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for the U.S. Department of Energy

January 10, 2005

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 December 2004

In accordance with the requirements of the BNL Potable Water System Sampling Plan and the 2004 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 Data for December.
- Attachment II: December 2004 Biweekly Water Quality Monitoring Data for the BNL Distribution System.
- Attachment III: December 2004 Stage 1 Disinfectants & Disinfection Byproduct Rule Monitoring Data and Bacteriological Analyses for the BNL Distribution System.

Collection and analysis of these samples is 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. The Quality Assurance documentation is available from the Environmental and Waste Management 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.

Please note that the flow monitoring equipment which totalizes the amount of water treated by the Water Treatment Facility failed in December. Therefore, the column that summarizes the amount of treated water passing through the Water Treatment Facility on the Water Systems Operation Report does not contain data. Due to the age of the equipment it could not be repaired. New digital equipment has been purchased and is awaiting installation.



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ISO 14001: 1996

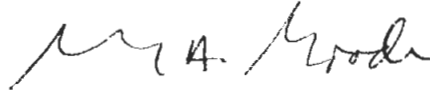


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January 10, 2005

Should there be any questions regarding this report or the analytical or operational data contained herein, please call either M. Allocco at (631) 344-3166, R. Lee at (631) 344-3148, 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
	L. Ambroszkiewicz, SCDHS	w/attachments
	W. Chaloupka	w/attachments
	J. Granzen	w/attachments
	G. Goode	w/o attachments
	R. Lee	w/attachments
	E. Murphy	w/attachments
	P. Ponturo, SCDHS	w/o attachments
	L. Ross	w/o attachments
	J. Tarpinian	w/o attachments
File:	EC61ER.04	

ATTACHMENT I

Brookhaven National Laboratory

Potable Water Supply

Monthly Operational Data for December 2004

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: DECEMBER 2004
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LOCATION: **Water Treatment Facility**

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	
	Treated Water	Liquid Sodium Hypochlorite	Free Cl ₂	Lime	Totalizer	Daily Totalizer
	K. Gals	Gallons	Residual	Sodium		
			Cl ₂ use per 24hrs	mg/l	Hydroxide	13263137
1	0	145	5	0.7	7.5	13263137
2	0	140	5	0.95	7.5	13263137
3	0	135	5	0.5	7.5	13263137
4	0					
5	0					
6	0	122	12	0.96	7.5	13263137
7	0	120	2	1	7.4	13263137
8	0	120	0	0.5	7.4	13263137
9	0	120	0	0.9	7.4	13263137
10	0	118	2	0.51	7.4	13263137
11	0					
12	0					
13	0	100	18	0.77	7.2	13263137
14	0	90	10	0.1	7.2	13263137
15	0	85	5	0.33	7.3	13263137
16	0	80+120	5	0.38	7.3	13263137
17	0	188	18	0.01	7.3	13263137
18	0					
19	0					
20	0	65+135	23	0.25	7.3	13263137
21	0	190	10	0.5	7.5	13263137
22	0	185	5	0.65	7.5	13263137
23	0	175	10	0.36	7.4	13263137
24	0	165	10	0.76	7.7	13263137
25	0					
26	0					
27	0	130	35	0.9	7.7	13263137
28	0	127	3	1	7.3	13263137
29	0	120	7	0.65	7.6	13263137
30	0	110	10	0.64	7.3	13263137
31	0	105	5	0.4	7.5	13263137
TOT	0		205			
AVG.	0.00		6.61	No. Days:	31	

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: *DC Park*

Date: 1-7-05

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: DECEMBER 2004
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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	Treated Water K Gals	CHLORINATION		pH		Totalizer Daily Totalizer 1648622
		Liquid Sodium Hypochlorite Gallons	Free Cl2 Residual mg/l	Lime Sodium Hydroxide		
		Cl2 use per 24hrs				
1	0	0	0	NR	NR	1648622
2	0	0	0	NR	NR	1648622
3	0	0	0	NR	NR	1648622
4	0					
5	0					
6	0	0	0	NR	NR	1648622
7	0	0	0	NR	NR	1648622
8	0	0	0	NR	NR	1648622
9	0	0	0	NR	NR	1648622
10	0	0	0	NR	NR	1648622
11	0					
12	0					
13	0	0	0	NR	NR	1648622
14	0	0	0	NR	NR	1648622
15	0	0	0	NR	NR	1648622
16	0	0	0	NR	NR	1648622
17	0	0	0	NR	NR	1648622
18	0					
19	0					
20	0	0	0	NR	NR	1648622
21	0	0	0	NR	NR	1648622
22	0	0	0	NR	NR	1648622
23	0	0	0	NR	NR	1648622
24	0	0	0	NR	NR	1648622
25	0					
26	0					
27	0	0	0	NR	NR	1648622
28	0	0	0	NR	NR	1648622
29	0	0	0	NR	NR	1648622
30	0	0	0	NR	NR	1648622
31	0	0	0	NR	NR	1648622
TOT	0		0			
AVG.	0.00		0.00	No. Days:	31	

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: *JG Morris*

Date: 1-7-05

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: DECEMBER 2004

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	Liquid Sodium Hypochlorite	Free Cl ₂	Lime	Sodium Hydroxide	Totalizer	
	K Gals	Gallons	Residual	mg/l			
		144	per 24hrs			507787	
1	379	132	12	0.13	6.1	508166	
2	404	127	5	0.04	6.1	508570	
3	273	115+35	12	0.75	5.9	508843	
4	0						
5	0						
6	859	111	39	0.15	6.1	509702	
7	232	96	15	1.6	6.1	509934	
8	328	81	15	1.9	6.1	510262	
9	274	57	24	1.5	6.1	510536	
10	298	35+91	22	0.19	6.1	510834	
11	0						
12	0						
13	742	75	51	0.04	6	511576	
14	215	69	6	0.01	6	511791	
15	194	57	12	0.9	6	511985	
16	279	36	21	0.72	6.1	512264	
17	326	27+123	11	0.01	6.1	512590	
18	0						
19	0						
20	570	135	15	0.05	6.1	513160	
21	44	135	0	0.03	6.1	513204	
22	304	120+30	15	0.23	6.1	513508	
23	345	135	15	0.03	6.1	513854	
24	134	126	9	0.03	6.1	513988	
25	0						
26	0						
27	791	102	24	0.07	6.1	514779	
28	214	96	6	0.23	6.1	514993	
29	286	90+33	6	0.25	6	515279	
30	197	128	0	0.03	6.2	515476	
31	40	128	0	1.15	6	515516	
TOT	7,729		335				
AVG	249.32		10.81	No. Days:	31		

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 2

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: [Signature]

Title: Water Systems Supervisor

Date: 1-7-05

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: DECEMBER 2004
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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		Free Cl ₂ Residual	Lime Sodium Hydroxide	Totalizer	
		Gallons	Cl ₂ use per 24hrs				
1	1,042	108	27	0.13	6.1	1574160	
2	923	85	23	0.04	6.1	1575093	
3	878	65+85	10	0.75	5.9	1575961	
4	0						
5	0						
6	1,988	102	48	0.96	6.1	1577949	
7	578	87	15	1.62	6.1	1578527	
8	735	75	12	1.9	6.1	1579262	
9	569	63	12	1.9	6.1	1579831	
10	696	50+100	13	0.19	6.1	1580527	
11	0						
12	0						
13	1,802	147	3	0.04	6	1582329	
14	750	147	0	0.01	6	1583079	
15	665	135	12	0.9	6	1583744	
16	594	123	12	0.72	6.1	1584338	
17	722	111+39	12	0.01	6.1	1585060	
18	0						
19	0						
20	2,022	123	27	0.05	6.1	1587082	
21	689	108	15	0.03	6.1	1587771	
22	739	90+60	18	0.23	6.1	1588510	
23	941	132	18	0.03	6.1	1589451	
24	897	132	0	0.03	6.1	1590348	
25	0						
26	0						
27	2,352	108	24	0.07	6.1	1592700	
28	525	99	9	0.23	6.1	1593225	
29	739	93+57	6	0.25	6	1593964	
30	690	144	6	0.03	6.2	1594654	
31	426		9	1.15	6	1595080	
TOT	21,962		331				
AVG.	708.45		10.68	No. Days:	31		

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 samples.

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: JR Row

Date: 1-7-05

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: DECEMBER

2004

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 770389
	Treated Water	Liquid Sodium Hypochlorite	Free Cl2	Residual	Lime	Totalizer	
	K Gals	Gallons	Cl2 use				
		0	per 24hrs	mg/l		770389	
1	0	0	0	NR	NR	770389	
2	0	0	0	NR	NR	770389	
3	0	0	0	NR	NR	770389	
4	0						
5	0						
6	0	0	0	NR	NR	770389	
7	0	0	0	NR	NR	770389	
8	0	0	0	NR	NR	770389	
9	0	0	0	NR	NR	770389	
10	0	0	0	NR	NR	770389	
11	0						
12	0						
13	0	0	0	NR	NR	770389	
14	0	0	0	NR	NR	770389	
15	0	0	0	NR	NR	770389	
16	0	0	0	NR	NR	770389	
17	0	0	0	NR	NR	770389	
18	0						
19	0						
20	0	0	0	NR	NR	770389	
21	0	0	0	NR	NR	770389	
22	0	0	0	NR	NR	770389	
23	0	0	0	NR	NR	770389	
24	0	0	0	NR	NR	770389	
25	0						
26	0						
27	0	0	0	NR	NR	770389	
28	0	0	0	NR	NR	770389	
29	0	0	0	NR	NR	770389	
30	0	0	0	NR	NR	770389	
31	0	0	0	NR	NR	770389	
TOI	0		0				
AVG.	0.00		0.00	No. Days:	31		

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 lower 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: *Ja Row*

Date: 1-7-05

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: DECEMBER 2004
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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
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl ₂ Residual mg/l	Lime Sodium Hydroxide	Totalizer	
		Gallons	Cl ₂ use per 24hrs				
1	2	60	0	NR	NR	614511	
2	0	60	0	NR	NR	614513	
3	2	60	0	NR	NR	614515	
4	0						
5	0						
6	0	60	0	NR	NR	614515	
7	0	57	0	NR	NR	614515	
8	13	57	0	NR	NR	614528	
9	0	57	0	NR	NR	614528	
10	1	57	0	NR	NR	614529	
11	0						
12	0						
13	0	57	0	NR	NR	614529	
14	0	57	0	NR	NR	614529	
15	4	57	0	NR	NR	614533	
16	0	57	0	NR	NR	614533	
17	0	57	0	NR	NR	614533	
18	0						
19	0						
20	0	57	0	NR	NR	614533	
21	2	57	0	0.75	7	614535	
22	0	57	0	NR	NR	614535	
23	0	57	0	NR	NR	614535	
24	0	57	0	NR	NR	614535	
25	0						
26	0						
27	0	57	0	NR	NR	614535	
28	0	57	0	NR	NR	614535	
29	0	57+93	0	NR	NR	614535	
30	360	129	21	1.16	6.5	614896	
31	429	123	6	NR	NR	615324	
TOT	813		30				
AVG.	26.23		0.97	No. Days:	31		

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 SR Ross

Date: 1-7-05

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: DECEMBER 2004
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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 696036
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide	Totalizer	
		Gallons	Cl2 use per 24hrs				
1	2	57	0	NR	NR	696038	
2	0	57	0	NR	NR	696038	
3	4	57	0	NR	NR	696042	
4	0						
5	0						
6	0	54	3	NR	NR	696042	
7	0	54	0	NR	NR	696042	
8	10	54	0	NR	NR	696052	
9	0	54	0	NR	NR	696052	
10	0	54	0	NR	NR	696052	
11	0						
12	0						
13	0	54	0	NR	NR	696052	
14	0	54	0	NR	NR	696052	
15	3	54	0	NR	NR	696055	
16	0	54	0	NR	NR	696055	
17	0	54	0	NR	NR	696055	
18	0						
19	0						
20	0	54	0	NR	NR	696055	
21	2	54	0	0.51	7	696057	
22	0	54	0	NR	NR	696057	
23	0	54	0	NR	NR	696057	
24	0	54	0	NR	NR	696057	
25	0						
26	0						
27	0	54	0	NR	NR	696057	
28	0	54	0	NR	NR	696057	
29	0	54	0	NR	NR	696057	
30	4	54	0	NR	NR	696061	
31	0	54	0	NR	NR	696061	
TOT	25		3				
AVG	0.81		0.10	No. Days:	31		

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 [Signature]

Date: 1-7-05

Title: Water Systems Supervisor

Certification No: NY0031941

12/31/2004
Pump Data

MONTHLY GALLONAGE REPORT
DECEMBER2004.XLS

Date	Well 4	Well 6	Well 7	Well10	Well11	Well12	Daily Total
1	0	379	1,042	0	2	2	1,425
2	0	404	923	0	0	0	1,327
3	0	273	878	0	2	4	1,157
4	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0
6	0	859	1,988	0	0	0	2,847
7	0	232	578	0	0	0	810
8	0	328	735	0	13	10	1,086
9	0	274	569	0	0	0	843
10	0	298	696	0	1	0	995
11	0	0	0	0	0	0	0
12	0	0	0	0	0	0	0
13	0	742	1,802	0	0	0	2,544
14	0	215	750	0	0	0	965
15	0	194	665	0	4	3	866
16	0	279	594	0	0	0	873
17	0	326	722	0	0	0	1,048
18	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0
20	0	570	2,022	0	0	0	2,592
21	0	44	689	0	2	2	737
22	0	304	739	0	0	0	1,043
23	0	346	941	0	0	0	1,287
24	0	134	897	0	0	0	1,031
25	0	0	0	0	0	0	0
26	0	0	0	0	0	0	0
27	0	791	2,352	0	0	0	3,143
28	0	214	525	0	0	0	739
29	0	286	739	0	0	0	1,025
30	0	197	690	0	360	4	1,251
31	0	40	426	0	429	0	895
Total	0	7,729	21,962	0	813	25	30,529
		Totalizer		Totalizer		Total(x1,000)	
		This Month		Last Month		Gallons	
	Well 4	1,648,622		1,648,622		0	
	Well 6	515,516		507,787		7,729	
	Well 7	1,595,080		1,573,118		21,962	
	Well 10	770,389		770,389		0	
	Well 11	615,324		614,511		813	
	Well 12	696,061		696,036		25	
AGS Water Supply Meter		516,377		513,420		2957.00	
Medical Reactor - Well 105						0.00	
Biology Building - Well 9		6,792,770		6,792,770		0.00	

ATTACHMENT II

Brookhaven National Laboratory

Potable Water Supply

December 2004 Biweekly Water Quality Monitoring Data

for the BNL Distribution System

Attachment II
Table 1 - Summary of Water Quality Analyses
for the BNL Potable Water System
December 2004

Sample Location	Sample Date	pH (SU)	Temperature (Degrees F)	Conductivity (µmhos)	Alkalinity (mg/L)	Calcium (mg/L)
WTP	12/2/04	7.5	53	135	ANR	ANR
WTP	12/7/04	7.4	54	149	ANR	ANR
WTP	12/9/04	7.4	56	149	ANR	ANR
WTP	12/14/04	7.2	53	208	ANR	ANR
WTP	12/16/04	7.3	54	219	ANR	ANR
WTP	12/21/04	7.5	50	143	ANR	ANR
WTP	12/23/04	7.5	50	160	ANR	ANR
WTP	12/28/04	7.3	52	138	ANR	ANR
WTP	12/30/04	7.3	52	147	ANR	ANR
Well 11	12/2/04	6.1	56	144	ANR	ANR
Well 11	12/7/04	6.0	55	166	ANR	ANR
Well 11	12/9/04	6.0	55	154	ANR	ANR
Well 11	12/14/04	6.9	52	182	ANR	ANR
Well 11	12/16/04	6.6	52	186	ANR	ANR
Well 11	12/21/04	7.0	52	139	ANR	ANR
Well 11	12/30/04	6.5	54	114	ANR	ANR

ANR- Analysis Not Required

NR- Not Reported

Note: Field parameters are only conducted for facilities that are in operation on the day of measurement.

ATTACHMENT III

Brookhaven National Laboratory

Potable Water Supply

December 2004 Stage 1 Disinfectants & Disinfection Byproduct Rule

Monitoring Data and Bacteriological Analyses for the BNL Distribution System

Attachment III

December 2004 Stage 1 Disinfectants & Disinfection Byproduct Rule Monitoring Data
 Table II - Maximum Residual Disinfectant Level (MRDL) Compliance

Location	Total Residual Chlorine (mg/L)											
	Jan. 04	Feb. 04	Mar. 04	Apr. 04	May 04	June 04	July 04	Aug. 04	Sept. 04	Oct. 04	Nov. 04	Dec. 04
Bldg. 49 Water Tower	0.8	0.7	1.1	1.0	1.0	0.8	0.8	1.0	0.7	0.8	0.8	0.5
Bldg. 640 Water Tower	0.9	0.6	1.1	0.6	1.0	0.6	0.5	0.5	0.3	0.6	0.5	0.5
Bldg. 363 Apt. Laundry	0.4	0.5	0.9	0.3	0.8	0.4	0.6	0.5	0.6	0.5	0.5	0.4
Bldg. 1005 RHIC	0.4	0.7	0.5	0.4	0.6	0.5	0.6	0.5	0.5	0.5	0.5	0.4
Bldg. 930 LINAC	0.8	NS	1.1	NS	0.9	NS	0.8	NS	0.9	NS	0.8	NS
Bldg. 725 NSLS	NS	0.5	NS	1.7	NS	0.8	NS	0.9	NS	0.7	NS	0.5
Bldg. 490 Outpatient Clinic	0.8	NS	1.0	NS	1.0	NS	0.8	NS	0.7	NS	0.7	NS
Bldg. 490 Block 11	0.8	NS	1.0	NS	1.0	NS	0.6	NS	0.3	NS	0.8	NS
Bldg. 490 Block 1 ACF	NS	0.5	NS	1.0	NS	0.6	NS	0.4	NS	0.8	NS	0.5
Bldg. 490 Block 4 MRC	NS	0.5	NS	1.1	NS	0.6	NS	0.9	NS	0.7	NS	0.5
Monthly Average	0.7	0.6	1.0	0.9	0.9	0.6	0.7	0.7	0.6	0.7	0.7	0.5

NA - Not Applicable

NS- Not Scheduled for sampling

Running Annual Average (mg/L) 0.7 (Total Residual Chlorine)
 MRDL (mg/L) 4.0

H2M LABS, INC.575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 FAX: (631) 420-8436 NYSDOH ID# 10478LABORATORY RESULTS

Brookhaven National Lab.-BNLM

70 Bell Ave.

Upton, NY 11973

Attn To : Marcia Allocco

Lab No. : 0412123-001A

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

Federal ID : 5111891

Client ID. : 19602-001

Collected : 12/3/04 8:45:00 AM

Point No : 094-273

Received : 12/3/04 3:35:00 PM

Location : B-49 Water Tower

Collected By : CLIENT

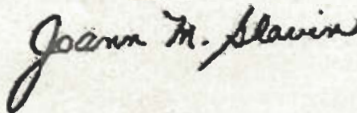
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	12/04/2004 11:30 AM
E_Coliform	Absent		1		Absent	M9223	12/04/2004 11:30 AM
Total Residual Chlorine	0.5		1	mg/L		M4500-Cl G	12/03/2004

Result(s) reported meet(s) Regulatory Limit(s).
 Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
 D.F. = Dilution Factor

Date Reported : 12/8/04



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

Lab No. : 0412123-002A

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

Attn To : Marcia Allocco

Client ID. : 19602-002

Federal ID 5111891

Collected : 12/3/04 10:25:00 AM

Point No : 076-408

Received : 12/3/04 3:35:00 PM

Location : B-640 Water Tower

Collected By : CLIENT

Copy : Original

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Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Method Number	Analyzed
Total Coliform	Negative		1		Negative	M9223	12/04/2004 11:30 AM
E_Coliform	Absent		1		Absent	M9223	12/04/2004 11:30 AM
Total Residual Chlorine	0.5		1	mg/L		M4500-Cl G	12/03/2004

Result(s) reported meet(s) Regulatory Limit(s).
 Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
 D.F. = Dilution Factor

Date Reported : 12/8/04

Joann M. Slavine

Laboratory Manager

H2M LABS, INC.

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

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

LABORATORY RESULTS

Lab No. : 0412123-003A

Sample Information...
 Type : Potable Water
 Origin : Distribution
 Routine

Federal ID : 5111891
 Collected : 12/3/04 10:35:00 AM
 Received : 12/3/04 3:35:00 PM
 Collected By : CLIENT
 Copy : Original

Client ID. : 19602-003

Point No : 045-12
 Location : B-1005 RHIC

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	12/04/2004 11:30 AM
E_Coliform	Absent		1		Absent	M9223	12/04/2004 11:30 AM
Total Residual Chlorine	0.4		1	mg/L		M4500-Cl G	12/03/2004

Result(s) reported meet(s) Regulatory Limit(s).
 Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
 D.F. = Dilution Factor

Date Reported : 12/8/04

Joanna M. Alavin

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 : Marcia Allocco

Federal ID 5111891

Collected : 12/3/04 1:15:00 PM

Received : 12/3/04 3:35:00 PM

Collected By : CLIENT

Copy : Original

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Lab No. : **0412123-004A**

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

Client ID. : 19602-004

Point No : 109-19

Location : B-363 Apt.Laundry

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	12/04/2004 11:30 AM
E_Coliform	Absent		1		Absent	M9223	12/04/2004 11:30 AM
Total Residual Chlorine	0.4		1	mg/L		M4500-Cl G	12/03/2004

Result(s) reported meet(s) Regulatory Limit(s).
 Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
 D.F. = Dilution Factor

Date Reported : 12/8/04



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 : Marcia Allocco

Federal ID 5111891

Collected : 12/3/04 10:48:00 AM

Received : 12/3/04 3:35:00 PM

Collected By : CLIENT

Copy : Original

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Lab No. : 0412123-005A

Client ID. : 19602-005

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

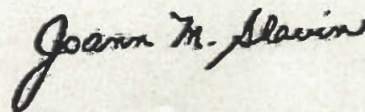
Point No : 075-602

Location : B-725 NSLS

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	12/04/2004 11:30 AM
E_Coliform	Absent		1		Absent	M9223	12/04/2004 11:30 AM
Total Residual Chlorine	0.5		1	mg/L		M4500-Cl G	12/03/2004

Result(s) reported meet(s) Regulatory Limit(s)
 Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
 D.F. = Dilution Factor

Date Reported : 12/8/04



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 : Marcia Allocco

Lab No. : 0412123-006A

Sample Information...
 Type : Potable Water
 Origin : Distribution
 Routine

Federal ID : 5111891
 Collected : 12/3/04 9:25:00 AM
 Received : 12/3/04 3:35:00 PM
 Collected By : CLIENT
 Copy : Original
 CC

Point No : 084-69
 Location : B-490 Block 1 ACF

Client ID. : 19602-006

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Method Number	Analyzed
Total Coliform	Negative		1		Negative	M9223	12/04/2004 11:30 AM
E_Coliform	Absent		1		Absent	M9223	12/04/2004 11:30 AM
Total Residual Chlorine	0.5		1	mg/L		M4500-Cl G	12/03/2004

Result(s) reported meet(s) Regulatory Limit(s).
 Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
 D.F. = Dilution Factor

Date Reported : 12/8/04

Joanna M. Slavina

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 : Marcia Allocco

Lab No. : 0412123-007A

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

Federal ID 5111891

Client ID. : 19602-007

Collected : 12/3/04 9:35:00 AM

Point No : 084-68

Received : 12/3/04 3:35:00 PM

Location : B-490 Block 4 MRC

Collected By : CLIENT

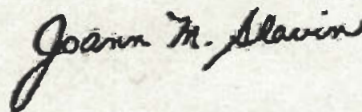
Copy : Original

CC

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Method Number	Analyzed
Total Coliform	Negative		1		Negative	M9223	12/04/2004 11:30 AM
E_Coliform	Absent		1		Absent	M9223	12/04/2004 11:30 AM
Total Residual Chlorine	0.5		1	mg/L		M4500-Cl G	12/03/2004

Result(s) reported meet(s) Regulatory Limit(s).
 Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
 D.F. = Dilution Factor

Date Reported : 12/8/04



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 : Marcia Allocco

Lab No. : 0412123-008A

Sample Information...
 Type : Potable Water
 Origin : Distribution
 Routine

Federal ID : 5111891
 Collected : 12/3/04 10:25:00 AM
 Received : 12/3/04 3:35:00 PM
 Collected By : CLIENT
 Copy : Original
 CC

Client ID. : 19602-008

Point No : 076-408
 Location : B-640 Water Tower → Duplicate

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Method Number	Analyzed
Total Coliform	Negative		1		Negative	M9223	12/04/2004 11:30 AM
E_Coliform	Absent		1		Absent	M9223	12/04/2004 11:30 AM
Total Residual Chlorine	0.5		1	mg/L		M4500-CI G	12/03/2004

Result(s) reported meet(s) Regulatory Limit(s).
 Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
 D.F. = Dilution Factor

Date Reported : 12/8/04

Joann M. Slavin