0	39	0	NR	NR	764819	
9	0	39	0	NR	NR	764819	
10	0	39	0	NR	NR	764819	
11	0	39	0	NR	NR	764819	
12	0						
13	0						
14	0	39	0	NR	NR	764819	
15	0	30	0	NR	NR	764819	
16	0	30	0	NR	NR	764819	
17	0	30	0	NR	NR	764819	
18	0	30	0	NR	NR	764819	
19	0						
20	0						
21	0	30	0	NR	NR	764819	
22	0	30	0	NR	NR	764819	
23	0	30	0	NR	NR	764819	
24	0	30	0	NR	NR	764819	
25	0	30	0	NR	NR	764819	
26	0						
27	0						
28	0	30	0	NR	NR	764819	
29	0	30	0	NR	NR	764819	
30	0	30	0	NR	NR	764819	
31	0						
TOT	0	0	0				
AVG	0.00		0.00	No. Davs:	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? YES 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: *Ad Kuss*

Date: 5-2-03

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169

STATION 11515100

SUFFOLK COUNTY

REPORTING PERIOD:

APRIL 2003

LOCATION: WELL NO. 11

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 478652
	Treated Water K. Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide	Totalizer	
		Gallons	Cl2 use per 24hrs				
1	2	138	0	0.51	7	478654	
2	32	138	0	0.72	7.1	478656	
3	1,007	123	15	0.84	7.3	479593	
4	1,086	99	24	0.65	7.4	480779	
5	0						
6	0						
7	274	99	0	0.65	7.4	481053	
8	28	93	6	0.14	7.6	481081	
9	79	90+12	3	0.42	7.2	481160	
10	8	102	0	0.45	7.1	481168	
11	0	102	0	0.36	7.5	481168	
12	0						
13	0						
14	1,998	102	0	0.31	7	483166	
15	127	102	0	0.4	7.3	483293	
16	12	102	0	0.4	7.1	483305	
17	8	102	0	0.6	7	483313	
18	4	102	0	1.3	NR	483317	
19	0						
20	0						
21	3	102	0	0.21	7	483320	
22	4	102	0	1.1	7	483324	
23	1	102	0	1.7	7	483325	
24	79	102	0	2.1	7.2	483404	
25	1	102+45	0	NR	NR	483405	
26	0						
27	0						
28	1,142	150	0	0.6	6.5	484547	
29	1,223	135	15	0.83	6.5	485770	
30	1,150	129	6	0.83	7.2	486920	
31	0						
TOT	8,268		69				
AVG	275.60		2.30	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&R 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? YES NO

If yes, check reason(s) below

Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or turbid) 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. Pezz

Date: 5-2-03

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169

STATION 11515100

SUFFOLK COUNTY

REPORTING PERIOD:

APRIL 2003

LOCATION: WELL NO. 12

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
	Treated Water K Gals	Liquid Sodium Hypochlorite Gallons	Free Cl ₂ use per 24hrs	Free Cl ₂ Residual mg/l	— Lime — Sodium Hydroxide		
1	1.068	90	12	1	7.3	622951	
2	915	84+45	6	0.9	8.3	624934	
3	1	129	0	1	7.2	624935	
4	7	129	0	0.65	7.4	624942	
5	0						
6	0						
7	2.189	111	18	1.2	7.8	627131	
8	809	102	9	1.3	7.8	627940	
9	767	96+54	6	1	7.2	628707	
10	758	138	12	1.2	7.2	629465	
11	822	126	12	1.1	7.2	630287	
12	0						
13	0						
14	2.390	105	21	0.55	7.9	632677	
15	862	93	12	0.35	7.8	633539	
16	896	83	10	0.84	7.3	634435	
17	816	78	5	0.4	7.9	635251	
18	180	77+63	1	0.96	NR	635431	
19	0						
20	0						
21	586	132	8	0.63	6.7	636017	
22	269	129	3	0.57	6.7	636286	
23	233	126	3	0.71	6.7	636519	
24	75	126	0	0.97	7.2	636594	
25	313	126+24	0	NR	NR	636907	
26	0						
27	0						
28	936	138	12	0.6	6.1	637843	
29	0	138	0	0.64	7.3	637843	
30	4	138	0	0.62	7.5	637847	
31	0						
TOT	14.896		150				
AVG	496.53		5.00	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&R violation exist? YES NO

If yes, check reason's below.

Actual number of samples lower 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? YES 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. C. Davis

Date: 5-2-03

Title: Water Systems Supervisor

Certification No. NY0031941

4/30/03
Pump Data

MONTHLY GALLONAGE REPORT
APRIL 2003.xls

Date	Well 4	Well 6	Well 7	Well10	Well11	Well12	Daily Total
1	269	211	872	0	2	1,068	2,422
2	265	0	850	0	32	915	2,062
3	237	72	868	0	1,007	1	2,185
4	200	44	817	0	1,086	7	2,154
5	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0
7	343	0	2,199	0	274	2,189	5,005
8	88	0	808	0	28	809	1,733
9	811	103	124	0	79	767	1,884
10	760	25	0	0	8	758	1,551
11	148	21	703	0	0	822	1,694
12	0	0	0	0	0	0	0
13	0	0	0	0	0	0	0
14	304	162	2,389	0	1,998	2,390	7,243
15	113	0	800	0	127	862	1,902
16	302	111	762	0	12	896	2,083
17	27	0	788	0	8	816	1,639
18	337	95	1,064	0	4	180	1,680
19	0	0	0	0	0	0	0
20	0	0	0	0	0	0	0
21	1,695	377	3,449	0	3	586	6,110
22	458	0	1,188	0	4	269	1,919
23	576	146	1,207	0	1	233	2,163
24	440	124	1,129	0	79	75	1,847
25	308	856	637	0	1	313	2,115
26	0	0	0	0	0	0	0
27	0	0	0	0	0	0	0
28	563	1,398	3,754	0	1,142	936	7,793
29	0	146	952	0	1,223	0	2,321
30	177	227	975	0	1,150	4	2,533
31	0	0	0	0	0	0	0
Total	8,421	4,118	26,335	0	8,268	14,896	62,038
			Totalizer This Month		Totalizer Last Month		Total(x1,000) Gallons
		Well 4	1,562,786		1,554,365		8,421
		Well 6	375,927		371,809		4,118
		Well 7	1,085,627		1,059,292		26,335
		Well 10	764,819		764,819		0
		Well 11	486,920		478,652		8,268
		Well 12	637,847		622,951		14,896
AGS Water Supply Meter			458,954		447,062		11892.00
Medical Reactor - Well 105							0.00
Emergency Building - Well 9			6,743,710		6,740,360		3.35

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-001

Sample Information...
Type : Potable Water
Origin: Dist.

Federal ID 5111891

Client ID. : 16027-001

Collected 4/3/2003 8:15:00 AM

Point No 094-273

Received 4/3/2003 3:05:00 PM

Location: B-49 Water Tower

Collected By CLIENT

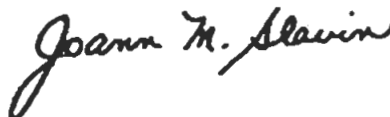
Copy : Original

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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	151	µmhos/cm		E120.1	4/3/2003
PH (FIELD)	7.8	pH units		E150.1	4/3/2003
Temperature	12	°C		E170.1	4/3/2003
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM
Alkalinity, Total (As CaCO3)	23.0	mg/L		M2320 B	4/4/2003 9:44:00 AM
Total Residual Chlorine	0.9	mg/L		M4500-CI G	4/3/2003

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003



Laboratory Manager

BNLM134 S31

U.S. EPA - CLP

1
INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16027-001

Lab Name: H2M LABS, INC.

Contract:

Lab Code: 10478 Case No.

SAS No.:

SDG No.: BNLM134

Matrix (soil/water): WATER

Lab Sample ID: 0304131-001

Level (low/med): LOW

Date Received: 4/3/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7440-70-2	Calcium	9070			P

Color Before: COLORLESS Clarity Before: CLEAR

Texture: _____

Color After: YELLOW Clarity After: CLEAR

Artifacts: _____

Comments:

DATE REPORTED 4/25/03

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-004

Sample Information...
Type : Potable Water
Origin: Dist.

Federal ID 5111891

Client ID. : 16027-004

Collected 4/3/2003 8:58:00 AM Point No 109-19
Received 4/3/2003 3:05:00 PM Location: B-363 Apt.Laundry
Collected By CLIENT

Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	147	µmhos/cm		E120.1	4/3/2003
PH (FIELD)	7.7	pH units		E150.1	4/3/2003
Temperature	12	°C		E170.1	4/3/2003
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM
Alkalinity, Total (As CaCO3)	23.7	mg/L		M2320 B	4/4/2003 9:55:00 AM
Total Residual Chlorine	0.7	mg/L		M4500-CI G	4/3/2003

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003

Joann M. Slavin

Laboratory Manager

BNLM134 S36

U.S. EPA - CLP

1
INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16027-004

Lab Name: H2M LABS, INC.

Contract:

Lab Code: 10478

Case No.

SAS No.:

SDG No.: BNLM134

Matrix (soil/water): WATER

Lab Sample ID: 0304131-004

Level (low/med): LOW

Date Received: 4/3/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7440-70-2	Calcium	10100			P

Color Before: COLORLESS Clarity Before: CLEAR

Texture: _____

Color After: YELLOW Clarity After: CLEAR

Artifacts: _____

Comments:

DATE REPORTED 4/25/03

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-002

Sample Information...
Type : Potable Water
Origin: Dist.

Federal ID 5111891

Client ID. : 16027-002

Collected 4/3/2003 8:40:00 AM Point No 076-408

Received 4/3/2003 3:05:00 PM Location: B-640 Water Tower

Collected By CLIENT

Copy : Original

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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	138	µmhos/cm		E120.1	4/3/2003
PH (FIELD)	7.7	pH units		E150.1	4/3/2003
Temperature	13	°C		E170.1	4/3/2003
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM
Alkalinity, Total (As CaCO3)	53.4	mg/L		M2320 B	4/4/2003 9:49:00 AM
Total Residual Chlorine	1.1	mg/L		M4500-CI G	4/3/2003

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003

Joann M. Slavin

Laboratory Manager

BNLM134 S33

U.S. EPA - CLP

1
INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16027-002

Lab Name: H2M LABS, INC.

Contract:

Lab Code: 10478

Case No.

SAS No.:

SDG No.: BNLM134

Matrix (soil/water): WATER

Lab Sample ID: 0304131-002

Level (low/med): LOW

Date Received: 4/3/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7440-70-2	Calcium	5680			P

Color Before: COLORLESS Clarity Before: CLEAR

Texture: _____

Color After: YELLOW Clarity After: CLEAR

Artifacts: _____

Comments:

DATE REPORTED 4/25/03

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-005

Sample Information...
Type : Potable Water
Origin: Dist.

Federal ID 5111891

Client ID. : 16027-005

Collected 4/3/2003 9:27:00 AM

Point No 075-602

Received 4/3/2003 3:05:00 PM

Location: B-725 NSLS

Collected By CLIENT

Copy : Original

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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM
Total Residual Chlorine	1.2	mg/L		M4500-CI G	4/3/2003

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003

Joann M. Slavin

Laboratory Manager

BNLM134 S37

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-003

Sample Information...
Type : Potable Water
Origin: Dist.

Federal ID 5111891

Client ID. : 16027-003

Collected 4/3/2003 9:10:00 AM

Point No 045-12

Received 4/3/2003 3:05:00 PM

Location: B-1005 RHIC

Collected By CLIENT

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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM
Total Residual Chlorine	1.3	mg/L		M4500-CI G	4/3/2003

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003

Joann M. Slavin

Laboratory Manager

BNLM134 S34

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-006

Sample Information...
Type : Potable Water
Origin: Dist.

Federal ID 5111891

Client ID. : 16027-006

Collected 4/3/2003 9:50:00 AM Point No 084-69

Received 4/3/2003 3:05:00 PM Location: B-490 Block 1 ACF

Collected By CLIENT

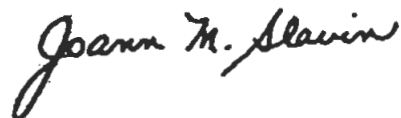
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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM
Total Residual Chlorine	0.5	mg/L		M4500-CI G	4/3/2003

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003



Laboratory Manager

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOHID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-007

Sample Information...
Type : Potable Water
Origin: Dist.

Federal ID 5111891

Client ID. : 16027-007

Collected 4/3/2003 9:40:00 AM

Point No 084-68

Received 4/3/2003 3:05:00 PM

Location: B-490 Block 4 MRC

Collected By CLIENT

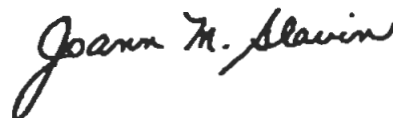
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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM
Total Residual Chlorine	0.6	mg/L		M4500-Cl G	4/3/2003

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003



Laboratory Manager

ATTACHMENT II

**Brookhaven National Laboratory
Potable Water Supply**

**April 2003 Biweekly Water Quality Monitoring Data for
the BNL Potable Water Wells**

and Second Quarter Water Quality Data for the BNL Distribution System

ATTACHMENT III

**Brookhaven National Laboratory
Potable Water Supply**

**2003 Second Quarter Bacteriological Reports for
the BNL Potable Water Wells**

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-008

Sample Information...
Type : Potable Water
Origin: Raw Well

Federal ID 5111891

Client ID. : 16027-008

Collected 4/3/2003 10:23:00 AM Point No 8

Received 4/3/2003 3:05:00 PM Location: Well #4 Raw

Collected By CLIENT

Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003

Joann M. Slavin

Laboratory Manager

BNLM134 S42

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-009

Sample Information...
Type : Potable Water
Origin: Raw Well

Federal ID 5111891

Client ID. : 16027-009

Collected 4/3/2003 10:35:00 AM

Point No 9

Received 4/3/2003 3:05:00 PM

Location: Well #6 Raw

Collected By CLIENT

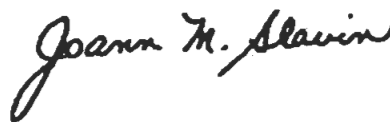
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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003



Laboratory Manager

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-010

Sample Information...
Type : Potable Water
Origin: Raw Well

Federal ID 5111891

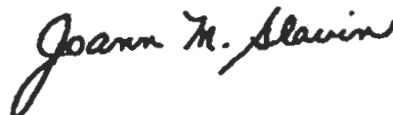
Client ID. : 16027-010

Collected 4/3/2003 10:50:00 AM Point No 10
Received 4/3/2003 3:05:00 PM Location: Well #7 Raw
Collected By CLIENT
Copy : Original
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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003



Laboratory Manager

BNLM134 S48

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOHID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-011

Sample Information...
Type : Potable Water
Origin: Raw Well

Federal ID 5111891

Client ID. : 16027-011

Collected 4/3/2003 11:07:00 AM Point No 12
Received 4/3/2003 3:05:00 PM Location: Well #11 Raw

Collected By CLIENT

Copy : Original

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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003

Joann M. Slavin

Laboratory Manager

BNLM134 S51

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-014

Sample Information...
Type : Potable Water
Origin: Raw Well

Federal ID 5111891
Collected 4/3/2003 11:20:00 AM Point No 13
Received 4/3/2003 3:05:00 PM Location: Well #12 Raw
Collected By CLIENT
Copy : Original
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Client ID. : 16027-014

<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003

Joann M. Slavin

Laboratory Manager

BNLM134 S57

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-016

Sample Information...
Type : Potable Water
Origin: Raw Well

Federal ID 5111891

Client ID : 16027-016

Collected 4/3/2003 12:45:00 PM

Point No 13

Received 4/3/2003 3:05:00 PM

Location: Well #12 Raw

Collected By CLIENT

Copy : Original

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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003

Joann M. Slavin

Laboratory Manager

BNLM134 S60

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-018

Sample Information...
Type : Potable Water
Origin: Treated Well

Federal ID 5111891

Client ID. : 16027-018

Collected 4/3/2003 11:10:00 AM Point No 056-31

Received 4/3/2003 3:05:00 PM Location: Well #11 Gac Filter 655

Collected By CLIENT

Copy : Original

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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003

Joann M. Slavin

Laboratory Manager

BNLM134 S62

FLM LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-013

Sample Information...
Type : Potable Water
Origin: Treated Well

Federal ID 5111891

Client ID. : 16027-013

Collected 4/3/2003 11:27:00 AM

Point No 056-32

Received 4/3/2003 3:05:00 PM

Location: Well #12 Gac Filter 657

Collected By CLIENT

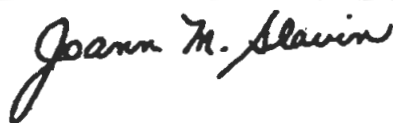
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<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003



Laboratory Manager

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0304131-017

Sample Information...
Type : Potable Water
Origin: Dist.

Federal ID 5111891

Client ID. : 16027-017

Collected 4/3/2003 12:45:00 PM Point No 14

Received 4/3/2003 3:05:00 PM Location: Wf Packed Tower 648

Collected By CLIENT

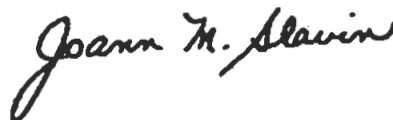
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		Negative	M9223	4/4/2003 10:30:00 AM
E_Coliform	Absent		Absent	M9223	4/4/2003 10:30:00 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

Date Reported : 4/28/2003



Laboratory Manager