

BROOKHAVEN
NATIONAL LABORATORY

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

July 9, 2004

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 June 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 and Bacteriological Analyses for June.
- Attachment II: June 2004 Biweekly Water Quality Monitoring Data for the BNL Distribution System and Potable Water Wells.
- Attachment III: June 2004 Stage 1 Disinfectants & Disinfection Byproduct Rule Monitoring Data for the BNL Distribution System.

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. 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.



REGISTERED TO
ISO 14001: 1996

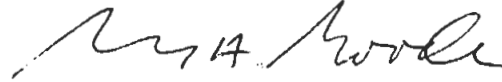


NSF's Registration Program
is accredited by the American
National Standards Institute
Registration Accreditation Board

July 9, 2004

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 and Bacteriological Analyses for June 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: JUNE

2004

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		Totalizer Daily Totalizer
	Treated Water	Liquid Sodium Hypochlorite Gallons	Free Cl2 Residual	Lime Sodium	Totalizer	
	K Gals	Cl2 use per 24hrs	mg/l	Hydroxide		
1	928	140	30	0.79	7.5	13140405
2	1,005	130	10	0.71	7.4	13141410
3	1,139	115	15	0.82	7.4	13142549
4	1,050	105	10	0.81	7.6	13143599
5	0					
6	0					
7	2,008	82	23	1.4	7.7	13145607
8	1,037	70	12	.82	7.7	13146644
9	952	60	10	0.74	7.7	13147596
10	1,101	45	15	0.82	7.6	13148697
11	946	32	13	0.65	7.6	13149643
12	0					
13	0					
14	2,093	200-172	28	1.1	7.4	13151736
15	881	162	10	0.85	7.4	13152617
16	915	150+40	12	0.98	7.3	13153532
17	918	180	10	0.72	7.4	13154450
18	834	171	9	0.66	7.4	13155284
19	0					
20	0					
21	2,070	145	26	0.63	7	13157354
22	718	140	5	0.52	7.6	13158072
23	772	125	15	0.85	7.7	13158844
24	729	115	10	0.91	7.7	13159573
25	730	105	10	1.2	7.6	13160303
26	0					
27	0					
28	2,092	76	29	0.9	7.6	13162395
29	777	64	12	1.1	7.7	13163172
30	795	53	11	0.78	7.6	13163967
31	0					
TOT	24,490		325			
AVG.	816.33		10.83	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 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:

Will A. Cholewa

Date:

7 July 04

Title: ASSISTMGR OPERATIONS

Certification No. NY 0030392

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169

STATION 11515100

SUFFOLK COUNTY

REPORTING PERIOD: JUNE

2004

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 1648622
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl ₂ Residual mg/l	Lime Sodium Hydroxide		
		Gallons	Cl ₂ use per 24hrs				
1	0	120	0	NR	NR	1648622	
2	0	120	0	NR	NR	1648622	
3	0	120	0	NR	NR	1648622	
4	0	120	0	NR	NR	1648622	
5	0						
6	0						
7	0	120	0	NR	NR	1648622	
8	0	120	0	NR	NR	1648622	
9	0	120	0	NR	NR	1648622	
10	0	120-120	0	NR	NR	1648622	
11	0	0	0	NR	NR	1648622	
12	0						
13	0						
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	0	0	NR	NR	1648622	
19	0						
20	0						
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	0	0	NR	NR	1648622	
26	0						
27	0						
28	0	0	0	NR	NR	1648622	
29	0	0	0	NR	NR	1648622	
30	0	0	0	NR	NR	1648622	
31	0						
TOT	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? 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: Willie L. Chalange

Date: 2 JULY 2004

Title: ASSIST. MGR OPERATIONS

Certification No. NY 0030392

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169

STATION 11515100

SUFFOLK COUNTY

REPORTING PERIOD: JUNE

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 Gallons	Free Cl ₂ Residual	Free Cl ₂ Residual	Lime Sodium	Totalizer	
	K Gals	Cl ₂ use per 24hrs	ma/l	Hydroxide			
1	304	120	3	0.06	6.1	445459	
2	301	117	3	0.06	6.3	445760	
3	341	114+36	3	0.02	6.3	446101	
4	343	150	0	0.04	6	446444	
5	0						
6	0						
7	919	108	42	1.2	6.3	447363	
8	371	93	15	0.3	6.2	447734	
9	409	84	9	0.3	6.2	448143	
10	295	81+69	3	0.4	6.2	448438	
11	276	141	9	0.29	6.2	448714	
12	0						
13	0						
14	623	114	27	0.03	6.1	449337	
15	229	108	6	0.01	6.2	449566	
16	210	102	6	0.05	6.2	449776	
17	312	96	6	0.01	6.2	450088	
18	247	96+54	0	0.01	6.2	450335	
19	0						
20	0						
21	615	132	16	0.02	6.1	450950	
22	230	123	9	0.02	6.1	451180	
23	347	108	15	0.03	6	451527	
24	256	96	12	0.06	6.1	451783	
25	243	87+63	9	0	6.1	452026	
26	0						
27	0						
28	914	99	51	NR	NR	452940	
29	354	81	9	0.02	6.1	453294	
30	458	60	21	0.012	6.1	453752	
31	0						
TOT	8,597		276				
AVG.	286.57		9.20	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 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:

Wiel & Choleyka

Date:

2 July 2004

Title: ASSIST. MGR OPERATIONS

Certification No. NY 0030392

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169

STATION 11515100

SUFFOLK COUNTY

REPORTING PERIOD: JUNE

2004

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 Cl2 Residual	Lime Sodium Hydroxide	Totalizer	
		K Gals	Gallons				
1	984	76	14	0.19	6.1	1407937	
2	1,190	58	18	0.06	6.3	1409127	
3	1,316	35+115	23	0.02	6.3	1410443	
4	1,251	138	12	0.04	6	1411694	
5	0						
6	0						
7	2,356	81	57	1.2	6.3	1414050	
8	1,282	63	18	0.3	6.2	1415332	
9	1,251	42	21	0.3	6.2	1416583	
10	1,342	15+135	27	0.4	6.2	1417925	
11	1,126	135	15	0.29	6.2	1419051	
12	0						
13	0						
14	2,266	99	36	0.03	6.1	1421317	
15	1,053	84	15	0.01	6.2	1422370	
16	1,008	69	15	0.01	6.2	1423378	
17	1,100	50	19	0.01	6.2	1424478	
18	1,047	27+123	23	0.01	6.2	1425525	
19	0						
20	0						
21	2,424	114	36	0.02	6.1	1427949	
22	743	102	12	0.02	6.1	1428692	
23	840	93	9	0.03	6	1429532	
24	894	78	15	0.06	6.1	1430426	
25	934	66+84	12	0	6.1	1431360	
26	0						
27	0						
28	2,331	111	39	0.018	6.1	1433691	
29	785	96	15	0.02	6.1	1434476	
30	1,053	78	18	0.012	6.1	1435529	
31	0						
TOT	28,576		469				
AVG.	952.53		15.63	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 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 hrturb) 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: Will & Cholewicki

Date: 2 July 2004

Title: ASSIST MGR OPERATIONS

Certification No. NY 0030392

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: JUNE 2004
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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
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide		
		Gallons	Cl2 use per 24hrs		___	___	
1	0	38	0	NR	NR	769432	
2	0	38	0	NR	NR	769432	
3	0	38	0	NR	NR	769432	
4	0	38	0	NR	NR	769432	
5	0						
6	0						
7	64	38	0	NR	NR	769496	
8	0	38	0	NR	NR	769496	
9	0	38	0	NR	NR	769496	
10	0	38	0	NR	NR	769496	
11	0	38	0	NR	NR	769496	
12	0						
13	0						
14	0	38	0	NR	NR	769496	
15	0	38	0	NR	NR	769496	
16	0	38	0	NR	NR	769496	
17	0	38	0	NR	NR	769496	
18	0	38	0	NR	NR	769496	
19	0						
20	0						
21	0	38	0	NR	NR	769496	
22	0	38	0	NR	NR	769496	
23	0	38	0	NR	NR	769496	
24	0	38	0	NR	NR	769496	
25	0	38	0	NR	NR	769496	
26	0						
27	0						
28	0	38	0	NR	NR	769496	
29	0	38	0	NR	NR	769496	
30	0	38	0	NR	NR	769496	
31	0						
TOT	64		0				
AVG.	2.13		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? 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: Will K. Cholenski

Date: 2 July 2004

Title: ASSIST MGR OPERATIONS

Certification No. NY0030392

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: JUNE 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 Cl2 Residual mg/l	Lime Sodium Hydroxide	Totalizer	
		Gallons	Cl2 use per 24hrs				
1	0	120	0	0.5	6.1	601346	
2	4	120	0	NR	NR	601350	
3	0	120	0	0.4	6	601350	
4	4	120	0	NR	NR	601354	
5	0						
6	0						
7	34	120	0	NR	NR	601388	
8	0	120	0	NR	NR	601388	
9	4	120	0	NR	NR	601392	
10	0	120-54	0	NR	NR	601392	
11	0	66	0	NR	NR	601392	
12	0						
13	0						
14	1	66	0	NR	NR	601393	
15	0	66	0	0.52	7	601393	
16	3	66	0	NR	NR	601396	
17	0	66	0	0.3	6.8	601396	
18	1	66	0	NR	NR	601397	
19	0						
20	0						
21	0	66	0	NR	NR	601397	
22	0	63	3	0.89	7.7	601397	
23	2	63	0	NR	NR	601399	
24	0	63	0	0.34	7.9	601399	
25	2	63	0	NR	NR	601401	
26	0						
27	0						
28	0	63	0	NR	NR	601401	
29	2	63	0	0.44	8	601403	
30	0	63	0	NR	NR	601403	
31	0						
TOT	57		3				
AVG.	1.90		0.10	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 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: Willard Clalok

Date: 2 July 2004

Title: ASSIST MGR OPERATIONS

Certification No. NY 0030392

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: JUNE 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
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide	Totalizer	
		Gallons	Cl2 use per 24hrs				
1	0	135	0	0.3	7.2	684397	
2	122	135	0	NR	NR	684519	
3	0	135	0	0.7	7.2	684519	
4	2	135	0	NR	NR	684521	
5	0						
6	0						
7	25	132	3	NR	NR	684546	
8	0	132	0	NR	NR	684546	
9	11	132	0	NR	NR	684557	
10	0	132	0	NR	NR	684557	
11	2	132	0	NR	NR	684559	
12	0						
13	0						
14	0	132	0	NR	NR	684559	
15	0	132	0	0.64	7.2	684559	
16	2	132	0	NR	NR	684561	
17	0	132	0	0.35	7.1	684561	
18	2	132	0	NR	NR	684563	
19	0						
20	0						
21	0	132	0	NR	NR	684563	
22	0	132	0	0.28	7.5	684563	
23	3	132	0	NR	NR	684566	
24	0	132	0	0.33	7.3	684566	
25	0	132	0	NR	NR	684566	
26	0						
27	0						
28	0	132	0	NR	NR	684566	
29	3	132	0	0.5	7.9	684569	
30	0	132	0	NR	NR	684569	
31	0						
TOT	172		3				
AVG.	5.73		0.10	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 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: Wiel & Cholewicki

Date: 2 July 2004

Title: ASSIST MGR OPERATIONS

Certification No. NY 0030392

7/1/2004
Pump Data

MONTHLY GALLONAGE REPORT
JUNR2004.XLS

Date	Well 4	Well 6	Well 7	Well10	Well11	Well12	Daily Total
1	0	304	984	0	0	0	1,288
2	0	301	1,190	0	4	122	1,617
3	0	341	1,316	0	0	0	1,657
4	0	343	1,251	0	4	2	1,600
5	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0
7	0	919	2,356	64	34	25	3,398
8	0	371	1,282	0	0	0	1,653
9	0	409	1,251	0	4	11	1,675
10	0	295	1,342	0	0	0	1,637
11	0	276	1,126	0	0	2	1,404
12	0	0	0	0	0	0	0
13	0	0	0	0	0	0	0
14	0	623	2,266	0	1	0	2,890
15	0	229	1,053	0	0	0	1,282
16	0	210	1,008	0	3	2	1,223
17	0	312	1,100	0	0	0	1,412
18	0	247	1,047	0	1	2	1,297
19	0	0	0	0	0	0	0
20	0	0	0	0	0	0	0
21	0	615	2,424	0	0	0	3,039
22	0	230	743	0	0	0	973
23	0	347	840	0	2	3	1,192
24	0	256	894	0	0	0	1,150
25	0	243	934	0	2	0	1,179
26	0	0	0	0	0	0	0
27	0	0	0	0	0	0	0
28	0	914	2,331	0	0	0	3,245
29	0	354	785	0	2	3	1,144
30	0	458	1,053	0	0	0	1,511
31	0	0	0	0	0	0	0
Total	0	8,597	28,576	64	57	172	37,466
		Totalizer		Totalizer		Total(x1,000)	
		This Month		Last Month		Gallons	
	Well 4	1,648,622		1,648,622		0	
	Well 6	453,752		445,155		8,597	
	Well 7	1,435,529		1,406,953		28,576	
	Well 10	769,496		769,432		64	
	Well 11	601,403		601,346		57	
	Well 12	684,569		684,397		172	
AGS Water Supply Meter		504,592		504,226			366.00
Medical Reactor - Well 105							0.00
Biology Building - Well 9		6,792,770		6,792,770			0.00

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. : 0406203-001

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

Federal ID 5111891

Client ID. : 19105-001

Collected 6/4/2004 9:00:00 AM

Point No 094-273

Received 6/4/2004 3:40:00 PM

Location: B-49 Water Tower

Collected By CLIENT

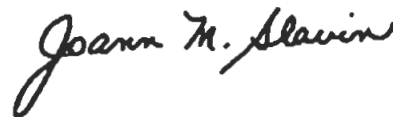
Copy : Original

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	06/04/2004 5:00 PM
E_Coliform	Absent		Absent	M9223	06/04/2004 5:00 PM
Total Residual Chlorine	0.8	mg/L		M4500-Cl G	06/04/2004

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

Date Reported : 6/26/2004



Laboratory Manager

BNLM149 A39

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. : 0406203-002

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

Federal ID 5111891

Client ID. : 19105-002

Collected 6/4/2004 9:35:00 AM

Point No 076-408

Received 6/4/2004 3:40:00 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>
Total Coliform	Negative		Negative	M9223	06/04/2004 5:00 PM
E_Coliform	Absent		Absent	M9223	06/04/2004 5:00 PM
Total Residual Chlorine	0.6	mg/L		M4500-Cl G	06/04/2004

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

Date Reported : 6/26/2004

Page 2 of 13

Joann M. Slavin

Laboratory Manager

BNLM149 A40

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. : 0406203-003

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

Federal ID 5111891

Client ID. : 19105-003

Collected 6/4/2004 9:25:00 AM Point No 109-19
Received 6/4/2004 3:40:00 PM Location: B-363 Apt.Laundry

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	06/04/2004 5:00 PM
E_Coliform	Absent		Absent	M9223	06/04/2004 5:00 PM
Total Residual Chlorine	0.4	mg/L		M4500-Cl G	06/04/2004

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

Date Reported : 6/26/2004

Joann M. Slavin

Laboratory Manager

BNLM149 A41

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. : 0406203-004

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

Federal ID 5111891

Client ID. : 19105-004

Collected 6/4/2004 8:50:00 AM

Point No 045-12

Received 6/4/2004 3:40:00 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	06/04/2004 5:00 PM
E_Coliform	Absent		Absent	M9223	06/04/2004 5:00 PM
Total Residual Chlorine	0.5	mg/L		M4500-CI G	06/04/2004

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

Date Reported : 6/26/2004

Joann M. Slavin

Laboratory Manager

BNLM149 A42

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. : 0406203-005

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

Federal ID 5111891

Client ID. : 19105-005

Collected 6/4/2004 9:15:00 AM Point No 075-602

Received 6/4/2004 3:40:00 PM Location: B-725 NSLS

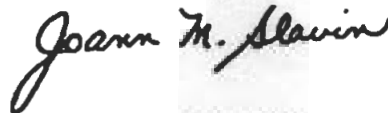
Collected By CLIENT

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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	06/04/2004 5:00 PM
E_Coliform	Absent		Absent	M9223	06/04/2004 5:00 PM
Total Residual Chlorine	0.8	mg/L		M4500-CI G	06/04/2004

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



Date Reported : 6/26/2004

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. : 0406203-006

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

Federal ID 5111891

Client ID. : 19105-006

Collected 6/4/2004 10:20:00 AM Point No 084-69
Received 6/4/2004 3:40:00 PM Location: B-490 Block 1 ACF
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	06/04/2004 5:00 PM
E_Coliform	Absent		Absent	M9223	06/04/2004 5:00 PM
Total Residual Chlorine	0.6	mg/L		M4500-Cl G	06/04/2004

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

Date Reported : 6/26/2004

Joann M. Slavin

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. : **0406203-007**

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

Federal ID 5111891

Client ID. : 19105-007

Collected 6/4/2004 10:15:00 AM Point No 084-68

Received 6/4/2004 3:40:00 PM Location: B-490 Block 4 MRC

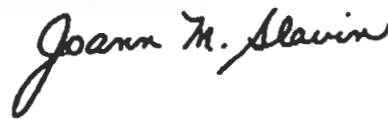
Collected By CLIENT

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	06/04/2004 5:00 PM
E_Coliform	Absent		Absent	M9223	06/04/2004 5:00 PM
Total Residual Chlorine	0.6	mg/L		M4500-CI G	06/04/2004

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



Date Reported : 6/26/2004

Laboratory Manager

BNLM149 A45

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. : 0406203-013

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

Federal ID 5111891

Client ID. : 19105-013

Collected 6/4/2004 9:15:00 AM

Point No 075-602

Received 6/4/2004 3:40:00 PM

Location: B-725 NSLS - Duplicate

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	06/04/2004 5:00 PM
E_Coliform	Absent		Absent	M9223	06/04/2004 5:00 PM
Total Residual Chlorine	0.8	mg/L		M4500-Cl G	06/04/2004

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

Date Reported : 6/26/2004

Joann M. Slavin

Laboratory Manager

ATTACHMENT II

Brookhaven National Laboratory

Potable Water Supply

**June 2004 Biweekly Water Quality Monitoring Data
for the BNL Distribution System and Potable Water Wells**

Attachment III

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

Location	Total Residual Chlorine (mg/L)											
	July 03	Aug. 03	Sept. 03	Oct. 03	Nov. 03	Dec. 03	Jan. 04	Feb. 04	Mar. 04	Apr. 04	May 04	June 04
Bldg. 49 Water Tower	1.2	0.9	1.4	0.9	0.9	0.9	0.8	0.7	1.1	1.0	1.0	0.8
Bldg. 640 Water Tower	0.8	0.9	0.9	0.5	0.9	0.8	0.9	0.6	1.1	0.6	1.0	0.6
Bldg. 363 Apt. Laundry	0.5	1.0	0.8	0.6	0.5	0.9	0.4	0.5	0.9	0.3	0.8	0.4
Bldg. 1005 RHIC	1.1	1.0	0.8	0.6	0.6	1.0	0.4	0.7	0.5	0.4	0.6	0.5
Bldg. 930 LINAC	1.1	NS	1.3	NS	0.9	NS	0.8	NS	1.1	NS	0.9	NS
Bldg. 725 NLS	NS	1.1	NS	0.7	NS	0.6	NS	0.5	NS	1.7	NS	0.8
Bldg. 490 Outpatient Clinic	1.1	NS	1.3	NS	0.6	NS	0.8	NS	1.0	NS	1.0	NS
Bldg. 490 Block 11	0.7	NS	1.2	NS	0.4	NS	0.8	NS	1.0	NS	1.0	NS
Bldg. 490 Block 1 ACF	NS	0.9	NS	0.7	NS	0.8	NS	0.5	NS	1.0	NS	0.6
Bldg. 490 Block 4 MRC	NS	1.1	NS	0.7	NS	1.0	NS	0.5	NS	1.1	NS	0.6
Monthly Average	0.9	1.0	1.1	0.7	0.7	0.9	0.7	0.6	1.0	0.9	0.9	0.6

NS- Not Scheduled for sampling

Running Annual Average (mg/L) 0.8 (Total Residual Chlorine)
 MRDL (mg/L) 4.0

